

REFL. ENCE SHEET FOR UNDESIGNATED WELLS



1. Date:	2/15/02	
2. Type of Oil We	Well: Gas Well	
3. Count	Lea	

4.	Operator Name:		
"			API NUMBER
<u> </u>	Trilogy Operating Inc		130-025-35195
5.	Address of Operator:		100000
l	000 200		
	PH Bay 7606 Midland	7 × 79708	
7.	Lease name or Unit Agreement Name:		7 77 11 27
1	HOWSER		7. Well No.
8.			1 2
0.	Well Location	<u> </u>	
	Unit Letter : 660 feet from the	S line and 2310	_feet from the line
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<u> </u>	Section 1 Township 205	Range 38e NMPM	
9.			
	(Omnietion i late:	11 7 0	
٦.	Completion Date:	11. Perfs top	bottom
9.	Completion Date:	11. Perfs top	
	11/21/01	2982	bottom 3102
	Name of Producing Formation:	2982	3102
	Name of Producing Formation:	11. Perfs top 26 12. Open Hole casing shoe	
	Name of Producing Formation:	2982	3102
10.	Name of Producing Formation: Seven Rivers	12. Open Hole casing shoe	3102
10.	Name of Producing Formation: Seven Rivers C-123 Filed: 15. Name of Pool Requested	12. Open Hole casing shoe	3102
10.	Name of Producing Formation: Seven Rivers C-123 Filed: 15. Name of Pool Requested	12. Open Hole casing shoe	3102
10.	Name of Producing Formation: Seven Rivers C-123 Filed: 15. Name of Pool Requested Wildcat	12. Open Hole casing shoe	3102
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10.	Name of Producing Formation: Seven Rivers C-123 Filed: 15. Name of Pool Requested Wildcat	12. Open Hole casing shoe	3102
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TO BE COMPLETED BY DISTRICT G	EOLOGIST					
17. POOL NAME					18. POOLID#	
TO BE COMPLETED BY DISTRICT G 17. POOL NAME T S, R E	T S	S , R	Е	T	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