



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. 32490	LEASE NAME Sindt, Arthur	WELL NO. 4	API NO. 0507506603
FIELD NAME & NO. Padroni, W. 67000	COUNTY Logan	LOCATION (1/4, SEC, TWP., RNG) NE 1/4 NE 1/4 Sec. 7, T-9-N, R-52-W	
OPERATOR NAME Devon Energy Corporation (Nevada)		OGCC OPR. NO. 24030	AREA CODE PHONE NUMBER (405) 235-3611
OPERATOR ADDRESS 1500 Mid-America Tower, 20 North Broadway		** PREVIOUS OPERATOR Hondo Oil & Gas Company (Delaware)	
CITY Oklahoma City, Oklahoma	STATE Oklahoma	ZIP CODE 73102	EFFECTIVE DATE OF CHANGE 7-1-92
		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.

<b>PRODUCING FORMATION(S)</b> (A separate FORM 10 must be submitted for each producing formation of a Multiple Completion.)  "O" Sand	
CURRENT WELL STATUS Producing	DATE SHUT IN OR PRODUCTION RESUMED

<b>TYPE OF COMPLETION</b> (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.	

<b>OIL TRANSPORTER (First Purchaser)</b>		
NAME Murphy Oil USA, Inc.		OGCC NO. 62000
ADDRESS 1580 Lincoln St., Ste. 1250		
CITY Denver	STATE CO	ZIP CODE 80203
AREA CODE PHONE NUMBER (303) 863-1161	DATE OF FIRST PRODUCTION July 1, 1992	

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

<b>ROYALTY OWNER</b>		
<input type="checkbox"/> STATE	<input type="checkbox"/> FEDERAL	
<input type="checkbox"/> INDIAN	<input checked="" type="checkbox"/> FEE	
State, Federal or Indian Lease # _____		
TOTAL ACRES IN LEASE 40	ACRES ASSIGNED TO WELL 40	<input type="checkbox"/> Standup <input type="checkbox"/> Laydown

<b>METHOD OF WATER DISPOSAL</b>	
FACILITY NUMBER Sindt #2WD	
<input type="checkbox"/> CENTRAL PIT	<input type="checkbox"/> COMMERCIAL PIT
<input type="checkbox"/> ON-SITE PIT	<input checked="" type="checkbox"/> INJECTION WELL
<input type="checkbox"/> N/A	

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 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) J. M. Dockworth TITLE Operations Manager DATE July 27, 1992

SIGNED \_\_\_\_\_

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY

*Kenneth Kucknell*

TITLE

DIRECTOR  
O & G Cons. Comm

DATE

SEP 03 1992