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COLO. OIL & GAS CON. COMM.

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

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.		LEASE NAME RIEKE Horse tail		WELL NO. A		API NO. 05-075-0925900 ✓	
FIELD NAME & NO. HORSETAIL		COUNTY LOGAN		LOCATION (1/4, SEC, TWP., RNG) SENW SECTION 2 T9N - R54W			
OPERATOR NAME KENISA DRILLING COMPANY				OGCC OPR. NO. 46760		AREA CODE PHONE NUMBER (303) 825-7315	
OPERATOR ADDRESS 410 17TH STREET #1950				** PREVIOUS OPERATOR GEAR DRILLING 33170			
CITY DENVER CO		STATE CO		ZIP CODE 80202		EFFECTIVE DATE OF CHANGE 4/22/94	
						NEW OPERATOR BOND STATUS <input type="checkbox"/> BLANKET <input checked="" 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 - 4 5026-5033'

CURRENT WELL STATUS SHUT-IN	DATE SHUT IN OR PRODUCTION RESUMED 04/07/93
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TYPE OF COMPLETION (More than one may apply)

- ☒ NEW COMPLETION ☐ COMMINGLED COMPLETION
☐ RECOMPLETION ☐ MULTIPLE COMPLETION

New Well Test Data on 24 hr. Basis: Test Date **4/5/93**
_____ Bbls. Oil **129** Mcf Gas **4** Bbls. Wtr.

OIL TRANSPORTER (First Purchaser)

NAME		OGCC NO.	
ADDRESS			
STATUS REPORT REQUIRED ANNUALLY ON SHUT-IN & TEMPORARILY ABANDONED WELLS.			
CITY	STATE	ZIP CODE	
AREA CODE PHONE NUMBER ()		DATE OF FIRST PRODUCTION	

GAS GATHERER (First Purchaser)

NAME		OGCC NO.	
KN GAS MARKETING			
ADDRESS 370 VAN GORDON ST			
CITY	STATE	ZIP CODE	
LAKEWOOD	CO	80228	
AREA CODE PHONE NUMBER (303) 989-1999		DATE OF FIRST SALES N/A	

ROYALTY OWNER

- ☐ STATE ☐ FEDERAL
☐ INDIAN ☒ FEE

State, Federal or Indian Lease # _____

TOTAL ACRES IN LEASE 160	ACRES ASSIGNED TO WELL	<input type="checkbox"/> Standup <input checked="" type="checkbox"/> Laydown
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METHOD OF WATER DISPOSAL

- FACILITY NUMBER _____
- ☐ CENTRAL PIT ☐ COMMERCIAL PIT
☐ ON-SITE PIT ☐ INJECTION WELL
☒ N/A

Remarks: **WAITING ON PIPELINE**

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) **JONATHAN W. ISAACS** TITLE **VICE PRESIDENT** DATE **4/26/94**

SIGNED _____

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY _____

TITLE _____

DIRECTOR
O & G Cons. Comm.

DATE _____

AUG 26 1994