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State of Colorado

## Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone (303)894-2100 Fax (303)894-2109

## CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR

This form should be completed and filed by the New Operator **Submit original plus one copy** Use Page 2 of Form 10 for multiple wells changing from the same operator to the new operator or when the "Change of Transporter/Gatherer" on multiple wells are the same This form is not to be used for Well Name changes or Status changes Form more information/codes, see [www.oil-gas.state.co.us/forms](http://www.oil-gas.state.co.us/forms) **It is the Operator's responsibility to mail approved copies to the new Transporter and/or Gatherer for each well listed**

FOR OGCC USE ONLY

RECEIVED

MAR 03 2008

COGCC

Operator Bond Status

☒ Blanket☐ Individual

2001 0075

1 OGCC Operator Number <u>53255</u>	4 Contact Name and Phone
2 Name of Operator <u>Maralex Resources, Inc</u>	
3 Address <u>P O Box 338</u>	No
City <u>Ignacio</u> State <u>CO</u> Zip <u>81137</u>	Fax

☒ Change of OperatorEffective Date 06/01/2007☐ Add/Change Transporter or Gatherer

Effective Date \_\_\_\_\_

## Complete This Section for a New or Individual Well:

Well Name & Number	API Number
Location (QtrQtr, Sec, Twp, Rng, Meridian)	
Date of First Production	Date of First Sales Gas _____ Oil _____

<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Add <input type="checkbox"/> Delete
Product <input type="checkbox"/> Oil <input type="checkbox"/> Gas	Product <input type="checkbox"/> Oil <input type="checkbox"/> Gas
Name of Transporter/Gatherer _____ OGCC Transporter No _____	Name of Transporter/Gatherer _____ OGCC Transporter No _____
Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Area Code and Phone Number _____	Area Code and Phone Number _____

<input type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Add <input type="checkbox"/> Delete
Product <input type="checkbox"/> Oil <input type="checkbox"/> Gas	Product <input type="checkbox"/> Oil <input type="checkbox"/> Gas
Name of Transporter/Gatherer _____ OGCC Transporter No _____	Name of Transporter/Gatherer _____ OGCC Transporter No _____
Address _____	Address _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Area Code and Phone Number _____	Area Code and Phone Number _____

Remarks \_\_\_\_\_

The undersigned certifies that the rules and regulations of the Oil and Gas Conservation Commission of the State of Colorado have been complied with except as noted above and that the transporter(s) is (are) authorized to transport the oil and/or gas produced from the above described well and that this authorization will be valid until further notice to the transporter named herein or until cancelled by the Colorado Oil and Gas Conservation Commission

Name of Current Operator <u>Maralex Resources, Inc.</u>	Name of Selling Operator <u>Samson Resources Company</u>
Signature <u>[Signature]</u> Date <u>2/28/08</u>	Signature <u>[Signature]</u> Date <u>02/25/2008</u>
Print Name <u>A. M. O'Hare</u> Title <u>President</u>	Print Name <u>Diane M Visser</u> Title <u>Div Operations Manager</u>

OGCC Approved David & Nashin Title DIRECTOR Date 03/05/2008

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Total Number of Wells Submitted. 4

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Total Number of Wells This Page: 4

Date 02/25/2008

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