

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)

				FOR OFFICE USE ONLY			
				ET	FE	UC	SE
*OGCC LEASE NO. <b>10426</b>	LEASE NAME <b>YOUNG</b>	WELL NO. <b>#1-23</b>	API NO. <b>05-013-6089-1</b>				
FIELD NAME <b>WATTENBERG</b>	FIELD NO. <b>90750</b>	COUNTY <b>BOULDER</b>	LOCATION (QQ, SEC, TWP, RNG) <b>SE NE 23-T1N-R69W</b>				
OPERATOR NAME <b>MARTIN EXPLORATION MANAGEMENT COMPANY</b>			OGCC OPR. NO. <b>53985</b>	AREA CODE / PHONE NUMBER <b>(303) 447-8539</b>			
OPERATOR ADDRESS <b>2300 Central Avenue, Suite A</b>			**PREVIOUS OPERATOR				
CITY <b>Boulder</b>	STATE <b>CO</b>	ZIP CODE <b>80301</b>	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.

<b>PRODUCING FORMATION(S)</b> (A separate FORM 10 must be submitted for each producing formation of a Multiple Completion.) FORMATION(S): <b>CODELL/NIORARA</b>		<b>TYPE OF COMPLETION</b> (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 <b>PRODUCING</b>	DATE SHUT IN OR PRODUCTION RESUMED	New Well Test Data on 24 hr. Basis; Test Date: <b>2/27/92</b> <b>31 Bbls Oil 170 MCF Gas 39 Bbls. Water</b>	

<b>OIL TRANSPORTER (First Purchaser)</b> NAME <b>PERMIAN</b> <b>RECEIVED</b> OGCC NO. <b>68625</b> ADDRESS <b>P.O. BOX 1183</b> CITY <b>HOUSTON</b> STATE <b>TX</b> ZIP CODE <b>77251</b> AREA CODE / PHONE NO. <b>(713)787-2500</b> DATE OF FIRST PROD. <b>2/24/92</b>		<b>GAS GATHERER (First Purchaser)</b> NAME <b>PANHANDLE</b> OGCC NO. <b>67095</b> ADDRESS <b>P.O. BOX 1642</b> CITY <b>HOUSTON</b> STATE <b>TX</b> ZIP CODE <b>77251</b> AREA CODE / PHONE NO. <b>(713)627-5400</b> DATE OF FIRST SALES <b>2/24/92</b>	
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<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 #:		<b>METHOD OF WATER DISPOSAL</b> FACILITY NO. _____ <input type="checkbox"/> CENTRAL PIT <input type="checkbox"/> COMMERCIAL PIT <input checked="" type="checkbox"/> ON-SITE PIT <input type="checkbox"/> INJECTION WELL <input type="checkbox"/> N/A	
TOTAL ACRES IN LEASE <b>1040</b>	ACRES ASSIGNED TO WELL <b>NE/4(160)</b>	X <input type="checkbox"/> STANDUP <input type="checkbox"/> LAYDOWN	

Remarks:

This is a Codell/Niobrara only. J-SID never reopened

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: **05/07/92**

**28 1993**

SIGNED:

*Dianne Goodrich*

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY:

*Dennis R. Bicknell*

TITLE:

**DIRECTOR**  
**O & G Cons. Comm.**

DATE:

**JUL 20 1992**