Approved By:

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

State of New Mexico

Form W-12 (1-1-71)

PEC 1 1984 OIL AND GAS DIVISION			**************************************	
£ - 4 1 1 100 1	OIE MID ON		6. RRC District	
O. C. D.				
ARTESIA, OFFICE	7. RRC Lease Number. (Oil completions only)			
1. FIELD NAME (as per RRC R	(One Copy Must Be Filed With Each Comp cords or Wildcat) 2. LEASE		8. Well Number	
	<u>.</u>	G Unit	45	
South Red Lake	Grayburg I Shu	O UIII C	9. RRC Identification	
3. OPERATOR			Number (Gas completions only)	
Joe L. Tarver			· · · · · · · · · · · · · · · · · · ·	
4. ADDRESS		_		
3405 - 69th Dri	10. County			
5. LOCATION (Section, Block,	and Survey)		•	
Sec. 35, T17S,	Eddy			

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)
500	5.00	0	0	0	0
1000	5.00	1/2	.87	4.35	4.35
1500	5.00	3/4	1,31	6,55	10.90
1870	3.70	1	1.75	6,48	17.38
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21. Minimum distance to lease line as prescribed by field rules 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 Name of Parson and Title (type of print) Name of Parson and Title (type of print) Joe L. Tarver — Owner Name of Person and Title (type or print) Joe L. Tarver	17. Is any information shown on the reverse side of this form? 18. Accumulative total displacement of well bore at total depth of* *19. Inclination measurements were made in Tubing 20. Distance from surface location of well to the nearest lease line		☐ Drill Pipe feet.
(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 steristic (*) by the item numbers on this form. Signature of Authorized Representative Name of Parson and Title (type of printy). Name of Parson and Title (type of printy).	21 Minimum distance to lease line as prescribed by field rules		
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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 placed on both sides of this form and that such data and facts retrue, correct, and complete to the best of my knowledge. This certification covers all data as indicated by a sterisks (*) by the term numbers on this form. Signature of Authorized Representative Name of Parson and Tatle (type or print) Name of Parson and Tatle (type or print)	(If the answer to the above question is "yes", attach written ex	planation of the circumstances.)	
Name of Company 06 795-9262 Telephone: Area Code Operator Telephone: 806 Area Code	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 tem numbers on this form. Signature of Authorized Representative Name of Parson and Title (type or print) Name of Company Telephone:	I declare under penalties prescri Resources Code, that I am authorize have personal knowledge of all infort that all data presented on both sides complete to the best of my knowledge gnd information presented herein exce asterisks (*) by the item numbers on t Signature of Authorized Representativ JOE L. Tarver — Own Name of Person and Title (type or pri: JOE L. Tarver Operator Telephone: 806 70	and to make this certification, that I mation presented in this report, and so of this form are true, correct, and e. This certification covers all data ept inclination data as indicated by this form. The comment of the comment of the comment of the certification of the certificat
	Railroad Commission Use Only:		

Title:

_ Date:__

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