



XERO COPY

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Standard Voucher Form V-2 (3-55) A/C
1—CANARY—Accounts & Control
2—WHITE—Remittance Advice
3—PINK—Department's Copy

INSTRUCTIONS

Completely fill out all applicable spaces. Attach approved claims for refunds or other supporting papers to face of canary copy. Retain pink copy. Send others to Room 144, State Capitol, Denver.

STATUTORY AUTHORITY FOR PAYMENTS OF CLAIMS FOR REFUNDS

Chapt. _____ Sec. _____ S.I. _____
Chapt. _____ Sec. _____ S.I. _____
Chapt. _____ Sec. _____ C.S.A. _____

VOUCHER FOR REFUNDS

STATE OF COLORADO

Colorado Oil and Gas Conservation Commission
Department, Institution or Agency

237 Columbine Bldg., 1845 Sherman 189
Location of Department, Institution or Agency Voucher No.

The following claims for refunds described and explained below or in the attached supporting papers are hereby vouchered for payment from _____

2-3344

fund to the following payee:

Name The Anschutz Corporation, Inc.
Address 1110 Denver Club Building
City and State Denver, Colorado 80202

SHOW
CORRECT
←
MAILING
ADDRESS
HERE

BRIEFLY ITEMIZE THE CLAIM FOR REFUND BELOW, SHOWING REASON THEREFOR

AMOUNT

For Auditor's Use ONLY

Refund of Permit No. 68-282 to drill a well in
NE NW, Sec. 11¹/₂ 9N-78W, Jackson County, Colorado

75 00

REFUND

ISSUE WARRANT TO: (Show exact name of payee)

The Anschutz Corporation, Inc.

\$

75 00

TO BE USED BY DIVISION OF ACCOUNTS AND CONTROL ONLY

Comp't	Screened	Audited
Date Voucher Received	APPROVED FOR PAYMENT:	
Date Voucher Returned		
Date Voucher Received		
Date Warrant Issued		
Date Voucher Filed	No.	
Posted from above pre-list		

Warrant Number	Voucher Number	Fund Number	Exp. Class
	189	2-3344	83 2107 x303
DATE <u>March 24,</u> 19 <u>69</u>			
The undersigned hereby certify that the claims for refunds described and explained in the attached supporting papers or in the indicated records and files of our department, have been properly examined and processed in accordance with the provisions of the statutes shown above, and found to be just and proper, and that payment thereof from the fund indicated is approved:			
Countersigned		Head of Department	
APPROVED:			
State Treasurer		Governor	