



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

PAID

ck. No.

27 1996

COGCC

MAY 31 1996

CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR

(Please submit original & 3 copies per well)

FOR OFFICE USE ONLY			
ET	FE	UC	SE
API NO. 0512309213			
AREA CODE / PHONE NUMBER 303-296-3600			
Inc.			
NEW OPERATOR BOND STATUS			
<input checked="" type="checkbox"/> Blanket	<input type="checkbox"/> Single	<input type="checkbox"/> Ride	

*OGCC LEASE NO. 60105		LEASE NAME Futura Horse Village 41-3		WELL NO. 1	API NO. 0512309213
FIELD NAME Spindle		FIELD NO. 77900	COUNTY Weld	LOCATION (QQ, SEC, TWP, RNG) NE NE 3-T1N-R68W	
OPERATOR NAME HS Resources, Inc.				OGCC OPR. NO. 41385	AREA CODE / PHONE NUMBER 303-296-3600
OPERATOR ADDRESS 1999 Broadway, Suite 3600				**PREVIOUS OPERATOR Basin Exploration, Inc.	
CITY Denver	STATE CO	ZIP CODE 80202	EFFECTIVE CHANGE DATE JUN 01 1996		NEW OPERATOR BOND STATUS <input checked="" type="checkbox"/> Blanket <input type="checkbox"/> Single <input type="checkbox"/> Rides

*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.) FORMATION(S): Sussex/Shannon		TYPE OF COMPLETION (More than one may apply.) <div> <input type="checkbox"/> NEW COMPLETION <input type="checkbox"/> COMMINGLED COMPLETION </div> <div> <input type="checkbox"/> RECOMPLETION <input type="checkbox"/> MULTIPLE COMPLETION </div>	
CURRENT WELL STATUS Producing	DATE SHUT IN OR PRODUCTION RESUMED	New Well Test Data on 24 hr. Basis; Test Date: _____ <div> Bbls Oil MCF Gas Bbls. Water </div>	

OIL TRANSPORTER (First Purchaser)			GAS GATHERER (First Purchaser)		
NAME Associated Transport & Trading		OGCC NO. 04681	NAME Associated Natural Gas		OGCC NO. 04680
ADDRESS 370 17th Street, Suite 900			ADDRESS 370 17th St., Suite 900		
CITY Denver	STATE CO	ZIP CODE 80202	CITY Denver	STATE CO	ZIP CODE 80202
AREA CODE / PHONE NO. 303-595-3331		DATE OF FIRST PRODUCTION	AREA CODE / PHONE NO. 303-595-3331		DATE OF FIRST SALES

ROYALTY OWNER				METHOD OF WATER DISPOSAL			
<input type="checkbox"/>	STATE	<input type="checkbox"/>	FEDERAL	FACILITY NUMBER _____			
<input type="checkbox"/>	INDIAN	<input checked="" type="checkbox"/>	FEE				
State, Federal or Indian Lease #:				<input type="checkbox"/> CENTRAL PIT <input type="checkbox"/> ON-SITE PIT <input type="checkbox"/> N/A <input checked="" type="checkbox"/> COMMERCIAL PIT <input type="checkbox"/> INJECTION WELL			
TOTAL ACRES IN LEASE	ACRES ASSIGNED TO WELL	<input type="checkbox"/>	STANDUP				
320	40	<input type="checkbox"/>	LAYDOWN				

Remarks:



00041533

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: **Rick L. Parks** TITLE: **Operations Manager**

DATE: MAY 31 1996

SIGNED:

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY:

TITLE: DIRECTOR

DATE _____

D & G Cons. Comm.

SEP 05 1996