| WELL NAME AND NUMBER | | |
|---|---------------------------------------|---------------------------------------|
| LOCATION Section 18, T10S, R26E, 1980 FNL, 660FWL, Chaves County | | |
| OPERATOR Cheasapeake Operating, Inc. DRILLING CONTRACTOR United Drilling, Inc. | | |
| DRIEDING CONTRACTOR | Omea Druing, Inc. | |
| The undersigned hereby cer | tifies that he is an authorized repre | esentative of the drilling contractor |
| | well and had conducted deviation | test and obtained the following |
| results: | | |
| Degrees @ Depth | Degrees @ Depth | Degrees @ Depth |
| 1/2 @ 268' | 2 @ 2962' | |
| 1/2 @ 568' | 2 @ 3309' | |
| 1 @ 908' | 2 @ 3720' | |
| 1-1/4 @ 1225' | 3/4 @ 4163' | |
| 1-1/4 @ 1572' | 3/4 @ 4637' | |
| 1-1/4 @ 1920' | 1 @ 5111' | |
| 1-1/4 @ 2267' | 1 @ 5726' | |
| 2 @ 2614' | | |
| | Drilling Contractor- | UNITED DRILLING, INC. |
| | | Q · L · |
| | Ву: | MunXarca |
| | | (Luisa Garcia) |
| | Title: | Assistant Office Manger |
| Subscribed and sworn to before me this 14 day of 14 , 2006. | | |
| | | Motary Public |
| | | Chaves NM |
| My Commission Expires: | | County State |
| 10-8-08 | | |