

REF_RENCE SHEET FOR UNDESIGNATED WELLS

1. Dat	e: //	23/03	
2. Typo	e of Well: Well	Gas Well	
3. Co	unty;	2a	

4.	Operator Name: David H Arrington	8,100	Gas Inc	API NUMBER		
5.	5. Address of Operator: PD Box 2071 Midland TX 79702					
7.	Lease name or Unit Agreement Name:		· ·	7. Well No.		
8.	Well Location Unit Letter P: bb feet	from the	line and 660	feet from theline		
	Section / 5 Tov	vnship 155	Range 35e NMPM			
9.	Completion Date:	/ /	11. Perfs top	bottom		
)	11/4	06/02	12396	12413		
10.	Name of Producing Formation:	· ·	12. Open Hole casing shoe	PBTD or TD		
	Ktok	a				
14.		f Pool Requested:	Hoka	(97251)		
16.	Remarks Create. 32	Dac	E/2 ABGHI	JOP		

TO BE	COMPLETED BY	DISTRICT (GEOLOGIST					
17. POOL NAME								
Т	S, R	Е	Т	S, R	Е	Т	S, R	Е
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	22b. By order number