



Oil and Gas Conservation Commission
DEPARTMENT OF NATURAL RESOURCES



FOR OGCC USE ONLY

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COLO. OIL & GAS CONS. COMM.

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CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR

Submit original plus as many copies as the number of wells plus five (5) additional copies. Use Page 2 of Form 10 for multiple wells changing from the same operator to the new operator or when the "Change of Transporter/Gatherer" on multiple wells are the same. This form is not to be used for Well Name changes or Status changes. A separate FORM 10 must be submitted for each new completion and a FORM 10 for each producing formation of a Multiple Completion. It is the Operator's responsibility to mail approved copies to the new Transporter and/or Gatherer for each well listed.

OGCC Operator Number 41385	Contact Name & Phone
Name of Operator: HS Resources, Inc.	Elaine Rivas
Address: 3939 Carson Avenue	No: 970-330-0614
City: Evans State: CO Zip: 80620	Fax: 970-330-0431

Operator Bond Status

<input checked="" type="checkbox"/> Blanket
<input type="checkbox"/> Individual

☐ Change of Operator
Effective Date: _____

☐ Change of Transporter or Gatherer
Effective Date: _____

Complete This Section For a New or Individual Well.

OGCC Lease No: 63756	API Number: 05-123-19289
Well Name and Number: HSR-Berry 7-8	Field Name and Number: Wattenberg 90750
Location (QtrQtr, Sec, Twp, Rng, Meridian) SW/NE Sec 8-T3N-R67W 6th P.M.	Acres in Lease: 240
Acres Assigned to Well <input checked="" type="checkbox"/> Standup 80 W/2NE/4 <input type="checkbox"/> Laydown	Royalty Owner: <input checked="" type="checkbox"/> Fee <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian
Method of Water Disposal <input type="checkbox"/> Central Pit <input type="checkbox"/> Commercial Pit	State, Federal or Indian Lease No:
Facility and/or Pit Number: CDSLLC-351 <input type="checkbox"/> On-site Pit	<input checked="" type="checkbox"/> Injection Well <input type="checkbox"/> NA
Producing Formation(s): NB/CD	Recompletion? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Current Well Status: producing	Date Shut In or Production Resumed:
Multiple Well Lease? <input checked="" type="checkbox"/> N <input type="checkbox"/> Y If yes, interests must be common. If existing OGCC lease, lease no:	

OIL TRANSPORTER			Gas Gatherer		
NAME of Oil Transporter	OGCC Operator No.	NAME of Gas Gatherer	OGCC Operator No.		
Total	89000	KN	45825		
Address		Address			
P O Box 500		635 N. 7th Avenue			
City	State	Zip	City	State	Zip
Denver	CO	80201	Brighton	CO	80601
Area Code	Phone Number	Date of First Production This Formation	Area Code	Phone Number	Date of First Sales This Formation
303	291-2000	2/15/97	303	659-5922	2/15/97

If Multiple Transporter or Gatherer, Complete the Following:

OIL TRANSPORTER			Gas Gatherer		
NAME of Oil Transporter	OGCC Operator No.	NAME of Oil Transporter	OGCC Operator No.		
Address		Address			
City	State	Zip	City	State	Zip
Area Code	Phone Number	Date of First Production This Formation	Area Code	Phone Number	Date of First Sales This Formation

Remarks:

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 a 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 valid until further notice to the transporter named herein or until canceled by the Colorado Oil and Gas Conservation Commission.

Buyer or Current Operator's Signature	Seller's Signature
Elaine Rivas	
Name of Operator	Name of Operator
HS Resources, Inc.	
Title	Title
Operations Technician	
Date	Date
04/09/97	04/09/97

OGCC Approved: Title: DIRECTOR Date: MAY 08 1997