

INCLINATION REPORT

ONE COPY MUST BE FILED WITH EACH COMPLETION REPORT

Field Name \_\_\_\_\_ County Lea Co., N.M. RRC Dist. No. \_\_\_\_\_  
Operator R. R. Morrison Address V&J Tower City Midland  
Lease Name & No. Federal C Well No. 1 Survey \_\_\_\_\_

RECORD OF INCLINATION

Depth (feet)	Angle of Inclination (degrees)	Displacement (feet)	Accumulative Displacement (feet)
406	1/4		
1000	3/4		
1533	1/2		
2032	1/2		
2234	3/4		
2746	1/4		
3050	1		
3678	1/4		
4000	1-1/4		
4530	1		
5420	1/4		
5955	3/4		
6325	3/4		
6730	3/4		
7030	1/2		
8000	1-1/4		
8395	1/4		
8607	3/4		
8868	3/4		
9060	3/4		
9655	1/2		
9815	1/2		

Total Displacement \_\_\_\_\_

Was survey run in Tubing \_\_\_\_\_ Casing \_\_\_\_\_ Open Hole x  
Distance to nearest lease line \_\_\_\_\_ feet  
Distance to lease lines as prescribed by field rules \_\_\_\_\_ feet

Certification of personal knowledge Inclination Data:

I hereby certify that I have personal knowledge of the data and facts placed on this form, and that such information given above is true and complete.

Thomas C. Brown  
Signature

Tom Brown Drilling Company, Inc.  
Company

Operator Affidavit:

(Note: Party making affidavit must strike out inapplicable phrases, and must file explanatory statement when applicable.)

Before me, the undersigned authority, on this day, personally appeared Thomas C. Brown, known to me to be the person whose name is subscribed hereto, who, after being duly sworn, on oath states that he is the ~~operator of the well identified in this instrument~~ (that he is acting at the direction and on behalf of the operator of the well identified in this instrument), and that such well was not intentionally deviated from the vertical whatsoever. ~~(and that such well was deviated at random for the reason described in the attached statement).~~

Thomas C. Brown  
Signature and Title of Affiant

Sworn and Subscribed to before me, this the 3rd day of July, 1969

L. J. Neill  
Notary Public in and for Midland County, Texas.

RRC Use Only:

Approved By: \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_