

State of Colorado  
Oil and Gas Conservation Commission  
DEPARTMENT OF NATURAL RESOURCES

FOR OGCC USE ONLY

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**CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR**

Submit original plus as many copies as the number of wells plus five (5) additional copies. Use Page 2 of Form 10 for multiple wells changing from the same operator to the new operator or when the "Change of Transporter/Gatherer" on multiple wells are the same. This form is not to be used for Well Name changes or Status changes. A separate FORM 10 must be submitted for each new completion and a FORM 10 for each producing formation of a Multiple Completion. It is the Operator's responsibility to mail approved copies to the new Transporter and/or Gatherer for each well listed.

OGCC Operator Number: 90700	Contact Name & Phone: GARY L. HANAMAN
Name of Operator: TWIN ARROW INC	No: 970-675-8226
Address: PO BOX 948	Fax: 970-675-8509
City: RANGELY State: CO Zip: 81648	

**Operator Bond Status**

- ☒ Blanket  
☐ Individual

☐ Change of Operator

Effective Date: \_\_\_\_\_

☐ Change of Transporter or Gatherer

Effective Date: \_\_\_\_\_

**Complete This Section For a New or Individual Well.**

OGCC Lease No: 47082	API Number: 05-103-05337
Well Name and Number: NEWTON 25A	Field Name and Number: RANGELY
Location (QtrQtr, Sec, Twp, Rng, Meridian): NENE 12 T1N R102W	Acres in Lease: 1074.1
Acres Assigned to Well: 10	State, Federal or Indian Lease No: DO 33804-B
Method of Water Disposal Facility and/or Pit Number: _____	Recompletion? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
Producing Formation(s): MANCO S	Date Shut In or Production Resumed: 1-31-97
Current Well Status: PRODUCING	
Multiple Well Lease? <input type="checkbox"/> N <input checked="" type="checkbox"/> Y If yes, interests must be common. If existing OGCC lease, lease no: 47082	

OIL TRANSPORTER			GAS GATHERER		
Name of Oil Transporter	OGCC Operator No.		Name of Gas Gatherer	OGCC Operator No.	
Address			Address		
City	State	Zip	City	State	Zip
Area Code ( )	Phone Number	Date of First Production This Formation	Area Code ( )	Phone Number	Date of First Sales This Formation

**If Multiple Transporter or Gatherer, Complete the Following:**

OIL TRANSPORTER			GAS GATHERER		
Name of Oil Transporter	OGCC Operator No.		Name of Gas Gatherer	OGCC Operator No.	
Address			Address		
City	State	Zip	City	State	Zip
Area Code ( )	Phone Number	Date of First Production This Formation	Area Code ( )	Phone Number	Date of First Sales This Formation

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.

Buyer or Current Operator's Signature: Gary L. Hanaman	Seller's Signature
Name of Operator: TWIN ARROW INC	Name of Operator
Title: PRESIDENT Date: 6/13/97	Title Date

OGCC Approved: \_\_\_\_\_

DIRECTOR  
O & G Cons. Comm.

Date: JUL 07 1997