

REFERENCE SHEET FOR
UNDESIGNATED WELLS

1. Date:	2/15/01
2. Type of Well:	<u>Oil Well</u> Gas Well
3. County:	Lea

4. Operator Name:		API NUMBER	
Ray Westall		30-025-24787	
5. Address of Operator:			
PO Box 4 Loco Hills NM 88255			
7. Lease name or Unit Agreement Name:		7. Well No.	
Lusk 16 State		4	
8. Well Location			
Unit Letter <u>I</u> : <u>2030</u> feet from the <u>S</u> line and <u>660</u> feet from the <u>E</u> line			
Section <u>16</u> Township <u>19s</u> Range <u>32e</u> NMPM			
9. Completion Date:		11. Perfs	
6/5/00		top	
		4918	
		bottom	
		6535	
10. Name of Producing Formation:		12. Open Hole casing shoe	
Delaware		PBTD or TD	
14. C-123 Filed:		15. Name of Pool Requested:	
		West Lusk Delaware <41540>	
16. Remarks			
Ext			

TO BE COMPLETED BY DISTRICT GEOLOGIST					
17. POOL NAME				18. POOLID #	
T	S, R	E	T	S, R	E
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	