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REF RENCE SHEET FOR UNLESIGNATED WELLS

	1. Date: / 8 /// 2. Type of Well: Oil Well Gas Well 3. County;
	LEL
Operator Name: Texaco EAP Inc	API NUMBER 30-025-35039
Address of Operator:	

4.	Operator Name: TEXACO EAP Inc		30-025-35039
5.	Address of Operator:		
	PD Box 3109 Midlan	d Tx 79702	
7.	Lease name or Unit Agreement Name:		7. Well No.
	Caylor 6		
8.	Well Location //	< 1650	feet from the W line
	Unit Letter : 23 (6) feet from the	$\frac{5}{2}$ line and $\frac{1650}{2}$	feet from theline
	Section 6 Township 175	Range 37e NMPM	
9.	Completion Date:	11. Perfs top	bottom
	1/4/00	8020	8160
10.	Name of Producing Formation:	12. Open Hole casing shoe	PBTD or TD
	Drinkard		
14.	C-123 Filed: 15. Name of Pool Requeste	d:	
		in Drinkard	(40490)
16.			· /
	Ext		

TO BE COMPLETED BY DISTRICT GEOLOGIST								
	POOL NAME						18. POOLID#	
T	S, R		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