



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

FOR OFFICE USE ONLY			
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CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR
(Please Submit Four (4) Copies)

OGCC LEASE NO. 13984	LEASE NAME King Pyles	WELL NO. #3	API NO. 05-061-06105
FIELD NAME & NO. Brandon - 07500	COUNTY Kiowa	LOCATION (1/4 1/4, SEC, TWP., RNG.) NE SE Sec. 8 T19S-R45W	
OPERATOR NAME Park Oil & Gas, Inc.	OGCC OPR. NO. 67240	AREA CODE (504)	PHONE NUMBER 454-1090
OPERATOR ADDRESS 4415 Shores Drive	CITY Metairie	STATE LA	ZIP CODE 70006
**PREVIOUS OPERATOR Inexco Oil Company	CURRENT STATUS S.I.	EFFECTIVE DATE OF CHANGE April 1, 1989	

*Complete only if this well is part of a previously producing lease.
**Complete only if change of operator.

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

TYPE OF COMPLETION
 NEW COMPLETION COMMINGLED COMPLETION
 RECOMPLETION MULTIPLE COMPLETION

New Well Test Data on 24 hr. Basis:
 _____ Bbls. Oil _____ Mcf Gas _____ Bbls. Wtr.

OIL TRANSPORTER (Purchaser)

NAME Diamond Shamrock	OGCC NO. 24200	
ADDRESS P. O. Box 696000		
CITY San Antonio	STATE TX	ZIP CODE 78269-6000
AREA CODE PHONE NUMBER ()	DATE OF FIRST PRODUCTION 5/1/71	

GAS GATHERER (Purchaser)

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

ROYALTY OWNER

STATE FEDERAL
 INDIAN PATENTED

NUMBER OF ACRES IN LEASE *160*

METHOD OF WATER DISPOSAL

CENTRAL PIT COMMERCIAL PIT
 ON-SITE PIT INJECTED
 N/A

RECEIVED
JUN 29 1989

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.

OGCC Approved:

William R. Smith
Signature

Geoffrey Prince
Name (Please Print)
Geoffrey Prince
Signature

Title **DIRECTOR** Date **JUL 12 1989**
O & G Cons. Comm.

Title **Professional Assistant** Date **6/14/89**