

## REF 'ENCE SHEET FOR UNDESIGNATED WELLS

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1. Date:	4/2/01	
2. Type of Oil Well	Well: Gas Well	
3. County;	100	

4.	Operator Name:				APIN	UMBER	
	Harvey Elales Co				30	-025-:	35056
5.	Address of Operator:			· · · · · · · · · · · · · · · · · · ·			
	POBOX 1933 KOSW	ell Ni	n &	18202			
7.	Lease name or Unit Agreement Name:			, , , , , , , , , , , , , , , , , , , ,	7.	Well No.	
	Bola / Federal						
8.	Well Location		,	1000	•	6	
	Unit Letter D : 330 feet	t from the	/ li	ne and <u>1980</u>	feet from	the <u>E</u>	line
	Section 7 To	wnship 185	Range	32e NMPN	1		
9.	Completion Date:	, ,	11. Perfs	top	i	bottom	
	1/	/3/01		9429		9446	0
10.	Name of Producing Formation:		12. Open	Hole casing shoe		PBTD or T	D
	Bone S	Pring					
14.	C-123 Filed: 15. Name o	Pool Requested	l: _				
	N 9/	Jung	Bone	2 Sprin	Q	< 653	50>
16.	Remarks	7	·		/		
	Ext	-					

ТОІ	TO BE COMPLETED BY DISTRICT GEOLOGIST							
17. POOL NAME				18. POOLID#				
Т	S, R	Е	Т	S, R	Е	Т	S, R	Е
Sec	<b>:</b>		Sec			Sec		
Sec	·		Sec			Sec		
Sec	<u> </u>		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