Eddy Cty, N.M

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)
200	200	Į,	.87	1.74	1 74
377	177]	1.75	3.10	1.74
560	183	1	1.75	3.20	4.84
720	160	3/4	1.31	2.10	8.04 10.14
965	245	1	1.75	4.29	14.43
1459	494	1	1.75	8.65	23.08
1969	510	1	1.75	8.93	32.01
2368	399	1,2	.87	3.49	35.50
2862	494	1	1.75	8.65	44.15
3016	154	1	1.75	2.70	46.85
3701	685	3/4	1.31	8.97	55.82
4288	587	3/4	1.31	7.69	63.51
4782	494	1/2	.87	4.30	67.81
5500	718	1/2	.87	6.25	74.06

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 5500 67.81 ___feet. 18. Accumulative total displacement of well bore at total depth of *19. Inclination measurements were made in _ Tubing Casing XXDrill Pipe Open hole 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 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 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 asterials (*) by the item numbers on this form. 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. Signature of Authorized Rep Signature of Authorized Representative Betty A Hawk, Secretary Treasurer Name of Person and Title (type or print) Name of Person and Title (type or print) Cimarron Rigs, Inc. Operator Telephone: Area Code ·lephone: . 368 9929

!road Commission Use Only:

3. OPERATOR

4. ADDRESS

5. LOCATION (Section, Block, and Survey)

Sec 12, Township 26

oved By: __ Title ·

ignates items certified by company that conducted the inclination surveys.