

INCLINATION REPORT

1. FIELD NAME		2. LEASE NAME N. Hobbs Unit Section 30	7. RRC Lease Number. (Oil completions only)
3. OPERATOR Shell Western E & P, Att: Eddie Curtis		8. Well Number 332	
4. ADDRESS P. O. Box 991, Houston, Texas 77001		10. County Lea Co. N. Mex.	
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)
404	404	1	1.745	7.04	7.04
898	494	1	1.745	8.62	15.66
1210	312	2-3/4	4.798	14.96	30.62
1463	253	1 1/2	2.618	6.62	37.24
1946	483	3/4	1.309	6.32	43.56
2434	488	2	3.490	17.03	60.59
2620	186	1 1/2	2.618	4.86	65.45
3150	530	1 1/2	.873	4.62	70.07
3602	452	3/4	1.309	5.91	75.98
4099	497	1	1.745	8.67	84.65
4330	231	1	1.745	4.03	88.68

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 4330 feet = 88.68 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 SUBSCRIBED and SWORN TO, before me, this the <u>10th</u> day of <u>May</u> , A.D., 1985 My Commission expires <u>2/11/87</u> <u>Pam J. Locklar</u> Pam J. Locklar, Notary Public in and for Ector County, Texas.	OPERATOR CERTIFICATION <u>A. J. Fore</u> A. J. FORE, SUPERVISOR REG. & PERMITTING Name of Person and Title (type or print) SHELL WESTERN E&P INC. Operator Telephone: <u>(713) 870-3797</u> Area Code
<u>Ban Green</u> Signature of Authorized Representative Ban Green, General Manager Name of Person and Title (type or print) Grace Drilling Company Name of Company Telephone: <u>915 337-1323</u> Area Code	

Approved By: _____ Title: _____ Date: _____

* Designates items certified by company that conducted the inclination surveys

RECEIVED

JUN 20 1985

OFFICE
HONORARY