



00054622

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. <u>54801</u>		LEASE NAME <u>Tuttle Walker</u>		WELL NO. <u>2</u>	API NO. <u>05-121-9498</u>
FIELD NAME & NO. <u>Uranus 85400</u>		COUNTY <u>Washington</u>	LOCATION (% 4. SEC. TWP., R&G) <u>NW NE Sec. 32, T2N, R54W</u>		
OPERATOR NAME <u>Snowden Oil Company</u>			OGCC OPR. NO.	AREA CODE PHONE NUMBER <u>(303) 867-6275</u>	
OPERATOR ADDRESS <u>Box 565</u>			** PREVIOUS OPERATOR		
CITY <u>Fort Morgan</u>	STATE <u>CO</u>	ZIP CODE <u>80701</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.)	
<u>D Sand</u>	
CURRENT WELL STATUS	DATE SHUT IN OR PRODUCTION RESUMED

TYPE OF COMPLETION (More than one may apply)	
<input type="checkbox"/> NEW COMPLETION	<input 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 <u>EOTT Energy Operating Limited Partnership</u>		OGCC NO. <u>66577</u>
ADDRESS <u>P. O. Box 4666</u>		
CITY <u>Houston</u>	STATE <u>TX</u>	ZIP CODE <u>77210-4666</u>
AREA CODE PHONE NUMBER <u>(713) 993-5900</u>	DATE OF FIRST PRODUCTION <u>01-01-84</u>	

GAS GATHERER (First Purchaser)		
NAME <u>Kansas Nebraska Natural Gas Inc.</u>		OGCC NO.
ADDRESS <u>P. O. Box 15265</u>		
CITY <u>Lakewood</u>	STATE <u>CO</u>	ZIP CODE <u>80205</u>
AREA CODE PHONE NUMBER <u>()</u>	DATE OF FIRST SALES	

ROYALTY OWNER	
<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 type="checkbox"/> N/A	

Remarks: REORGANIZATION OF EOTT ENERGY CORP., EFFECTIVE 04/01/94.

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) M. A. Snowden TITLE Owner DATE 5-2-94SIGNED Maylene Snowden

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY [Signature] TITLE DIRECTOR DATE JUN 10 1994

O & G Cons. Comm.