

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)

FOR OFFICE USE ONLY  
ET  FE  UC  SE

OGCC LEASE NO. 62242	LEASE NAME Luhman UPRR	WELL NO. 31-13 (#3)	API NO. 05-123-14607
FIELD NAME & NO. WATTENBERG/90750	COUNTY WELD	LOCATION (1/4, SEC, TWP., RNG) NWNE SEC. 13-T3N-R66W	
OPERATOR NAME BASIN OPERATING COMPANY		OGCC OPR. NO. 06540	AREA CODE PHONE NUMBER (303) 292-2322
OPERATOR ADDRESS 633 17th STREET, SUITE 1500		** PREVIOUS OPERATOR NAME BASIN EXPLORATION, INC.	
CITY DENVER	STATE CO	ZIP CODE 80202	EFFECTIVE DATE OF CHANGE 4-12-90
		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.)

Codell

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. Wtr.

**OIL TRANSPORTER (First Purchaser)**

NAME TOTAL PETROLEUM COMPANY	OGCC NO. 89000	
ADDRESS 999 18th STREET, SUITE 2201		
CITY DENVER	STATE CO	ZIP CODE 80202-2492
AREA CODE PHONE NUMBER (303) 291-2000	DATE OF FIRST PRODUCTION 6-19-90	

**GAS GATHERER (First Purchaser)**

NAME ASSOCIATED NATURAL GAS	OGCC NO. 62420 04680	
ADDRESS P.O. BOX 5493		
CITY DENVER	STATE CO	ZIP CODE 80217
AREA CODE PHONE NUMBER (303) 595-3331	DATE OF FIRST SALES 6-19-90	

**ROYALTY OWNER**

STATE  FEDERAL  
 INDIAN  FEE

State, Federal or Indian Lease # \_\_\_\_\_

TOTAL ACRES IN LEASE 80	ACRES ASSIGNED TO WELL 80	<input checked="" type="checkbox"/> Standup <input type="checkbox"/> Laydown
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**METHOD OF WATER DISPOSAL**

FACILITY NUMBER \_\_\_\_\_

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

AUG 31 1990  
COLORADO OIL & GAS CONSERVATION COMMISSION

Remarks: THIS IS A CHANGE OF THE COMPANY NAME AND NOT CHANGE OF OPERATOR.

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) Joyce M. Eckardt TITLE Production Technician DATE 8-15-90  
SIGNED Joyce M. Eckardt

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY Dennis R. Bicknell TITLE DIRECTOR DATE SEP 07 1990  
O & G Cons. Comm.