


	Fm	Pm	N	Pc
22-26 W	XX	XX	XX	

1. Date:		1/9/2013	
2. Type of Well:			
Oil:	XX	Gas:	
3. County:		LEA	

TO BE COMPLETED BY DISTRICT GEOLOGIST			
17. Action taken	18. Pool Name	Pool ID num	
EXTEND	JENNINGS;UPPER BONE SPRING SHALE	97838	
T 25 S, R 32 E		T 26 S, R 32 E	
SEC 28: S/2		SEC 15: All	
SEC 33: All		SEC 20: All	
		SEC 22: All	

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