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RAILROAD COMMISSION OF TEXAS OIL AND GAS DIVISION

Raibrad Commission Use Only:

Approved By :			Title :
* Designates items certified by	company th	.st conducted the inclination	

- 915 - 381-0910

APR 27	1077	OIL AN	D GAS DIVISION		(11-4-1)
					6. MIC Bishis
D. C.	C. INCI (One Copy	LINATION Must Be Filed With Eac	REPORT the Completion Report.)		· · · · · · · · · · · · · · · · · · ·
J. OPERAWELGC	per RHC Bossels or Wild	-	NICHOLAS H.V	· · · ·	C WE Suite
VATES PE	TROLEUM (ORPORATION			9. per gintellingen ausges
107 SOU	TH FOURTH	STREET	ARTESIA, NEU	MExico 88110	t
990'-FSL-	&-330! FWL o		E INCLINATIO	N	Eddy
*11. Measured Depth (fort)	13. Course Longth (Dumbreds of feet)	•13. Angle of Inclination (Degrees)	14. Displacement per Hundred Foot (Sine of Angle X100)	15. Course Displacement (fees)	14. Annualative Displayers dans
<u> </u>	<u>356</u> 334	V4		1.56	1,56
912	232	1/4		1.46	3.02
1210	288	3/4 3/4		3.03	6.95
1545	335	1-		3.74	9.74
1912	367	1-	1.75	6.42	15:65
1.34/.	434				

1346 1690 3042	434 344 352			6.42 7.59 6.02	22.07 29.66 35.68
<u>3449</u> <u>3698</u> <u>3905</u>	407 241 207	1/2 1/2 1/2	2.61 Vibr	12,28 10.64 6.52	47.96 58.62 65.14
		<i>4</i> +			66.05
17. Is any information 18. Accumulative teta 19. Inclination meanu	shown as the reverse displacement of well rements were made in	bore at total depth of _	3905	toot =lalo	
22. Fas the subject w	to lease line as presc ell at any time intentio	o the nearest lease line ribed by field rules onally deviated from the 'yes'', attach written ex	vertical in any manage		Image: Second
INCLINATION DATA CERTIFICATION I declare under ponalties prescribed in Article 6836c, R.C.S., that I am extherised to make this certification, that I have personal knowledge of the inclination date and fasts placed on both sides of this form and that such date and fasts are true, correct, and complete to the best of my knowledge. This certifications cevers all date as indicated by asterisks (*) by the item numbers on this form.		OPERATOR CERTIFICATION			
	Cullen		Signature of Authorized		
HALL DE	LLINE COMP	ency	Name of Person and Ti Operator	itle (type or print)	

Operator

Telephone: __ Ares Code

Date ; _

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- 11-12

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