

## REFYTENCE SHEET FOR UNDESIGNATED WELLS

1. Date: 10	15/01		
2. Type of Well: Oil Well	Gas Well		

		3. County;	.69
4.	Operator Name:		API NUMBER 30-025-30832
5.	Address of Operator:		<i>Q</i> – <i>c</i>
	PDBOX 3193 Midlan	d 1x 79702	
7.	Lease name or Unit Agreement Name:		7. Well No.
	state 8		3
8.	Well Location Unit Letter : 90 feet from the	N line and 990	feet from theline
	Section & Township 165	Range 34e NMPM	
9.	Completion Date:	11. Perfs top	bottom
	9/1/01	10876.	11044
10.	Name of Producing Formation:	12. Open Hole casing shoe	PBTD or TD
	Cisco		
14.	. C-123 Filed: 15. Name of Pool Requeste	ed: a	,
	Kemnitz	Cisco	<35720>
16.	. Remarks		
	Ext		

County;

TO BE COMPLETED BY DISTRICT GEOLOGIST  17. POOL NAME  18. POOLID #								
T	S, R	E	Т	S, R	Е	T	S, R	Е
Sec			Sec			Sec		
Sec			Sec	<u></u>		Sec		
Sec			Sec			Sec		

19. ADVERTISED FOR HEARING:	20. CASE NUMBER:
21. Name of pool for which was advertised.	
22a. Placed in Pool	22b. By order number