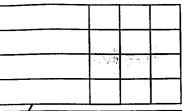


## REFI ENCE SHEET FOR UNDESIGNATED WELLS



|                              | <u> </u> |
|------------------------------|----------|
| 1. Date: 7/1                 | 0/2001   |
| 2. Type of Well:<br>Oil Well | Gas Well |
| 3. County;                   | 20       |

| 4. Operator Name: USA Inc                   |                           | API NUMBER 30-025-25025 |
|---|---------------------------|-------------------------|
|   |                           | 100 000 00005           |
| 5. Address of Operator:                     |                           |                         |
| PDBox 1150 Midland Tx 79                    | 702                       |                         |
| 7. Lease name or Unit Agreement Name:       |                           | 7. Well No.             |
| HT Mattern NCT-C                            |                           | 5                       |
| 8. Well Location —                          | 270                       | feet from the           |
| Unit Letter : PSD feet from the 5           | line and 33 <i>D</i>      | feet from theline       |
|   | 77                        |                         |
| Section 18 Township 213                     | Range 37e NMPM            |                         |
| 9. Completion Date:                         | 11. Perfs top             | bottom                  |
| 2/9/01                                      | 6800                      | 700/ OH                 |
| 10. Name of Producing Formation:            | 12. Open Hole casing shoe | PBTD or TD              |
| Abo   | •                         |                         |
| 14. C-123 Filed: 15. Name of Pool Requested | <u>:</u>                  |                         |
| 14. 0-125 1 hou.                            |                           | 110708                  |
| 1 Wanta HI                                  | <b>30</b>                 | 62100                   |
| 16. Remarks                                 |                           | •                       |
| 10. Kellians                                |                           |                         |
| / /-  |                           |                         |
|   |                           |                         |

| TO BE | TO BE COMPLETED BY DISTRICT GEOLOGIST  17. POOL NAME  18. POOLID # |   |     |      |   |     |      |   |
|-------|--|---|-----|------|---|-----|------|---|
| T     | S, R   | Е | Т   | S, R | Е | T   | S, R | Е |
| Sec   |  |   | Sec |      |   | Sec |      |   |
| Sec   |  |   | Sec |      |   | Sec |      |   |
| Sec   |  |   | Sec |      |   | Sec |      |   |

| 19. ADVERTISED FOR HEARING:                | 20. C | CASE NUMBER:    |
|--|-------|-----------------|
| 21. Name of pool for which was advertised. |       |                 |
| 22a. Placed in Pool                        | 22b.  | By order number |