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3CC FORM 10
v. 8/89

MAR 2 1992

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

CONFIDENTIAL

COLO. OIL & GAS CONS. COMM.

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. <u>11108</u>	LEASE NAME <u>MORGAN</u>	WELL NO. <u>#1</u>	API NO. <u>05-017-7280</u>
FIELD NAME & NO. <u>Rush Creek Draw 74865</u>	COUNTY <u>Cheyenne</u>	LOCATION (1/4, SEC, TWP, RNG) <u>SE NW, 22-16S-51W</u>	
OPERATOR NAME <u>MULL DRILLING COMPANY, INC.</u>		OGCC OPR. NO. <u>61250</u>	AREA CODE PHONE NUMBER <u>(316) 264-6366</u>
OPERATOR ADDRESS <u>P.O. Box 2758</u>		** PREVIOUS OPERATOR	
CITY <u>Wichita</u>	STATE <u>Kansas</u>	ZIP CODE <u>67201</u>	EFFECTIVE DATE OF CHANGE
			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.)

ST. LOUIS (5740-5748) STLS

CURRENT WELL STATUS <u>Producing</u>	DATE SHUT IN OR PRODUCTION RESUMED
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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 2/19/92
11 Bbls. Oil 1 Mcf Gas 2 Bbls. Wtr.

OIL TRANSPORTER (First Purchaser)

NAME <u>Koch Oil Company</u>	OGCC NO. <u>49130</u>
ADDRESS <u>P.O. Box 2256</u>	
CITY <u>Wichita</u>	STATE <u>Kansas</u>
ZIP CODE <u>67201</u>	DATE OF FIRST PRODUCTION <u>1/29/92</u>
AREA CODE PHONE NUMBER <u>(316) 832-5500</u>	

GAS GATHERER (First Purchaser)

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

ROYALTY OWNER

STATE FEDERAL
 INDIAN FEE

State, Federal or Indian Lease # _____

TOTAL ACRES IN LEASE <u>640</u>	ACRES ASSIGNED TO WELL <u>80</u>	<input checked="" 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: Pelton SWDW

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) Mark A. Shreve TITLE Petroleum Engineer DATE 2/27/92
SIGNED [Signature]

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY Dennis Bicknell TITLE DIRECTOR DATE MAY 04 1992
O & G Cons. Comm.