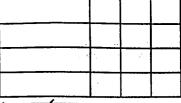


## REFI 3NCE SHEET FOR UNDESIGNATED WELLS



1. Date:	11/17/00	
2. Type of We Oil Well	ll: ' Gas Well	
3. County;	100	

4.	Operator Name: Operating 6		API NUMBER 30-025-34975
5.	Address of Operator:		
	310 WWall Suite 906 Mid	land Tx 79701	
7.	Lease name or Unit Agreement Name:	,	7. Well No.
<u> </u>	Laughlin		
8.	Well Location	1	΄ , ງ
	Unit Letter : 330 feet from the	line and 1830	feet from theline
	Section H Township 205	Range 37e NMPM	
9.	Completion Date:	11. Perfs top	bottom
	8/19/10	6863	6883
10.	Name of Producing Formation:	12. Open Hole casing shoe	PBTD or TD
	Drinkard		
14.	C-123 Filed: 15. Name of Pool Requeste	d:	
	Skaggs	Drinkard	157000
16.			<u> </u>
	Extend		

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