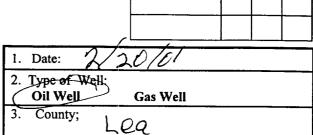


REFL_ENCE SHEET FOR UNDESIGNATED WELLS



4.	Operator Name:			API NUMBER				
	Had	ache Corp		30-025-35226				
5.	Address of Operato	or:	_					
2	2000 Post Bak Blud Suite IDD Houston TX 77056							
7.	Lease name or Unit Agreement Name: 7. Well No.							
	Living	stop		17				
8.	Well Location 1 Unit Letter	1 : 990 feet from the 5	line and 990	feet from the line				
	Section	3 Township 215	Range 376 NMPM					
9.	Completion Date:	/	11. Perfs top	bottom				
		2/1/01	3887	4026				
10.	Name of Producing	Formation:	12. Open Hole casing shoe	PBTD or TD				
		Grayburg						
14.	C-123 Filed:	15. Name of Pool Requested	:	,				
		Penrose S	skelly Graybu	rg (5035V)				
16.	Remarks			7				
	Ext							

TO BE COMPLETED BY DISTRICT GEOLOGIST								
17. POOL NAME						18. POOLID#		
T	S, R	Е	T	S, R	Е	Т	S, R	E
Sec			Sec			Sec		
Sec			Sec			Sec		
Sec	<u> </u>		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