



01092244

OGCC FORM 10

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)


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FOR OFFICE USE ONLY			
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<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*OGCC LEASE NO. 10243	LEASE NAME THRONDSON	WELL NO.: #2-2	API NO. 05-013-6033-1
FIELD NAME WATTENBERG	FIELD NO. 90750	COUNTY BOULDER	LOCATION (QQ, SEC, TWP, RNG) C SW 2-1N-69W
OPERATOR NAME MARTIN EXPLORATION MANAGEMENT COI		OGCC OPR. NO. 53985	AREA CODE / PHONE NUMBER (303) 447-8539
OPERATOR ADDRESS 2300 CENTRAL AVE. STE A		**PREVIOUS OPERATOR	
CITY BOULDER	STATE CO	ZIP CODE 80301	EFFECTIVE CHANGE DATE
			NEW OPERATOR BOND STATUS <input 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.) FORMATION(S): COD/NIO	TYPE OF COMPLETION (More than one may apply.) <input type="checkbox"/> NEW COMPLETION <input checked="" type="checkbox"/> COMMINGLED COMPLETION <input checked="" type="checkbox"/> RECOMPLETION <input type="checkbox"/> MULTIPLE COMPLETION
CURRENT WELL STATUS	DATE SHUT IN OR PRODUCTION RESUMED
New Well Test Data on 24 hr. Basis; Test Date: 7/20/92	
24 Bbls Oil 185 MCF Gas 10 Bbls. Water	

OIL TRANSPORTER (First Purchaser)			GAS GATHERER (First Purchaser)		
NAME PERMIAN	OGCC NO. 68625	NAME PANHANDLE	OGCC NO. 67095		
ADDRESS P.O. BOX 1183			ADDRESS P.O. BOX 1642		
CITY HOUSTON	STATE TX	ZIP CODE 77251	CITY HOUSTON	STATE TX	ZIP CODE 77251
AREA CODE / PHONE NO. (713)787-2500		DATE OF FIRST PROD. 7/10/92	AREA CODE / PHONE NO. (713)627-5400		DATE OF FIRST SALES 7/10/92

ROYALTY OWNER			METHOD OF WATER DISPOSAL		
<input type="checkbox"/> STATE <input type="checkbox"/> INDIAN State, Federal or Indian Lease #:		<input type="checkbox"/> FEDERAL <input checked="" type="checkbox"/> FEE		FACILITY NO. _____	
TOTAL ACRES IN LEAS 160	ACRES ASSIGNED TO WELL 160 SW/4	<input checked="" type="checkbox"/> STANDUP	<input checked="" type="checkbox"/> ON-SITE PIT	<input type="checkbox"/> COMMERCIAL PIT	<input type="checkbox"/> INJECTION WELL
		<input type="checkbox"/> LAYDOWN	<input checked="" type="checkbox"/> N/A <i>Vant f = handled</i>		

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 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 authorization will be valid until further notice to the transporter named herein or until cancelled by the Colorado Oil and Gas Conservation Commission.

NAME: Dianne Goodrich TITLE: Engineering Technician DATE: 07/31/92

SIGNED: *Dianne Goodrich*

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY: *Dennis Ricknell* TITLE: DIRECTOR DATE: MAR 24 1993
 O & G Cons. Comm.

RECEIVED