

INCLINATION REPORT

INCLINATION REPORT		7. RRC Lease Number. (Oil completions only)
1. FIELD NAME	2. LEASE NAME North Hobbs Unit Section 32	8. Well Number 223
3. OPERATOR SHELL WESTERN E & P, Att: Eddie Curtis		10. County Lea, N. Mex.
4. ADDRESS P. O. Box 991, Houston, Texas 77001		
5. LOCATION (Section, Block, and Survey)		

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)
449	449	1	1.745	7.83	7.83
997	548	1 1/2	.873	4.78	12.61
1497	500	1 1/4	.436	2.18	14.79
1949	452	1 1/2	.873	3.94	18.73
2163	214	1 1/2	2.618	5.60	24.33
2349	186	2 1/4	3.926	7.30	31.63
2504	155	2 1/4	3.926	6.08	37.71
2698	194	2	3.490	6.77	44.48
2841	143	1 1/4	2.182	3.12	47.60
3336	495	1	1.745	8.63	56.23
3833	497	1 1/2	2.618	13.01	69.24
4370	537	-0-	-0-	-0-	69.24

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 4370 feet = 69.24 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 SWORN TO and SUBSCRIBED to before me, this the <u>11th</u> day of <u>April</u> A.D. 1985. Commission expires 2/11/87 <u>PAM J. LOCKLAR</u> - State of Texas - <u>Ban Green</u> Signature of Authorized Representative Ban Green, General Manager Name of Person and Title (type or print) GRACE TRG DRILLING COMPANY Name of Company Telephone: <u>915</u> <u>337-1323</u> Area Code	OPERATOR CERTIFICATION NOTARY PUBLIC County of Ector <u>A. J. Fore</u> Signature of Authorized Representative A. J. FORE, SUPERVISOR REG. & PERMITTING Name of Person and Title (type or print) SHELL WESTERN E&P INC. Operator Telephone: <u>(713)</u> <u>870-3797</u> Area Code
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Approved By: _____ Title: _____ Date: _____

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