



00640318

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)

OGCC LEASE NO.	LEASE NAME Weco State	WELL NO. 1-16.	API NO. 050096282-1
FIELD NAME & NO. Walsh	COUNTY Baca	LOCATION (T. & S., SEC., TWP., R&G) C NE/4 Sec. 16 T33S R43W	
OPERATOR NAME Energy Alliance Company, Inc.		OGCC OPR NO. 27520	AREA CODE PHONE NUMBER (303) 773-1360
OPERATOR ADDRESS 7918 S. Trenton St.		** PREVIOUS OPERATOR N/A	
CITY Englewood	STATE CO	ZIP CODE 80112	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.)	
CURRENT WELL STATUS TA	DATE SHUT IN OR PRODUCTION RESUMED 7/1/96

TYPE OF COMPLETION (More than one may apply)	
<input type="checkbox"/> NEW COMPLETION	<input type="checkbox"/> COMMINGLED COMPLETION
<input checked="" type="checkbox"/> RECOMPLETION	<input type="checkbox"/> MULTIPLE COMPLETION
New Well Test Data on 24 hr. Basis: Test Date _____ _____ Bbls. Oil _____ Mcf Gas _____ Bbls. Wtr.	

OIL TRANSPORTER (First Purchaser)		
NAME		OGCC NO.
ADDRESS		
CITY	STATE	ZIP CODE
AREA CODE PHONE NUMBER ()	DATE OF FIRST PRODUCTION	

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

ROYALTY OWNER		
<input checked="" type="checkbox"/> STATE	<input type="checkbox"/> FEDERAL	
<input type="checkbox"/> INDIAN	<input type="checkbox"/> FEE	
State Federal or Indian Lease # <u>State 73-4494-5</u>		
TOTAL ACRES IN LEASE 640	ACRES ASSIGNED TO WELL 160	<input checked="" type="checkbox"/> Standup <input type="checkbox"/> Laydown

METHOD OF WATER DISPOSAL	
FACILITY NUMBER _____	
<input type="checkbox"/> CENTRAL PIT	<input type="checkbox"/> COMMERCIAL PIT
<input type="checkbox"/> ON-SITE PIT	<input 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) Rick Wightman TITLE President DATE 8-20-96
SIGNATURE Rick Wightman

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY

E. Brubling

TITLE

DIRECTOR
O & G Cons. Comm

DATE

SEP 04 1996