

## REFF RINCE SHEET FOR UNDESIGNATED WELLS

1. Date: 1/2	2/02
2. Type of Well: Oil Well	Gas Well
3. County;	ea

	4. Operator Name: David H Arrington Bil4 Gas Inc					API NUMBER 30-025-35369	
5.	Address of Operator:	7		_			
	PD Box 2	2071 Mic	dland Ix	79703	3		
7.	Lease name or Unit A	greement Name: HOPPC1				7. Well No.	
8.	Well Location Unit Letter		feet from the	line and	660	feet from the	line
	Section	18	Township	Range 155	NMPM	35e	<u>-</u> .
9.	Completion Date:	12/-	101	11. Perfs top	118	bottom 12928	
10	Name of Producing Fo	ormation:		12. Open Hole cas	ing shoe	PBTD or TD	
'	Timmo of Liousening I		rrow		_		
14	C-123 Filed:	15. Nam	ne of Pool Requeste	d:			
```	North Eidson Morrow (76360)						
16	Remarks						6
	Ext. 320ac ABGHIJOP E/2						

	COMPLETED BY OOL NAME	DISTRICT	GEOLOGIST				18. POOLID #	
T	S, R	Е	Т	S, R	E	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