

REFTRENCE SHEET FOR UNLISIGNATED WELLS

1. Date:	10/15/01	
2. Type of Oil We	Wolf: Gas Well	
3. Count	y; 100	

4.	Operator Name:			API NUMBER 30-025-35434
	Conoco Inc			30-025-35 434
5.	Address of Operator:	~	_	
	10 Desta Dr. Suite 100W 1	Kidland Ti	Y 7	9705
7.	Lease name or Unit Agreement Name:			7. Well No.
	SE M U			153
8.	Well Location	1 0 4	<i>(</i> , 2))
	Unit Letter : 850 feet from the	Sline and _9_t	1	feet from theline
	10 10	20		
	Section 4 Township 203	Range 50 & 1	NMPM	
9.	Completion Date:	11. Perfs top		bottom
	9/6/01	761	17	7733
10.	Name of Producing Formation:	12. Open Hole casing s	hoe	PBTD or TD
	Strawn			
14.	C-123 Filed: 15. Name of Pool Requested	•		
- ''	North Har		2 🖚	L 96893>
		ay onew	11	(600)
16.	Remarks		.)	a . \ /,
	ext 161/ac	KLIIIA	V	5W/4

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