

REFERENCE SHEET FOR
UNDESIGNATED WELLS

	Fm	Pm	N	Pc
21-26 W	XX	XX		XX

paragraph

1. Date:	10/27/2008
2. Type of Well:	
Oil:	XX
Gas:	
3. County:	LEA

4. Operator	CHESAPAEKE OPERATING INC		API NUMBER:	30 - 025 - 38907
5. Address of Operator	PO BOX 18496 OKLAHOMA CITY OK 73154-0496			
6. Lease name or Unit Agreement Name	>> LOST TANK 16 STATE		7. Well Number	# - 4
8. Well Location	Unit Letter M Section 330 feet from the S line and 330 feet from the W line Township 21S Range 32E			

9. Completion Date	1/16/2009	11. Perfs	Top	Bottom	TD
			6698	8554	8700
10. Name of Producing Formation(s)	DELAWARE		12. Open Hole Casing shoe	Bottom	PBTD
					8598

13. C-123 Filed	Date	15. Name of Pool Requested or temporary Wildcat designation	Pool ID num
Y	N XX	LOST TANK;DELAWARE	40299
16. Remarks	EXTEND		

TO BE COMPLETED BY DISTRICT GEOLOGIST			
17. Action taken	18. Pool Name	Pool ID num	
EXTEND	LOST TANK;DELAWARE	40299	
<p>T 21 S, R 32 E</p> <p>SEC 16: W/2</p>			

19. Advertised for HEARING	20. Case Number
21. Name of pool for which was advertised	Pool ID num
LOST TANK;DELAWARE	40299
22. Placed in Pool	23. By order number
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