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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)

COLO. OIL & GAS CONSERVATION COMM. OFFICE USE ONLY
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OGCC LEASE NO. 49040	LEASE NAME STATE	WELL NO. 4	API NO. 051156045
FIELD NAME & NO. NORTH MARKS BUTTE	COUNTY Arapahoe	LOCATION (1/4, SEC, TWP, RANG) C 5 1/2 SW	
OPERATOR NAME Greenwood Holdings Inc.	OGCC OPR. NO. 35715	AREA CODE (303)	PHONE NUMBER 773-6703
OPERATOR ADDRESS 5600 South Quebec Street, Suite 150-C	PREVIOUS OPERATOR Gold King Petroleum Inc.	NEW OPERATOR BOND STATUS <input checked="" type="checkbox"/> BLANKET <input type="checkbox"/> SINGLE <input type="checkbox"/> RIGOR	
CITY Englewood	STATE Colorado	ZIP CODE 80111	EFFECTIVE DATE OF CHANGE 9/1/92

*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.)
Leonard

CURRENT WELL STATUS
TA

DATE SHUT IN OR PRODUCTION RESUMED
9-1984

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 _____
_____ Sbls. Oil _____ Mcf Gas _____ Sbls. Wtr.

OIL TRANSPORTER (First Purchaser)

NAME
National Cooperative Refinery

OGCC NO.
62300

ADDRESS
216 16TH ST. MAIL, SUITE 1210

CITY
Denver

STATE
CO

ZIP CODE
80202

AREA CODE PHONE NUMBER
(303) 534-3855

DATE OF FIRST PRODUCTION
8-83

GAS GATHERER (First Purchaser)

NAME _____

OGCC NO. _____

ADDRESS _____

CITY _____

STATE _____

ZIP CODE _____

AREA CODE PHONE NUMBER _____

DATE OF FIRST SALES _____

ROYALTY OWNER

STATE FEDERAL
 INDIAN FEE

State, Federal or Indian Lease # _____

TOTAL ACRES IN LEASE
640

ACRES ASSIGNED TO WELL
4.0

Standup Laydown

METHOD OF WATER DISPOSAL

FACILITY NUMBER _____

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

STATUS REPORT REQUIRED EVERY 6 MONTHS ON SHUT IN & TEMPORARILY ABANDONED WELLS.

Remarks: we plan to evaluate this well for recompletion

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) James P. Ryker TITLE OPERATIONS MANAGER DATE 9-23-92
SIGNED James P. Ryker

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY Dennis Bicknell TITLE DIRECTOR DATE DEC 22 1992
G & G Cons. Comm.