

JUL 25 2012

30-025-40500

RECEIVED

1. FIELD NAME	2. LEASE NAME	8. Well Number
SWD; BELL CANYON	WILDER FEDERAL 29	1SWD
3. OPERATOR		
CONOCOPHILLIPS		
4. ADDRESS		10. County
5. LOCATION (Section, Block, and Survey)		LEA
SEC 17, T 26-S, R 32-E, N.M.P.M.		

*11. Measured Depth (feet)	12. Course Length (Hundreds of feet)	*13. Angle of Inclination (Degrees)	14. Displacement per Hundred Feet (Sine of Angle x100)	15. Course Displacement (feet)	16. Accumulative Displacement (feet)
500	5.00	0.90	1.57	7.85	7.85
990	4.90	0.90	1.57	7.70	15.55
1230	2.40	0.60	1.05	2.51	18.06
1500	2.70	0.30	0.52	1.41	19.47
1723	2.23	0.20	0.35	0.78	20.25
1947	2.24	0.70	1.22	2.74	22.99
2171	2.24	0.20	0.35	0.78	23.77
2454	2.83	0.50	0.87	2.47	26.24
2700	2.46	0.20	0.35	0.86	27.10
2930	2.30	0.70	1.22	2.81	29.91
3292	3.62	0.40	0.70	2.53	32.44
3560	2.68	0.40	0.70	1.87	34.31
3834	2.74	0.50	0.87	2.39	36.70
4280	4.46	0.80	1.40	6.23	42.93
4580	3.00	0.40	0.70	2.09	45.02
4800	2.20	0.60	1.05	2.30	47.32

[illegible]

If additional space is needed, use the reverse side of this form.

17. Is any information shown on the reverse side of this form?

☒ yes☐ no

18. Accumulative total displacement of well bore at total depth of _____ feet = _____ feet.

*19. Inclination measurements were made in - ☐ Tubing ☐ Casing ☐ Open hole ☒ Drill Pipe

20. Distance from surface location of well to the nearest lease line _____ feet.

21. Minimum distance to lease line as prescribed by field rules _____ feet.

22. Was the subject well at any time intentionally deviated from the vertical in any manner whatsoever? _____

(If the answer to the above question is "yes", attach written explanation of the circumstances.)

INCLINATION DATA CERTIFICATION

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have personal knowledge of the inclination data and facts placed on both sides of this form and that such data and facts are true, correct, and complete to the best of my knowledge. This certification covers all data as indicated by asterisks (*) by the item numbers on this form.



Signature of Authorized Representative

DANIEL STASIUK RIG MANAGER

Name of Person and Title (type or print)

Precision Drilling Company LP

Name of Company

817-599-7012

Area Code

OPERATOR CERTIFICATION

I declare under penalties prescribed in 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have personal knowledge of all information presented in this report, and that all data presented on both sides of this form are true, correct, and complete to the best of my knowledge. This certification covers all data and information presented herein except inclination data as indicated by asterisks (*) by the item numbers on this form.

Signature of Authorized Representative

Name of Person and Title (type or print)

Operator

Telephone: _____

Area Code

Railroad Commission Use Only:

Approved By: _____ Title: _____ Date: _____