INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report.) 35-625-32260					
FIELD NAME	LEASE NAME	Well Number			
Vacuum GB/SA	State <u>"36"</u>	4			
OPERATOR					
Olsen Energy, Inc.					
ADDRESS					
16414 San pedro, Suite 470 San Ante					
LOCATION	······••••••••••••••••••••••••••••••••				
K-36-17S-33E 2310' FSL an	Lea _{Co} .				

RECORD OF INCLINATION

*11. Measured Depth (lect)	Course Length (Hundreds of feet)	i Angle of Inclination (Degrees)	Displacement per Hundred Feet (Sine of Angle X100)	¹ . Course Displacement (feet)	Accumulative Displacement (feet)	
267	267	3/4	1.31	3.49	3.49	
557	290	3/4	1.31	3.79	7.28	
1050	493	3/4	1.31	6.45	13.73	
1500	450	. 1	1.75	7.87	21.60	
1751	251	1 1/2	2.63	6.60	28.20	
2002	251	1 1/2	2.63	6.60	34.80	
2252	250	1 3/4	3.06	7.65	42.45	
2505	253	1 1/2	2.63	6.65	49.10	
3004	499	1 1/2	2.63	13.12	62.22	
3508	504	4	7.00	35.28	97.50	
3805	297	3	5.25	15.59	113.09	
4110	305	2 1/4	3.94	12.01	125.01	
4401	291	2 1/2	4.38	12.74	137.84	
4813	412	3/4	1.31	5.39	143.23	
If additional space is needed, use the reverse side of this form. Is any information shown on the reverse side of this form? yes XX no Accumulative total displacement of well bore at total depth of <u>4813</u> feet = <u>143.23</u> feet.						
	asurements were made			🔲 Open hole	TXX Drill Pipe	
Distance from surface location of well to the nearest lease line feet.						
Minimum distance to lease line as prescribed by field rules feet.						
Was the subject well at any time intentionally deviated from the vertical in any manner whatsoever?no						
(If the answer	(If the answer to the above question is "yes", attach written explanation of the circumstances.)					
I declare unger	TA CERTIFICATION penalties prescribed in at I am authorized to m	Sec. 91.143, Texas Natu ske this certification, that		r penalties prescribed i that I am authorized to	in Sec. 91.143, Texas Natural make this certification, that 1	

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, 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		
Dick Morton, Drilling/Production Manager		
Name of Person and Title (type or print)		
Olsen Energy, Inc.		
Operator Telephone: 210 496-2466 Area Code		

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OFFICE

APR : 1 月明



STATE OF TEXAS }
COUNTY OF COLLIN }

The attached instrument was acknowledged before me on the 5^{KH} day of N_{UU} , 19^{93}_{19} by James L. Brazeal as

President of BRAZEAL, INC. d/b/a CapStar Drilling.



Paula Carlisle - Notary Public

My commission expires: January 11, 1997

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RECEIVED