

Form W-12
(1-1-71)

| OIL AND GAS DIVISION | | 6. RRC District |
|--|-----------------------------|--|
| INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report.) | | 7. RRC Lease Number. (Oil completions only) |
| 1. FIELD NAME (as per RRC Records or Wildcat) | 2. LEASE NAME E. Millman | 8. Well Number 193 |
| 3. OPERATOR SDX Resources, Inc. | | 9. RRC Identification Number (Gas completions only) |
| 4. ADDRESS 300 W. Texas, Ste 525, Midland, TX 79701 | | 10. County Eddy, NM |
| 5. LOCATION (Section, Block, and Survey) | | |

[illegible]

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 2620 feet = 77.19 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? no

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

| INCLINATION DATA CERTIFICATION | OPERATOR CERTIFICATION |
|--|--|
| <p>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.</p> | <p>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.</p> |
| <p>Signature of Authorized Representative _____ James L. Brazeal - President Name of Person and Title (type or print) Brazeal Inc. d/b/a CapStar Drilling Name of Company Telephone: 214 727-8367 Area Code</p> | <p>Signature of Authorized Representative _____ Name of Person and Title (type or print) Operator Telephone: _____ Area Code</p> |

Approved By: _____ Title: _____ Date: _____

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

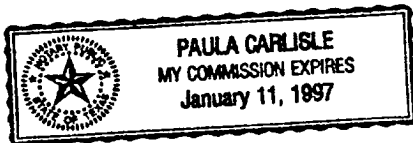
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An inclination survey made by persons or concerns approved by the Commission for each well drilled or deepened with rotary tools or when, as a result of any operation, the course of the well is changed. No inclination survey is required on wells that are drilled and completed as dry holes that are plugged and abandoned. (Inclination surveys are required on re-entry of abandoned wells.) Inclination surveys must be made in accordance with the provisions of Statewide Rule 11.

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

STATE OF TEXAS }
 }
COUNTY OF COLLIN }

The attached instrument was acknowledged before me on the
5th day of March, 1993 by James L. Brazeal as
President of BRAZEAL, INC. d/b/a CapStar Drilling.



Paula Carlisle
Paula Carlisle - Notary Public

My commission expires:
January 11, 1997