TABULATION OF DEVIATION TESTS P.O. Pipkin No. 6E AMOCO PRODUCTION COMPANY

DEVIATION
1/4°
1-7/8°
2-3/4°
2°
1/4°
. 1-1/2°
3°
3°
2-3/4°



AFFIDAVIT

THIS IS TO CERTIFY that to the best of my knowledge the above tabulation details the deviation tests taken on AMOCO PRODUCTION COMPANY'S P.O. Pipkin No. 6E, NW/NE, Section 18, T27N, R10W, San Juan County, New Mexico

Signed Signed Supervisor

Title District Adm. Supervisor

THE STATE OF NEW MEXICO)

SS.

COUNTY OF SAN JUAN

BEFORE ME, the undersigned authority, on this day personally appeared <u>Darrell D. Lawson</u> known to me to be <u>District Administrative Supervisor</u> for Amoco Production Company and to be the person whose name is subscribed to the above statement, who, being by me duly sworn on oath, states that he has knowledge of the facts stated herein and that said statement is true and correct.

SUBSCRIBED AND SWORN to before me, a Notary Public in and for said County and State this 4th day of ______, 19 84.

Notary Public

My Commission Expires: December 28, 1987