



Oil and 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.

RECEIVED  
APR 20 00  
COGCC

ET: Bm OE: PR: ES:

OGCC Operator Number: 41385	Contact Name & Phone
Name of Operator: HS Resources, Inc.	Elaine Rivas
Address: 3939 Carson Avenue	No: 970-330-0614
City: Evans State: CO Zip: 80620	Fax: 970-330-0431

Operator Bond Status

☒ Blanket  
☐ Individual

☐ Change of Operator

Effective Date: \_\_\_\_\_

☐ Change of Transporter or Gatherer

Effective Date: \_\_\_\_\_

Complete This Section For a New or Individual Well.

OGCC Lease No: 257139	API Number: 05-123-19890
Well Name and Number: HSR-Myrna 15-12A	Field Name and Number: Wattenberg 90750
Location (QtrQtr, Sec, Twp, Rng, Meridian): SWSE Sec 12-T1N-R67W 6th P.M.	Acres in Lease: 578.68
Acres Assigned to Well: 320 S/2 <input type="checkbox"/> Standup <input checked="" 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: 349 or 329 or Facility and/or Pit Number: CDSLLC-351	<input type="checkbox"/> Central Pit <input type="checkbox"/> Commercial Pit <input checked="" type="checkbox"/> Injection Well <input type="checkbox"/> NA
Producing Formation(s): J Sand	Recompletion? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Current Well Status: producing	Date Shut In or Production Resumed: 1/998-01/37
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: Conoco	OGCC Operator No. 19160	NAME of Gas Gatherer: HS Gathering LLC	OGCC Operator No. 41387
Address: 6855 S. Havana St. Suite 600		Address: 635 N. 7th Avenue	
City: Englewood State: CO Zip: 80112		City: Brighton State: CO Zip: 80601	
Area Code: 303 Phone Number: 649-4010	Date of First Production This Formation: 2/14/00	Area Code: 303 Phone Number: 659-5922	Date of First Sales This Formation: 2/14/00

If Multiple Transporter or Gatherer, Complete the Following:

OIL TRANSPORTER		Gas Gatherer	
NAME of Oil Transporter	OGCC Operator No.	NAME of Oil Transporter	OGCC Operator No.
Address		Address	
City	State Zip	City	State Zip
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 canceled by the Colorado Oil and Gas Conservation Commission.

Buyer or Current Operator's Signature: Elaine Rivas	Seller's Signature
Name of Operator: HS Resources, Inc.	Name of Operator
Title: Operations Technician Date: 04/18/00	Title: Date: 04/18/00

OGCC Approved:

*[Signature]*

Title: Director, Oil & Gas Commission

Date: MAY 03 2000