



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)

FOR OFFICE USE ONLY			
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OGCC LEASE NO. 28044	LEASE NAME G. A. HENDERSON	WELL NO. 4	API NO. 05-075-06523
FIELD NAME & NO. CEDAR CREEK - 10400	COUNTY LOGAN	LOCATION (1/4, SEC, TWP., RNG) NE SE NW SEC. 18 9N 53W	
OPERATOR NAME WALSH PRODUCTION, INC.		OGCC OPR. NO. 94090	AREA CODE PHONE NUMBER (303) 522-1839
OPERATOR ADDRESS P. O. BOX 30		** PREVIOUS OPERATOR TEXACO EXPLORATION AND PRODUCTION INC. <i>86900</i>	
CITY STERLING, COLORADO	STATE 80751	ZIP CODE 80751	EFFECTIVE DATE OF CHANGE 7/1/91
		NEW OPERATOR BOND STATUS <input checked="" 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.) DAKOTA D & J SAND	
CURRENT WELL STATUS SHUT IN PR	DATE SHUT IN OR PRODUCTION RESUMED

TYPE OF COMPLETION (More than one may apply) N/A	
<input type="checkbox"/> NEW COMPLETION	<input checked="" type="checkbox"/> COMMINGLED COMPLETION
<input 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 TEXACO TRADING AND TRANSP. INC.	OGCC NO. 33940	
ADDRESS 1670 BROADWAY		
CITY DENVER	STATE COLORADO	ZIP CODE 80202-4899
AREA CODE PHONE NUMBER (303) 861-4475	DATE OF FIRST PRODUCTION	

GAS GATHERER (First Purchaser)		
NAME N/A	OGCC NO.	
ADDRESS RECEIVED		
CITY SEP 09 1991	STATE	ZIP CODE
AREA CODE PHONE NUMBER COLO. OIL & GAS CONS. COMM.	DATE OF FIRST SALES	

ROYALTY OWNER		<input checked="" type="checkbox"/> PATENTED
<input type="checkbox"/> STATE	<input type="checkbox"/> FEDERAL	
<input type="checkbox"/> INDIAN	<input type="checkbox"/> FEE	
State, Federal or Indian Lease # _____		
TOTAL ACRES IN LEASE	ACRES ASSIGNED TO WELL	<input 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 checked="" 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) **David G. Walsh** TITLE **Operator** DATE **7-29-91**

SIGNED *David G. Walsh*

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY *Dennis R. Becknell* TITLE **DIRECTOR** DATE **DEC 1 1991**

O & G Cons. Comm.