INCLINATION REPORT

OPERATOR CALO SET OF ADDRESS SED. D. D. D. L. L. L. C.			
LEASE Lliott (-1 -2) WELDL NO. 9417 THDBg Chore-Lelly			
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I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.

Cactus Drilling Company er Title:

Affidavit:

Before me, the undersigned authority, appeared <u>eta sedvic</u> known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such well was not intentionally deviated from the true vertical whatsoever.

(Affiant's Signature)

Sworn and subscribed to in my presence on this the <u>b</u>day of _____

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Notary Public in and for the County

of Lea, State of New Mexico

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