

REFL. ENCE SHEET FOR UNDESIGNATED WELLS

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1. Date:	7/3/01
2. Type of Well Oil Well	ll: Gas Well
3. County;	100

4.	Operator Name: SFS Precating Inc		API NUMBER 30-025-35343		
5.	Address of Operator: 7 20 N Broadway Suite 1500	Oklahoma (H.	DK 73102		
7.	Lease name or Unit Agreement Name: Out (and State Unit		7. Well No.		
8.	Well Location	S line and 660	feet from theline		
	Section 1 Township 215	Range 34e NMPM			
9.	Completion Date:	11. Perfs top	bottom		
	4/12/01	13110	13138		
10.	Name of Producing Formation:	12. Open Hole casing shoe	PBTD or TD		
	Morrow				
14.	C-123 Filed: 15. Name of Pool Request	ed:	,		
	Wilson D	Rorrow	(87460)		
16. Remarks					
	320 ac KRSTU	VWX			

TO BE COMPLETED BY DISTRICT GEOLOGIST								
17. PO	OOL NAME						18. POOLID#	
T	S, R	Е	Т	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