

REFEF ICE SHEET FOR UNDESIGNATED WELLS

,		

1. Date: 8/15/02	
2. Type of Well: Oil Well Gas Well	
3. County; Lea	

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4.	Operator Name:				API NUMBER 30-025-31089	
5.	Address of Operator:	Midlar	d TV	79-) \(\) \(\)	
7.	Lease name or Unit Agreement Name:	11(0)00			7. Well No.	
8.	Tracial					
	Section 31 Tow	nship 2\5 R	lange 324	NMPM		
9.	Completion Date: /	1	1. Perfs to	р	bottom	
	7/2	4/02	7	324	7344	
10.	Name of Producing Formation:	1	12. Open Hole cas	sing shoe	PBTD or TD	
	Delava	re L		-		
14.		Pool Requested:	Delawa	Γ <i>Q</i>	(40299)	
16	Remarks	, juins	10010000			

	BE COMPLETED BY POOL NAME	DISTRICT	GEOLOGIST				18. POOLID#	
T	S, R	E	Т	S, R	Е	T	S, R	Е
Sec			Sec			Sec		
Sec	1		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