

REFERENCE SHEET FOR
UNDESIGNATED WELLS

	Fm	Pm	N	Pc
17-21 C	XX	XX	XX	

paragraph

1. Date: 12/2/2013	
2. Type of Well:	
Oil: XX	Gas:
3. County: LEA	

4. Operator: LEGACY REDERVES OPERATING LP		API NUMBER: 30 - 025 - 41305	
5. Address of Operator: PO BOX 10848 MIDLAND TX 797002			
6. Lease name or Unit Agreement Name: HAMON A FEDERAL COM		7. Well Number: # - 3H	
8. Well Location	FTG N/S	N/S	FTG E/W
SLOC	O	474	S
BHLOC	O	336	S
		2004	E
		1832	E
		6	7
		20S	20S
		34E	34E
9. Completion Date: 11/1/2013		11. Pems: TOP 11408	
10. Name of Producing Formation(s): BONE SPRING		12. Open Hole: TOP	
		BOTTOM 16022	
13. C-123 Filed: Y N XX		15. Name of Pool Requested or temporary Wildcat designation: TEAS;BONE SPRING, EAST	
16. Remarks: EXTEND		Pool ID num: 96637	

TO BE COMPLETED BY DISTRICT GEOLOGIST

17. Action taken: EXTEND	18. Pool Name: TEAS;BONE SPRING, EAST	Pool ID num: 96637
T 20 S, R 34 E		
SEC 7: NW/4		

19. Advertised for HEARING:	20. Case Number
21. Name of pool for which was advertised: TEAS;BONE SPRING, EAST	Pool ID num: 96637
22. Placed in Pool	23. By order number: R-

DEC 31 2013

May 2005--UDS-TEA50020-1