INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report.)	7. RRC Lease Number. (Oll completions only)
1. FIELD NAME (as per RRC Records or Wildcat) LANG LIE MAHIX	8. Well Number
3. OPERATOR Reyn pany	9. RRC Identification Number (Gas completions only)
1. ADDRESS 250 Mid. America Blda Midland Texas 7970	$\frac{10. \text{ County}}{C C }$
5. LOCATION (Section, Block, and Survey) Lec II, T24 S, R36E	Jeala, N.M.

RECORD OF INCLINATION

•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)
318	318	34	1.31	4.17	4.17
531	219		<u> 1.75</u>	3.83	800
845	308		1.10	6.11	20.81
1125	280	1 14	3.05	15.28	36.09
1936	310	34	3 05	9.46	45.55
2215	279 .	2 34	4.80	13.39	58.94
2404	189	2 12	4.36	8.24	61.18
2715	311		2.73	16.31	99.77
3027		3	513	3.24	103.01
3,91	92	2 34	4.80	4.46	107.47
3264	81.	2 12	4.36	3.58	111.05
3750	486			16.76	128.01

If additional space is needed, use the reverse side of this form.

	Is any information shown on the reverse side of this form? \Box yes X no 13.01 feet.
18.	Accumulative total displacement of well bore at total depth or
	Inclination measurements were made in 🛱 🗌 Tubing 🗌 Casing 📋 Open hole
	Inclutation measurements were made in the control of the control o
20.	Distance from surface location of well to the nearest lease line
	Minimum distance to lease line as prescribed by field rules feet.
21.	Minimum distance to reason the depicted form the vertical in any manner whatsoever?
22.	Was the subject well at any time intentionally deviated from the vertical in any manner whatsoever?

(If the answer to the above question is "yes", attach written explanation of the circumstances.)

Name of Company 915 683-4832 Telephone: 915 683-4832	Marine of Automized Reprinting (type or printing) Name of Pergon and Title (type or printing) Name Dod Kill Orparation	WINIAM G. KERN ENGINEER (ame of Person and Title (type or print) KERN Co. person 115 1283-4832
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Railroad Commission Use Only:

Approved By : ____

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_____ Title : ____

_____ Date : __

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