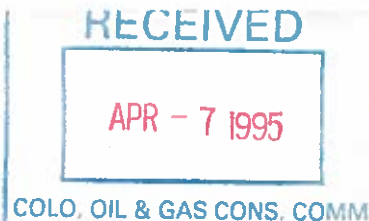


CO:
Petr:

99999999

(057-6180) C

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.		LEASE NAME		WELL NO.		API NO.	
		BLEVINS "A"		1-SRG		05-057-061800	
FIELD NAME		FIELD NO.		COUNTY		LOCATION (QQ, SEC, TWP, RNG)	
CANADIAN RIVER		10100		JACKSON		NESE Sec.3-T9N-R78W, 6th P.M.	
OPERATOR NAME				OGCC OPR. NO.		AREA CODE / PHONE NUMBER	
KN PRODUCTION COMPANY				45825		303/980-9340	
OPERATOR ADDRESS				**PREVIOUS OPERATOR			
P.O. BOX 281304				GASCO, INC			
CITY		STATE		ZIP CODE		EFFECTIVE CHANGE DATE	
LAKEWOOD		CO		80228-8304		1/01/95	
				NEW OPERATOR BOND STATUS			
				X Blanket		Single 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): MDDY		TYPE OF COMPLETION (More than one may apply.) <input type="checkbox"/> NEW COMPLETION <input type="checkbox"/> RECOMPLETION <input type="checkbox"/> COMMINGLED COMPLETION <input type="checkbox"/> MULTIPLE COMPLETION	
CURRENT WELL STATUS	DATE SHUT IN OR PRODUCTION RESUMED	New Well Test Data on 24 hr. Basis; Test Date:	
PA		Bbls Oil MCF Gas Bbls Water	

OIL TRANSPORTER (First Purchaser)		GAS GATHERER (First Purchaser)	
NAME		NAME	
OGCC NO.		OGCC NO.	
ADDRESS		ADDRESS	
CITY	STATE	CITY	STATE
ZIP CODE		ZIP CODE	
AREA CODE / PHONE NO.	DATE OF FIRST PRODUCTION	AREA CODE / PHONE NO.	DATE OF FIRST SALES

ROYALTY OWNER		METHOD OF WATER DISPOSAL	
<input type="checkbox"/> STATE <input type="checkbox"/> INDIAN State, Federal or Indian Lease #:		FACILITY NUMBER	
<input checked="" type="checkbox"/> FEDERAL FEE		<input type="checkbox"/> CENTRAL PIT <input type="checkbox"/> ON-SITE PIT <input type="checkbox"/> N/A	
<input type="checkbox"/> STANDUP LAYDOWN		<input type="checkbox"/> COMMERCIAL PIT <input type="checkbox"/> INJECTION WELL	
TOTAL ACRES IN LEASE	ACRES ASSIGNED TO WELL		

Remarks: As a result of a merger between KN Production Co. and Gasco, Inc., KN Production Co. has become
The new operators of the above mentioned well, effective January 1, 1995.

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: Donald P. O'Brien TITLE: Engineering Technician DATE: 03/24/95

SIGNED:

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY:

TITLE:

DIRECTOR
O & G Cons. Comm

DATE:

MAY 22 1995



00242235

TIMBERLINE  BUILDING SUPPLY

P. O. Box 277
723-4422

M. NORTH PARK ENERGY

Address[illegible]

All claims and returned goods MUST be accompanied by this bill.

Rec'd by

TAX	685
TOTAL	14385

Thank You!