

INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report)		6. District 1
1. FIELD NAME	2. LEASE NAME McNEILL "B"	7. Lease Number. (Oil completions only)
3. OPERATOR L.E. JONES OPERATING, INC.		8. Well Number 4
4. ADDRESS P.O. BOX 1185 DUNCAN, OK 73534		9. Identification Number (Gas completions only)
5. LOCATION (Section, Block, and Survey) Unit F Sec 33-193-38E 1726/W & 2224/W		10. County LEA, NM

RECORD OF INCLINATION

*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)
131	131	1.00	1.75	2.29	2.29
424	293	1.50	2.62	7.67	9.96
923	499	0.50	0.87	4.35	14.31
1397	474	0.50	0.87	4.14	18.45
2126	729	1.00	1.75	12.72	31.17
2623	497	2.25	3.93	19.52	50.69
2810	187	2.75	4.80	8.98	59.66
3059	249	2.00	3.49	8.69	68.36
3310	251	1.75	3.05	7.67	76.02
3783	473	1.25	2.18	10.32	86.34
4280	497	1.25	2.18	10.84	97.18
4783	503	1.25	2.18	10.97	108.16
5277	494	1.00	1.75	8.62	116.78
5752	475	1.50	2.62	12.44	129.22
6246	494	1.00	1.75	8.62	137.84

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 **7410** feet = **162.62** 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 **1726** feet.
21. Minimum distance to lease line as prescribed by field rules **330** feet.
22. Was the subject well at any time intentionally deviated from the vertical in any manner whatsoever? **No**
- (If the answer to the above question is "yes," attach written explanation of the circumstances.)

INCLINATION DATA CERTIFICATION

I declare under penalties 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.

Leslie Laminack
Signature of Authorized Representative

Leslie Laminack, Bookkeeper
Name of Person and Title (type or print)

Star Drilling, Ltd.
Name of Company

Telephone: **(432) 684-5337**
Area Code

OPERATOR CERTIFICATION

I declare under penalties 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.

Becky Sanner
Signature of Authorized Representative

Becky Sanner - Production Secretary
Name of Person and Title (type or print)

L.E. Jones Operating, Inc.
Operator

Telephone: **580-255-1191**
Area Code

Railroad Commission Use Only:

Approved By: _____ Title: _____ Date: _____

* Designates items certified by company that conducted the inclination surveys.

KZ

