

REFELLINCE SHEET FOR UNDESIGNATED WELLS

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1. Date: 8	28/01	
2. Type of Well: Oil Well	Gas Well	
3. County;	100	

4. Operator Name:		API NUMBER
Chevron USA Inc		30-025-25254
5. Address of Operator:		
PABOX 1150 Midland T	× 79702	
7. Lease name or Unit Agreement Name:		7. Well No.
HT Mattern NCT-C		9
8. Well Location P	S line and 7(D	feet from the $\underline{\mathcal{E}}$ line
34R Unit Letter : UOV feet from the	inte and 70	leet from theime
BHL #2 8-7-218-3767 653/5 4 1484 Section Township 215	Range 370 NMPM	
9. Completion Date:	11. Perfs top	bottom
6/9/01	6785	7(00
10. Name of Producing Formation:	12. Open Hole casing shoe	PBTD or TD
A DD		
14. C-123 Filed: 15. Name of Pool Requested	d:	/ \
Wanta Ab	0	<62700)
16. Remarks Px+ QD ac	Aa D	

ТО	BE COMPLETED BY	DISTRICT	GEOLOGIST				•	
17.								
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Sec			Sec			Sec	•	
Sec Sec	>		Sec			Sec	2	
Sec	2		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