## RECORD OF INCLINATION (Continued from reverse side)

*11. Messured Depth (feet)	12. Course Length (Hundreds of feet)	*13. Angle of Inclination (Degrees)	14. Displacement per llundred Feet (Sine of Angle X100)	15. Course Displacement (feet)	16. Accumulative Displacement (feet)
6,015	399	1	1.75	6.98	102.95
6,418	403	1	1.75	7.05	110.00
6,823	405	1	1.75	7.09	117.09
7,220	397	3/4	1.31	5.20	122,29
7,650	430	1	1.75	7.53	129.82
7,709	59	1-3/4	3.05	1.80	131.62
7,904	195	1-3/4	3.05	5.95	137.57
8,306	402	1-1/2	2.62	10.52	148.09
8,708	. 402	2-1/4	4.36	17.53	165.62
8,910	202	2-3/4	4,80	9.70	175.32
9,170	260	3-1/4	5.67	14.74	190.06
9,263	93	3-1/2	6.10	5.67	195.73
9,355	92	3-1/4	5,67	5.22	200.95
9,448	93	3-1/4	5.67	5.27	. 206.22
9,568	120	3	5.23	6.28	212.50
9,662	94	3-1/4	5.67	5.33	217.83
9,750	88	3	5.23	4.60	222.43
9,879	129	2-1/2	4.36	5.62	228.05
9,973	94	2-3/4	4,80	5.51	233.56
10,066	93	2-3/4	4.80	4.46	238.02
10,160	94	2-1/2	4.36	4.10	242.12
10,284	124	2-3/4	4.80	5.95	248.07
10,975	691	2	3.49	24.12	272.19
12,399	1,424	3-1/2	6.10	86.86	3.59.05
13,071	672	3-3/4	6.54	43.95	403.00
13,350	279	4-1/4	7.40	20.65	423.65
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		, <u> ,,_,_,_,_,_,_,_,_,_,</u>	<del></del>				
If additional space is needed, attach separate sheet and check here.							
EMARKS:							
		<del></del>					
I hereby state that this i	nformation is th	we and correct to the b	est of my knowledge.				
I hereby state that this i	mormation is th	de una corres a la constante de	-				
College March	WILSON BROTHER	S DRILLING COMPANY	June 27, 1985				
NAME: Jerry R. Morelock		MPANY	DATE				
NAMES OFFICE REPORTED IN							
THE STATE OF TEXAS §	,						
THE CITIES OF TEMPORE							
COUNTY OF MIDLAND	3						
			- 11				
BEFORE ME, on th	nis <u>27th</u> day	of <u>June</u> , 1985,	, personally				
appeared Jerry R. Morelock	k, known to me to	be the person whose na	ame is .				
subscribed as the abovesig	gned authority.						
The state of the s	AND AND SEAL OF (	OFFICE THIS 27TH DAY OF	JUNE: 1985				
GIVEN UNDER MI H	MAD AND SEAD OF C	ATTICL THIS ZITH DAT OF	/				

Notary Public in and for the State of Texas

Print or stamp Notary's name:

Melinda K. Crain

•						
					6. District	
	7. Lease Numb (Oil completions o ly)					
1. FIELD NAME (== pe	r RRC Records or Wildcan	at Be Filed With Each	EASE NAME		8. Well Number	
			Sprinkler Federa	7	#1	
3. OPERATOR	9. Identificatio					
TXO (Te	Number (Gas completions raly)					
4. ADDRESS						
900 Wil	10. County					
5. LOCATION (Section	-					
Sec. 26	5, T-18-S, R-32-	E	,		Lea, New Mexico	
·		RECORD O	F INCLINATIO	N		
*11. Messured 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)	
538	538	1	1.75	9.42	9.42	
916	378	1	1.75	6.62	16.04	
1,320	404	1/2	.87	3.51	19.55	
1,817	497	1/4	.44	2.19	21.74	
2,320	503	3/4	1.31	6.59	28.33	
2,586	266	1	1.75	4.66	32.99	
2,880	294	1 1	1.75	15.13	48.12	
3,190	310	1-1/4	2.18	6.76	54.88	
3,501	311	3/4	1.31	4.07	58.95	
3.680	179	1	1.75	3.13	62.08	
4,036	356	1	1.75	6.23	68.31	
4,345	309	1	1.75	5.41	73.72	
4,621	276	1	1.75	4.83	78.55	
4,814	193	1	1.75	3.38	81.93	
5,214	400	I	1.75	7.00	88.93	
5,616	402	1	1.75	7.04	95.97	
17. Is any information 18. Accumulative to *19. Inclination measures.	one is needed, use the on shown on the revers tal displacement of we surements were made in	e side of this form? Il bore at total dept 		Open hole	3.65 feet.	
			e line		[ee	
21. Minimum distant	ce to lease line as pres	cribed by field rule	8		No	
22. Was the subject	well at any time intent	ionally deviated fro	om the vertical in any ma	nner whatsoevery		
(If the answer to	the above question is	"yes", attach writ	ten explanation of the ci	reumstances.)		
Resources Code, that have personal knowled sides of this form and	certification  enaities prescribed in Se  I am authorized to make tipe of the inclination data that such data and facts by knowledge; This certif	this certification, the and facts placed on are true, correct, and	turni Resources Code, I hat I have personal know that all data gress complete to the be	r pensities prescribed in that I am authorized to n wiedge of all information ented on both sides of th st of my knowledge. This esented herein except in	Sec. 91.143, Taxas Na mal nake this certification, it is a presented in this report, and is form are true, correct, and a certification covers all ats clination data as indicate by	
Indicated by anterioke	(*) by the Item numbers	on this form.	STrature of Author	ized Representative	····	
Name of Person and T				d Title (type or priht)  cduction  (	-7992	
Telephone: 915 685-5024 Telephone: 4/1 (C) 2 (472						

\_\_\_\_\_ Date: \_\_\_

Approved By: \_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_

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