

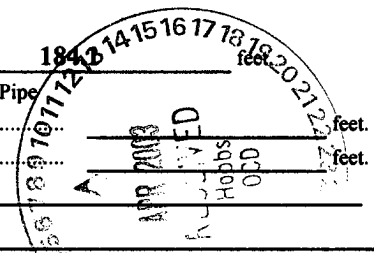
INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report)		6. District
		7. Lease Number. (Oil completions only)
1. FIELD NAME <i>NADINE; DRINKARD - ADD</i>	2. LEASE NAME SELMAN	8. Well Number 1
3. OPERATOR TRILOGY		9. Identification Number (Gas completions only)
4. ADDRESS P.O. BOX 7606 MIDLAND, TEXAS 79708		10. County LEA
5. LOCATION (Section, Block, and Survey) SECTION 11, T19S, R38E <i>Unit J</i> <i>2310/S & 2120/E</i> <i>30-025-36128</i>		

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)
285	285	0.50	0.87	2.49	2.49
560	275	1.25	2.18	6.00	8.49
778	218	1.75	3.05	6.66	15.15
992	214	1.50	2.62	5.60	20.75
1145	153	1.25	2.18	3.34	24.09
1300	155	0.75	1.31	2.03	26.11
1581	281	1.25	2.18	6.13	32.24
1718	137	1.00	1.75	2.39	34.64
1985	267	1.25	2.18	5.83	40.46
2267	282	1.50	2.62	7.38	47.84
2556	289	1.00	1.75	5.04	52.89
2856	300	0.75	1.31	3.93	56.81
3133	277	0.75	1.31	3.63	60.44
3449	316	1.25	2.18	6.89	67.33
3916	467	1.75	3.05	14.26	81.60

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 no
18. Accumulative total displacement of well bore at total depth of 8342 feet = _____ 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? _____
- (If the answer to the above question is "yes," attach written explanation of the circumstances.)



INCLINATION DATA 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 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.

Lisa Wilkes-Richardson
Signature of Authorized Representative

Lisa Wilkes-Richardson, Asst. Secretary
Name of Person and Title (type or print)

Star Drilling Corporation
Name of Company

Telephone: **(915) 684-5337**
Area Code

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.

[Signature]
Signature of Authorized Representative

Trilogy
Name of Person and Title (type or print)

Operator
Operator

Telephone: _____
Area Code

Railroad Commission Use Only:

Approved By: _____ Title: _____ Date: _____

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

