



FOR OGCC USE ONLY

JUN 28 1999

ET Bm OE PR ES

CERTIFICATION OF CLEARANCE AND/OR CHANGE

Submit original plus as many copies as the number of wells plus five (5) additional copies. 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: 27250 520	Contact Name & Phone
Name of Operator: Energy Alliance Company, Inc	Rick Wightman
Address: P.O. Box 4461	No: 3038580144
City: Englewood, n State: CO Zip: 80155	Fax: 3038580145

Operator Bond Status

☒ Blanket

☐ Individual

☐ Change of Operator

☐ Change of Transporter or Gatherer

Effective Date: _____

Effective Date: _____

Complete This Section For a New or Individual Well.

OGCC Lease No: 257000	API Number: 05- 0090659300
Well Name and Number: Creek 1-28	Field Name and Number: Wildcat 99999
Location (QtrQtr, Sec, Twp, Rng, Meridian): S/2 Sec. 28 T34s-R41w	Acres in Lease: 320
Acres Assigned to Well: 320 S/2	Standup Laydown: <input checked="" type="checkbox"/> Standup <input type="checkbox"/> Laydown
Royalty Owner: <input checked="" type="checkbox"/> Fee <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Indian	State, Federal or Indian Lease No:
Method of Water Disposal Facility and/or Pit Number: NA	Central Pit <input type="checkbox"/> On-site Pit <input type="checkbox"/> Commercial Pit <input type="checkbox"/> Injection Well <input type="checkbox"/> NA
Producing Formation(s): Redcave	Recompletion? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Current Well Status: Shut-in Waiting On Pipeline	Date Shut In or Production Resumed: 5/29/99
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.	
Address			Duke Energy Field Services		
City		State	Zip	6120 South Yale, Suite 600	
Area Code	Phone Number	Date of First Production This Formation	City	State	Zip
()			Tulsa	OK	74136
			Area Code	Phone Number	Date of First Sales This Formation
			(918)	4923331	

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	Zip	City	
Area Code	Phone Number	Date of First Production This Formation	Area Code	Phone Number	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
Name of Operator	Name of Operator
Energy Alliance Company, Inc	
Title	Date
President	6-23-99

OGCC Approved:

[Signature]

Title:

DIRECTOR
OGCC Cons. Comm.

Date:

JUL 16 1999