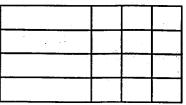


REFE NCE SHEET FOR UNDESIGNATED WELLS



1.	Date:	4/27/01	
2.	Type of We Oil Well	il:' Gas Well	
3.	County;	Lea	

4.	Operator Name: Dr ey fus Natural Gas		API NUMBER 30-025-35253		
5.	14000 Quail Springs Parkway	600 Oklahoma			
7.			7. Well No.		
8.	Well Location Unit Letter	Sline and1650	feet from theline		
	Section 22 Township 195	Range 35 NMPM			
9.	Completion Date:	11. Perfs top	bottom		
	2/13/01	10603	10777		
10.	Name of Producing Formation: Wolfcanp	12. Open Hole casing shoe	PBTD or TD		
15. Name of Pool Requested: Klein Ranch Wolfcamp (96989)					
16. Remarks Ext.					

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