

WELL NAME & NUMBER _____ NMG/SA #14-19 _____ 30 025-31587

LOCATION _____ Sec. 36, T19S, R36E _____ Lea Co., NM 30 5/10 1525/60
(Give Unit, Section, Township and Range)

OPERATOR _____ Amerada Hess Corp. P.O. Box 2040 Tulsa, OK 74119

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
.75 210			
.25 475			
.25 750			
.25 1058			
.75 1446			
.25 1750			
1.00 2130			
.75 2410			
.75 2690			
.75 3002			
.75 3312			
1.00 3642			
1.00 3846			
.25 4839			
.50 5150			

Drilling Contractor _____ Grace Drilling Company

By _____
L. V. Bohannon - Drlg. Supt.

Subscribed and sworn to before me this 21 day of January, 19 93

Joann McMahon
Notary Public

My Commission Expires _____

Ector _____ County _____ TX

