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)
804	804	3/4	1.31	10.53	10.53
1298	494	1	1.75	8.65	19.18
1793	495	3/4	1.31	6.48	25.66
2226	433	3/4	1.31	5.67	31.33
2617	391	1	1.75	6.84	38.17
2890	273	1	1.75	4.78	42.95

If additional space is needed, use the reverse side of this form. 17. Is any information shown on the reverse side of this form? X no ____yes feet = <u>42.95</u> ____ feet. *19. Inclination measurements were made in - Tubing | Drill Pipe Casing Open hole 20. Distance from surface location of well to the nearest lease line _____ ___ feet. feet. 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? NO_ (If the answer to the above question is "yes", attach written explanation of the circumstances.) INCLINATION DATA CERTIFICATION OPERATOR 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 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. 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 of Authorized Representative /James L. Brazeal-President Mame of Person and Title (type or print)
Brazeal, Inc.-d/b/a CapStar Drilling Name of Person and Title (type or print) Operator Name of Company 214 727-8367 Telephone: Area Code Telephone: Area Code

Railroad Commission Use Only:

Date: Title : _ Approved By: ___

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

Since of NM. County of Eddy

my communion expires. 1-9-88 Pel Rebecca & Dicknow

RECORD OF INCLINATION (Continued from reverse side)

It additional apace is needed, attach separate sheet and check here.	
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Messured Depth 12. Course Length *13. Angle of Hundred Feet Displacement per 15. Course Inclination (Degrees) (Sine of Angle X100) Displacement (feet) Displacement (feet)	

The Commission may require the submittal of the original charts, graphs, or discs, resulting from the surveys.

This report shall be filed in the District Office of the Commission for the district in which the well is drilled, by attaching one

changed. No inclination survey is required on wells that are drilled and completed as dry holes that are plugged and abandoned. (Inclination surveys must be made in accordance with the

copy to each appropriate completion for the well. (except Plugging Report)

provisions of Statewide Rule 11.