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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, 10P ✓				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 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.)	
<input type="checkbox"/> NEW COMPLETION	<input type="checkbox"/> COMMINGLED COMPLETION
<input type="checkbox"/> RECOMPLETION	<input type="checkbox"/> 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			
<input type="checkbox"/> STATE <input type="checkbox"/> INDIAN		<input type="checkbox"/> FEDERAL <input checked="" type="checkbox"/> FEE ✓	
State, Federal or Indian Lease #:			
TOTAL ACRES IN LEASE 80 ✓	ACRES ASSIGNED TO WELL 80 ✓	<input checked="" type="checkbox"/> STANDUP LAYDOWN ✓	

METHOD OF WATER DISPOSAL	
FACILITY NUMBER _____	
<input type="checkbox"/> CENTRAL PIT <input type="checkbox"/> ON-SITE PIT <input type="checkbox"/> N/A	<input type="checkbox"/> COMMERCIAL PIT <input type="checkbox"/> INJECTION WELL

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*

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY:

B. Brubaker

TITLE:

**DIRECTOR
O & G Cons. Comm**

DATE:

SEP 29 1995

ORIGINAL 107/31.01