

WELL NAME & NUMBER _____ NMG/SA #15-10 _____

LOCATION Sec. 31, T19S, R37E Lea Co., NM 1915/8 + 1984/E
(Give Unit, Section, Township and Range)

OPERATOR Amerada Hess Corp. P.O. Box 2040 Tulsa, OK 74102

DRILLING CONTRACTOR Grace Drilling Company P.O. Box 13480 Odessa, TX 79768

The undersigned hereby certifies that he is an authorized representative of the drilling contractor who drilled the above-described well and that he has conducted deviation tests and obtained the following results:

DEGREES @ DEPTH	DEGREES @ DEPTH	DEGREES @ DEPTH	DEGREES @ DEPTH
1.00 892	.75 4182		
1.25 1300	1.50 4167		
1.25 1731			
1.00 2205			
1.50 2437			
1.50 2822			
1.00 3400			
.75 3575			
1.00 3717			
.75 3775			
.75 3835			
.75 3895			
.75 3930			
1.00 4065			
1.00 4125			

Drilling Contractor Grace Drilling Company

By [Signature]

Subscribed and sworn to before me this 17 day of September, 19 92

[Signature]
Notary Public

My Commission Expires 5/26/96 Ector County 24

