

## REFEK .NCE SHEET FOR UNDESIGNATED WELLS

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/2	6/173		
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1. Date: 3/26/173	
2. Type of Well: Oil Well Gas Well	
3. County; Lea	

4.	Operator Name: Petro leum Corp		API NUMBER 30.025-36049		
5.	Address of Operator:				
	105 5 4th St. Artesia N	M 8821D			
7.	Lease name or Unit Agreement Name:	•	7. Well No.		
	Continental APT Feder	a)	3		
8.	Well Location Unit Letter : UbD feet from the		feet from theline		
	Section 28 Township 235	Range 32e NMPM			
9.	Completion Date: 3/5/03	11. Perfs top 6966	bottom 8664		
10.	Name of Producing Formation:	12. Open Hole casing shoe	PBTD or TD		
	Delaware				
14.	14. C-123 Filed:  15. Name of Pool Requested:  Diamondfail Delaware 5w <96916				
1		er Derabate	Ju They		
16.	Remarks Ex+				

TO BE COMPLETED BY DIS	TRICT GEO	LOGIST					
17. POOL NAME						18. POOLID#	
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19. ADVERTISED FOR HEARING:	20. CASE NUMBER:
21. Name of pool for which was advertised.	
22a. Placed in Pool	22b. By order number