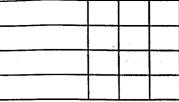
## REF TENCE SHEET FOR UNDESIGNATED WELLS



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

4.	Operator Name:	arp D	rilling Ir	\C			API NUMBER 30-025-35211
5.	Address of Operator:		7	•		•	
	PD Box	10970	Mial	and	TX		
7.	Lease name or Unit Agre	ement Name:	•		/		7. Well No.
	Hngell Ph	illios	13 Sta-	e			[
8.	Well Location Unit Letter	990	feet from the S	lis	ne and <u>9</u> 0	20	feet from theline
	Section	13	Township 175	Range 3	350	NMPM	
9.	Completion Date:			11. Perfs	top		bottom
		1/9	3/01		71	162	7137
10.	Name of Producing Form	ation:	•	12. Open	Hole casin	g shoe	PBTD or TD
		Blin	ebry		- <del></del>		
14.	C-123 Filed:	15. Na	me of Pool Requested	l:			
		NE	Vacuu	m B	line	bry	(97020)
16.	Remarks					(	
	Extend						

TO BE COMPLETED BY DISTRICT GEOLOGIST								
17. I	POOL NAME						18. POOLID#	
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Sec			Sec		2 2.	Sec		
Sec	į		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	