



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

RECEIVED
JUN 16 1993



CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR & GAS CONS. COMM.

(Please submit original & 3 copies per well)

				FOR OFFICE USE ONLY			
*OGCC LEASE NO.		LEASE NAME		WELL NO.		API NO.	
59890		Tania Blue D		#2-14		05-123-16586	
FIELD NAME		FIELD NO.		COUNTY		LOCATION (QQ, SEC, TWP, RNG)	
Wattenberg		90750		Weld		SESW Sec. 2-T3N-R64W	
OPERATOR NAME				OGCC OPR. NO.		AREA CODE / PHONE NUMBER	
Gerrity Oil & Gas Corporation				33870		(303) 757-1110	
OPERATOR ADDRESS				**PREVIOUS OPERATOR			
4100 E. Mississippi Ave., #1200							
CITY		STATE		ZIP CODE		EFFECTIVE CHANGE DATE	
Denver		CO		80222			
				NEW OPERATOR BOND STATUS			
				<input 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)		TYPE OF COMPLETION	
(A separate FORM 10 must be submitted for each producing formation of a Multiple Completion.)		(More than one may apply.)	
FORMATION(S): Codell		<input checked="" type="checkbox"/> NEW COMPLETION	<input type="checkbox"/> COMMINGLED COMPLETION
CURRENT WELL STATUS		<input type="checkbox"/> RECOMPLETION	<input type="checkbox"/> MULTIPLE COMPLETION
Producing		New Well Test Data on 24 hr. Basis; Test Date: 4/19/93	
DATE SHUT IN OR PRODUCTION RESUMED		Bbls Oil 33 MCF Gas 133 Bbls. Water 7	

OIL TRANSPORTER (First Purchaser)		
NAME		OGCC NO.
Attco		04681
ADDRESS		
P.O. Box 5493		
CITY	STATE	ZIP CODE
Denver	CO	80217
AREA CODE / PHONE NO.		DATE OF FIRST PRODUCTION
303 595-3331		4/1/93

GAS GATHERER (First Purchaser)		
NAME		OGCC NO.
Associated Natural Gas, Inc.		04680
ADDRESS		
370 Seventeenth Street, #900		
CITY	STATE	ZIP CODE
Denver	CO	80202
AREA CODE / PHONE NO.		DATE OF FIRST SALES
(303) 595-3331		4/1/93

ROYALTY OWNER			
<input type="checkbox"/>	STATE	<input type="checkbox"/>	FEDERAL
<input type="checkbox"/>	INDIAN	<input checked="" type="checkbox"/>	FEE
State, Federal or Indian Lease #:			
TOTAL ACRES IN LEASE	ACRES ASSIGNED TO WELL	<input type="checkbox"/>	STANDUP
5055.64	80	<input checked="" type="checkbox"/>	LAYDOWN

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

Remarks: This well produces into a common tank battery along with the following: Tania Blue D #2-11 and #2-12.

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: Paula K. Porter TITLE: Drilling Technician DATE: 6/15/93
 SIGNED: Paula K Porter



(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY: Susan McCann TITLE: DIRECTOR DATE: OCT 28 1993
 O & G Cons. Comm.