



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

RECEIVED

OCT 26 1989

COLORADO OIL & GAS CONSERVATION COMMISSION

CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR

(Please submit original and 3 copies per well)

FOR OFFICE USE ONLY			
ET	FE	LOC	SE

OGCC LEASE NO. 1698	LEASE NAME Carlson	WELL NO. 1	API NO. 05 001 7843
FIELD NAME & NO. Intrepid No. 39310		COUNTY Adams	LOCATION (1/4, SEC, TWP., RNG) NE/4 NW/4, Sec. 22-T3S-R61W
OPERATOR NAME McCulliss Resources Co., Inc.		OGCC OPR. NO. 55120	AREA CODE PHONE NUMBER (303) 292-5458
OPERATOR ADDRESS 621 17th Street, Suite 1320		** PREVIOUS OPERATOR The Colton Company	
CITY Denver	STATE Colorado	ZIP CODE 80293	EFFECTIVE DATE OF CHANGE October 1, 1989
			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.

PRODUCING FORMATION(S) (A separate FORM 10 must be submitted for each producing formation of a Multiple Completion.)

J Sand

CURRENT WELL STATUS Shut-in	DATE SHUT IN OR PRODUCTION RESUMED October 1, 1989
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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 _____
_____ Bbls. Oil _____ Mcf Gas _____ Bbls. Wtr.

OIL TRANSPORTER (First Purchaser)

NAME Total Petroleum	OGCC NO. 89000	
ADDRESS 999 18th Street, Suite 2201		
CITY Denver	STATE CO	ZIP CODE 80201
AREA CODE PHONE NUMBER (303) 291-2000	DATE OF FIRST PRODUCTION July 7, 1981	

GAS GATHERER (First Purchaser)

NAME	OGCC NO.	
ADDRESS		
CITY	STATE	ZIP CODE
AREA CODE PHONE NUMBER ()	DATE OF FIRST SALES	

ROYALTY OWNER

STATE FEDERAL
 INDIAN FEE

State, Federal or Indian Lease # _____

TOTAL ACRES IN LEASE 160	ACRES ASSIGNED TO WELL 160	<input type="checkbox"/> Standup <input 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:

STATUS REPORT REQUIRED
EVERY 6 MONTHS ON SHUT-IN
& TEMPORARILY ABANDONED WELLS.

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) Paul L. McCulliss TITLE President DATE October 25, 1989
SIGNED [Signature]

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY [Signature] TITLE AD DATE NOV 3 1989