

REFERENCE SHEET FOR UNDESIGNATED WELLS

1. Date:	7/1/02
2. Type of Well:	<u>Oil Well</u> Gas Well
3. County:	Lea

4. Operator Name:		API NUMBER	
Vates Petroleum Corp		30-D25-28197	
5. Address of Operator:			
105 South 4 th Street Artesia NM 88210			
7. Lease name or Unit Agreement Name:			7. Well No.
Vacuum State			3
8. Well Location			
Unit Letter	D	: 660 feet from the	N line and 660 feet from the
Section	10	Township	19s Range 35e NMPM
9. Completion Date:		11. Perfs top	bottom
5/9/02		9510	9600
10. Name of Producing Formation:		12. Open Hole casing shoe	PBTD or TD
Bone Spring			
14. C-123 Filed:	15. Name of Pool Requested:		
	Scharb Bone Spring <55610>		
16. Remarks			
Ext 8Dac C & D			

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	