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

RECEIVED

JUN 12 1995

COLO. OIL & GAS CONS. COMM

CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR

(Please submit original and 3 copies per well)

FOR OFFICE USE ONLY			
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*OGCC LEASE NO. 62230		LEASE NAME Nelson Ranches		WELL NO. 2		API NO. 05-123-9554	
FIELD NAME & NO. Terrace 81500			COUNTY Weld	LOCATION (1/4, SEC, TWP., RNG) SW/4 NW/4 Sec. 7-10N-58W			
OPERATOR NAME Antelope Energy Company				OGCC OPR. NO. 03250		AREA CODE PHONE NUMBER (308) 235-4661	
OPERATOR ADDRESS P. O. Box 577				** PREVIOUS OPERATOR Antelope Production Company			
CITY Kimball		STATE NE	ZIP CODE 69145	EFFECTIVE DATE OF CHANGE 5-01-95		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.) "D" Sand	
CURRENT WELL STATUS Shut in	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. Wtr.	

OIL TRANSPORTER (First Purchaser)			
NAME N/A		OGCC NO.	
ADDRESS			
CITY		STATE	ZIP CODE
AREA CODE PHONE NUMBER ()		DATE OF FIRST PRODUCTION	

GAS GATHERER (First Purchaser)			
NAME N/A		OGCC NO.	
ADDRESS			
CITY		STATE	ZIP CODE
AREA CODE PHONE NUMBER ()		DATE OF FIRST SALES	

ROYALTY OWNER			
<input type="checkbox"/> STATE		<input type="checkbox"/> FEDERAL	
<input type="checkbox"/> INDIAN		<input type="checkbox"/> FEE	
State, Federal or Indian Lease # _____			
TOTAL ACRES IN LEASE		ACRES ASSIGNED TO WELL	<input type="checkbox"/> Standup <input type="checkbox"/> Laydown

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

Remarks: Nelson Ranches #2 has been temporarily abandoned

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 (PRINT) Jodi Keeler TITLE _____ DATE 6-6-95
SIGNED Jodi Keeler

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY [Signature] TITLE DIRECTOR DATE JUN 19 1995
O & G Cons. Comm