

INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report)		6. District
1. FIELD NAME	2. LEASE NAME Diamond <i>Unit D</i>	7. Lease Number. (Oil completions only)
3. OPERATOR Trilogy	<i>30-025-36221</i>	8. Well Number 3
4. ADDRESS P.O. Box 7606 Midland, TX 79708		9. Identification Number (Gas completions only)
5. LOCATION (Section, Block, and Survey) Sec. 24, T19S, R38E	<i>990/N & 760/W</i>	10. County Lea

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)
286	286	1.75	3.05	8.74	8.74
433	147	0.50	0.87	1.28	10.02
711	278	0.25	0.44	1.21	11.23
991	280	0.50	0.87	2.44	13.67
1271	280	0.75	1.31	3.67	17.34
1553	282	1.25	2.18	6.15	23.49
1715	162	1.50	2.62	4.24	27.73
2028	313	1.75	3.05	9.56	37.29
2312	284	0.75	1.31	3.72	41.01
2593	281	1.00	1.75	4.90	45.92
2998	405	1.00	1.75	7.07	52.98
3187	189	1.00	1.75	3.30	56.28
3684	497	0.75	1.31	6.51	62.79
4184	500	1.00	1.75	8.73	71.51
4310	126	1.00	1.75	2.20	73.71

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 7743 feet = 155.02 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.....
21. Minimum distance to lease line as prescribed by field rules.....
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 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.

Signature of Authorized Representative

Lisa Wilkes-Richardson, Asst. Secretary

Name of Person and Title (type or print)

Star Drilling Corporation

Name of Company

Telephone: **(432) 684-5337**

Area Code

OPERATOR CERTIFICATION

I declare 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.

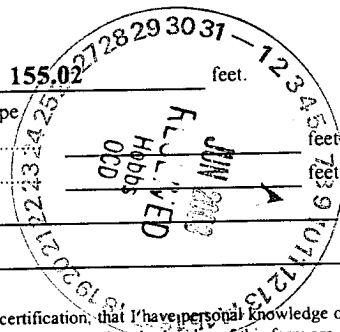
Signature of Authorized Representative

Name of Person and Title (type or print)

Operator

Telephone:

Area Code



Ka

RECORD OF INCLINATION (Continued from reverse side)

[illegible]

If additional space is needed, attach separate sheet and check here. ☐

REMARKS: