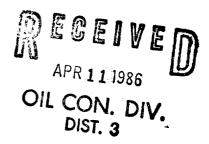
$\omega^{\not |}$

TABULATION OF DEVIATION TESTS AMOCO PRODUCTION COMPANY

DEPTH	DEVIATION
824' 1341' 1897' 2438' 2570' 3048' 3604'	1/4° 1/2° 3/4° 1° 1° 3/4°
4030' 5114' 5604' 6125'	3/4° 1/2° 1/2° 3/4°



AFFIDAVII

THIS IS TO CERTIFY that to the best of my knowledge the above tabulation details the deviation tests taken on AMOCO PRODUCTION COMPANY'S

County, Nev		Signed _	BDShaw
		Title _	Adm. Supervisor
THE STATE OF N	SS.		

BFFORE ME, the undersigned authority, on this day personally appeared

B. D. Shaw known to me to be Adm. Supervisor

to Amoco Production Company and to be the person whose name is subscribed to the above statement, who, being by me duly sworn on oath, states that he has knowledge of the facts stated herein and that said statement is true and sorrect.

SUBSCRIBED AND SWORN to before me, a Notary Public in and for said County and State this with day of Mousember, 1986.

Notary Public

My Commission Expires: June 16, 1989