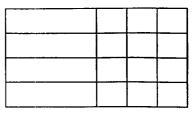


REFL.ENCE SHEET FOR UNDESIGNATED WELLS



1. Date: 4/300	
2. Type of Well: Oil Well Gas Well	
3. County; Lea	

4.	Operator Name:		API NUMBER		
	Harvey Elates 6		30-825-35381		
5.	Address of Operator:				
	PD Box 1933 Roswell 1	m 88202			
7.	Lease name or Unit Agreement Name:		7. Well No.		
	Bola 7 Federal		ス		
8.	Well Location	1)	6		
	Unit Letter A : ObD feet from the	//line and660/	feet from theline		
l	¬	20 mm			
<u> </u>	Section 7 Township 185	Range 320 NMPM			
9.	Completion Date:	11. Perfs top	bottom		
	3/29/01	8704	8754		
10.	Name of Producing Formation:	12. Open Hole casing shoe	PBTD or TD		
	Bone Spring				
14.	C-123 Filed: 15. Name of Pool Requeste	ed:			
	North Young Bone Spring (65350)				
16.	16. Remarks				

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