

INCLINATION REPORT

(One Copy Must Be Filed With Each Completion Report.)

5. District

1

6. Well Number
(Oil completions only)

7. Well Number

8. Identification Number
(Gas completions only)

9. Country

Lea, NM

1. FIELD NAME

Wildcat (ATOKA)

2. LEASE NAME

Pitchfork 34 Federal Com.

3. OPERATOR

HNG OIL COMPANY

4. ADDRESS

P. O. Box 2267, Midland, Texas 79702

5. LOCATION

Unit Letter L, 1980' FSL & 660' FWL, Sec. 34, T24S, R34E

RECORD OF INCLINATION

Measured 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)
188	188	1/4	.44	.83	.83
400	212	3/4	1.31	2.78	3.61
600	200	1/4	.44	.88	4.49
840	240	3/4	1.31	3.14	7.63
1333	493	3/4	1.31	6.46	14.09
1798	465	3/4	1.31	6.09	20.18
2293	495	3/4	1.31	6.48	26.66
2818	525	3/4	1.31	6.88	33.54
3312	494	3/4	1.31	6.47	40.01
3778	466	1/2	.87	4.05	44.06
4269	497	1-3/4	3.05	14.98	59.04
4696	427		1.75	7.47	66.51
5745	1049	3/4	1.31	13.74	80.25
6200	455	1-1/2	2.62	11.92	92.17
6883	683	1-1/4	2.18	14.89	107.06
7474	591	1-1/2	2.62	15.48	122.54

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

Is any information shown on the reverse side of this form?

☒ yes

☐ no

Accumulative total displacement of well bore at total depth of 15,420 feet = 342.54 feet

Inclination measurements were made in ☐ Tubing ☐ Casing ☐ Open hole ☒ 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 to the above question is "yes", attach written explanation of the circumstances.)

INCLINATION DATA CERTIFICATION

Signature of Authorized Representative

Brice L. Smith

Name of Person and Title (Type or Print)

Parker Drilling Company

Name of Company

Telephone: _____ Area Code _____

OPERATOR CERTIFICATION

Signature of Authorized Representative

Betty Gildon, Regulatory Analyst

Name of Person and Title (Type or Print)

HNG OIL COMPANY

Operator

915

683-4871

Telephone: _____ Area Code _____

Subscribed and Sworn Before Me This 14th Day of March, 1983.

TONY B. WHITLEY-Notary Public
In and for the State of Texas
My Commission Expires 6-27-84

