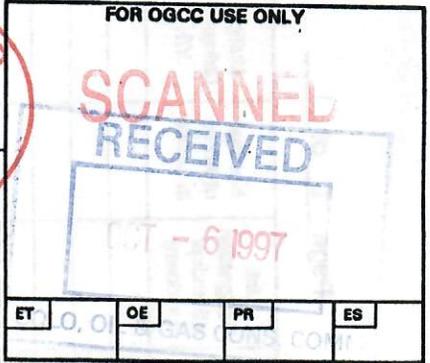




State of Colorado
Gas Conservation Commission
 DEPARTMENT OF NATURAL RESOURCES



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: 79905	Contact Name & Phone
Name of Operator: Smith Oil Properties Inc.	James A. Smith
Address: 518 17th St., Suite 360	No: 303/825-7405
City: Denver State: CO Zip: 80202	Fax: 303/825-0516

Operator Bond Status

Blanket

Individual

Change of Operator **Change of Transporter or Gatherer**

Effective Date: September 1, 1997 Effective Date: _____

Complete This Section For a New or Individual Well.

OGCC Lease No: 42707	API Number: 05- 087 8082
Well Name and Number: <u>Green No. 1</u> <i>See Back of Form</i>	Field Name and Number: Sawbuck 76650
Location (QtrQtr, Sec, Twp, Rng, Meridian): <u>SESW Sec. 4 T2N R58W 6th P.M.</u>	
Acres Assigned to Well: 40	Acres in Lease: 440
<input type="checkbox"/> Standup <input type="checkbox"/> Laydown	Royalty Owner: <input checked="" type="checkbox"/> Fee <input type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Indian
Method of Water Disposal Facility and/or Pit Number: <u>Trucked</u>	<input type="checkbox"/> Central Pit <input type="checkbox"/> Commercial Pit <input type="checkbox"/> On-site Pit <input type="checkbox"/> Injection Well <input type="checkbox"/> NA
Producing Formation(s): <u>D-Sand</u>	Recompletion? <input type="checkbox"/> Y <input type="checkbox"/> N
Current Well Status: <u>SI</u>	Date Shut In or Production Resumed: _____
Multiple Well Lease? <input checked="" type="checkbox"/> N <input type="checkbox"/> Y If yes, interests must be common. If existing OGCC lease, lease no: _____	

OIL TRANSPORTER		GAS GATHERER	
Name of Oil Transporter	OGCC Operator No.	Name of Gas Gatherer	OGCC Operator No.
		<u>Patina Oil & Gas Corp.</u>	<u>67305</u>
Address		Address	
		<u>1625 Broadway, Suite 220</u>	
City	State	City	State
		<u>Denver</u>	<u>CO</u>
Area Code	Phone Number	Area Code	Phone Number
()		<u>(303)</u>	<u>389-3600</u>
Date of First Production This Formation		Date of First Sales This Formation	
		<u>05/28/96</u>	

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	City	State
Area Code	Phone Number	Area Code	Phone Number
()		()	
Date of First Production This Formation		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	Seller's Signature
<i>[Signature]</i>	<i>James A. Smith</i>
Name of Operator	Name of Operator
<u>Western Operating Company</u>	<u>Smith Oil Properties Inc.</u>
Title	Title
<u>Vice President</u>	<u>President</u>
Date	Date
<u>08/26/97</u>	<u>9-10-97</u>

OGCC Approved: *[Signature]* Title: _____ Date: DEC 18 1997

DIRECTOR
O & G Cons. Comm.

