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**STATE OF COLORADO
OIL AND GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES**



CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR

(Please submit original & 3 copies per well)

| | | | | FOR OFFICE USE ONLY | | | |
|--|--|---------------------------------|--|---|--|---|--|
| ET | | FE | | UC | | SE | |
| OGCC LEASE NO. 68403 | | LEASE NAME NOFFSINGER | | WELL NO. 2-4 ✓ | | API NO. 05-123-13205 ✓ | |
| FIELD NAME WATTENBERG | | FIELD NO. 90750 ✓ | | COUNTY Weld | | LOCATION (QQ, SEC, TWP, RNG) NW NE SEC 4-T5N-R65W ✓ | |
| OPERATOR NAME Rex Monahan, IOP ✓ | | | | OGCC OPR. NO. 59100 | | AREA CODE / PHONE NUMBER 303-522-0774 | |
| OPERATOR ADDRESS P.O. Box 1231 | | | | **PREVIOUS OPERATOR BASIN EXPLORATION, INC. <i>Operating</i> | | | |
| CITY Sterling | | STATE CO | | ZIP CODE 80751 | | EFFECTIVE CHANGE DATE 08-01-95 | |
| | | | | NEW OPERATOR BOND STATUS <input checked="" type="checkbox"/> Blanket / <input checked="" type="checkbox"/> Single <input type="checkbox"/> Rider | | | |

*Complete only if this well is part of a previously producing lease.

**Complete only if change of operator or change of company name.

PRODUCING FORMATION(S)
(A separate FORM 10 must be submitted for each producing formation of a Multiple Completion.)

FORMATION(S): **CODELL/NIOBARRA** ✓

CURRENT WELL STATUS: **PRODUCING**

DATE SHUT IN OR PRODUCTION RESUMED: _____

TYPE OF COMPLETION
(More than one may apply.)

NEW COMPLETION COMMINGLED COMPLETION
 RECOMPLETION MULTIPLE COMPLETION

New Well Test Data on 24 hr. Basis; Test Date: _____

Bbls Oil _____ MCF Gas _____ Bbls Water _____

OIL TRANSPORTER (First Purchaser)

NAME: **ASSOCIATED TRANSPORT & TRADING** OGCC NO. **04681**

ADDRESS: **370 17TH STREET, SUITE 900**

CITY: **DENVER** STATE: **CO** ZIP CODE: **80202**

AREA CODE / PHONE NO. **(303) 291-2000** DATE OF FIRST PRODUCTION: **4/9/87**

GAS GATHERER (First Purchaser)

NAME: **ASSOCIATED NATURAL GAS** OGCC NO. **04680**

ADDRESS: **370 17TH STREET, SUITE 900**

CITY: **DENVER** STATE: **CO** ZIP CODE: **80202**

AREA CODE / PHONE NO. **(303) 595-3331** DATE OF FIRST SALES: **4/9/87**

ROYALTY OWNER

STATE FEDERAL
 INDIAN FEE ✓

State, Federal or Indian Lease #: _____

TOTAL ACRES IN LEASE: **80** ✓ ACRES ASSIGNED TO WELL: **80** ✓ STANDUP LAYDOWN: ✓

METHOD OF WATER DISPOSAL

FACILITY NUMBER: _____

CENTRAL PIT COMMERCIAL PIT
 ON-SITE PIT INJECTION WELL
 N/A

Remarks: **CHANGE OF OPERATOR**

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: **REX WILLIAM MONAHAN** TITLE: **PRODUCTION MGR** DATE: **7-21-95**

SIGNED: *Rex William Monahan III*

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY: *[Signature]* TITLE: **DIRECTOR** DATE: **SEP 29 1995**
O & G Cons. Comm

ORIGINAL 107/31.01