	PENCE SHEET FOR ESIGNATED WELLS 1. Date: 2. Type of Oil W. 3. Coun	ell Gas Well
4. Operator Name: API NUMBER 3D. D25. 20689 5. Address of Operator: API NUMBER 3D. D25. 20689 7. Lease name of Unit Agreement Name: 7. Well No.		
State 8. Well Location		/. Wen 140.
Unit Letter 111: bb0 feet from the 5 line and bb0 feet from the line		
Section / 9. Completion Date:	Township 25 Range 34e	NMPM
	0/16/01 11. Perfs top	bottom 1252
10. Name of Producing Formation:	12. Open Hole casing	shoe PBTD or TD
14. C-123 Filed: 15. Name of Pool Requested: Four Lakes Mississippian (97053)		
16. Remarks Ext W/2	COEFKLMN	360 ac
TO BE COMPLETED BY DISTRICT GEO 17. POOL NAME	LOGIST	18. POOLID #
T S, R E	T S, R E	T S, R E
Sec	Sec	Sec
Sec	Sec	Sec
Sec	Sec	Sec
19. ADVERTISED FOR HEARING:		20. CASE NUMBER:

21. Name of pool for which was advertised.

22a. Placed in Pool

20. CASE NUMBER:

22b. By order number