

REFERENCE SHEET FOR
UNDESIGNATED WELLS

	Fm	Pm	N
22-26 C	XX	XX	XX

paragraph

1. Date:	8/3/2006
2. Type of Well:	
Oil:	XX Gas:
3. County:	LEA

4. Operator:	POGO PRODUCING CO			API NUMBER:	30 - 025 - 36593
5. Address of Operator	PO BOX 10340 MIDLAND TX 79702-7340				
6. Lease name or Unit Agreement Name	FOXGLOVE 29 FEDERAL			7. Well Number	# - 1
8. Well Location	Unit Letter: L 1500 feet from the S line and 660 feet from the W line Section 29 Township 23S Range 33E				
9. Completion Date:	8/1/2006	11. Perfs	Top	Bottom	TD
			12251	12264	
10. Name of Producing Formation(s)	BONE SPRING		12. Open Hole Casing shoe	Bottom	PBTD
					14342
13. C-123 Filed:	Date	15. Name of Pool Requested or temporary Wildcat designation:	Pool ID num		
Y N XX		TRIPLE X;BONE SPRING	59900		
16. Remarks:	EXTEND				

TO BE COMPLETED BY DISTRICT GEOLOGIST		
17. Action taken	18. Pool Name	Pool ID num
EXTEND	TRIPLE X;BONE SPRING	59900
<p>T 23 S, R 33 E</p> <p>SEC 29: SW/4</p> <p>SEC 32: NW/4 & E/2</p> <p>SEC 33: SW/4</p>		

19. Advertised for HEARING:	20. Case Number
21. Name of pool for which was advertised.	Pool ID num
TRIPLE X;BONE SPRING	59900
22. Placed in Pool	23. By order number
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