

REFERENCE SHEET FOR UNDESIGNATED WELLS

1. Date:	3/20/01
2. Type of Well:	Oil Well Gas Well
3. County:	Lea

4. Operator Name: David H Arrington Oil & Gas Inc		API NUMBER 30-025-35029
5. Address of Operator: PO Box 2071 Midland Tx 79702		
7. Lease name or Unit Agreement Name: Maxfly 14 State		7. Well No. 9
8. Well Location Unit Letter P : 275 feet from the S line and 1057 feet from the E line Section 14 Township 16S Range 35E NMPM		
9. Completion Date: 8/26/01	11. Perfs top 11280	bottom 11324
10. Name of Producing Formation: Strawn	12. Open Hole casing shoe	PBTD or TD
14. C-123 Filed:	15. Name of Pool Requested: North Shoe Bar Strawn <56270>	
16. Remarks Ex4 160 ac IJOP		

TO BE COMPLETED BY DISTRICT GEOLOGIST					
17. POOL NAME				18. POOLID #	
T	S, R	E	T	S, R	E
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	22b. By order number

