

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



MAY 31 1996



CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR

(Please submit original & 3 copies per well)

*OGCC LEASE NO. 60105		LEASE NAME Futura Horse Village 41-03	WELL NO. 3	FOR OFFICE USE ONLY ET: <input checked="" type="checkbox"/> FE: <input type="checkbox"/> UC: <input type="checkbox"/> SE: <input type="checkbox"/>	
FIELD NAME Spindle	FIELD NO. 77900	COUNTY Weld	LOCATION (QQ, SEC, TWP, RNG) C NW 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"/> 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.)

FORMATION(S): **Sussex/Shannon**

CURRENT WELL STATUS Producing	DATE SHUT IN OR PRODUCTION RESUMED
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TYPE OF COMPLETION
(More than one may apply.)

NEW COMPLETION COMMINGLED COMPLETION
 RECOMPLETION MULTIPLE COMPLETION

New Well Test Data on 24 hr. Basis; Test Date: _____
Bbls Oil _____ MCF Gas _____ Bbls Water _____

OIL TRANSPORTER (First Purchaser)

NAME Associated Transport & Trading	OGCC NO. 04681
ADDRESS 370 17th Street, Suite 900	
CITY Denver	STATE CO
ZIP CODE 80202	
AREA CODE / PHONE NO. 303-595-3331	DATE OF FIRST PRODUCTION

GAS GATHERER (First Purchaser)

NAME Associated Natural Gas	OGCC NO. 04680
ADDRESS 370 17th St., Suite 900	
CITY Denver	STATE CO
ZIP CODE 80202	
AREA CODE / PHONE NO. 303-595-3331	DATE OF FIRST SALES

ROYALTY OWNER

STATE FEDERAL
 INDIAN FEE

State, Federal or Indian Lease #: _____

TOTAL ACRES IN LEASE 320	ACRES ASSIGNED TO WELL 40	STANDUP LAYDOWN
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METHOD OF WATER DISPOSAL

FACILITY NUMBER _____

CENTRAL PIT COMMERCIAL PIT
 ON-SITE PIT INJECTION WELL
 N/A

Remarks:



00041521

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: [Signature]

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY: [Signature]

TITLE: DIRECTOR DATE: MAY 05 1996
O & G Cons. Comm