

STATE OF COLORADO
OIL & GAS CONSERVATION COMMISSION
DEPARTMENT OF NATURAL RESOURCES

00514456

STATEMENT OF CLEARANCE AND/OR CHANGE OF OPERATOR

(Please submit original and 3 copies per well)

FOR OFFICE USE ONLY			
BY	FE	UC	SE

OGCC LEASE NO. 15100	LEASE NAME Christopher 43-1	WELL NO. 4	API NO. 05-017-7383
FIELD NAME & NO. Speaker 77825	COUNTY Cheyenne	LOCATION (1/4, SEC., TWP., RNG.) NE/SE Sec. 1, T.12S., R.51W.	
OPERATOR NAME Union Pacific Resources Company		OGCC OPR. NO. 91100	AREA CODE 817
OPERATOR ADDRESS P.O. Box 7 MS 3006		PHONE NUMBER 877-7941	
CITY Fort Worth,		**PREVIOUS OPERATOR	
STATE TX	ZIP CODE 76101-0007	EFFECTIVE DATE OF CHANGE 2-1-95	NEW OPERATOR BOND STATUS <input 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. Morrow V-11
CURRENT WELL STATUS Producing
DATE SHUT IN OR PRODUCTION RESUMED N/A

TYPE OF COMPLETION (More than one may apply) <input type="checkbox"/> NEW COMPLETION <input type="checkbox"/> COMMINGLED COMPLETION <input type="checkbox"/> RECOMPLETION <input type="checkbox"/> MULTIPLE COMPLETION
New Well Test Data on 24 hr. Basis: Test Date _____ _____ Bbls. Oil _____ Mcf Gas _____ Bbls. Wtr

OIL TRANSPORTER (First Purchaser)			
NAME Scurlock Permian		OGCC NO. 68625	
ADDRESS 650 S. Cherry Street - Suite 1220			
CITY Denver	STATE CO	ZIP CODE 80222	
AREA CODE (303)	PHONE NUMBER 320-3999	DATE OF FIRST PRODUCTION N/A	

GAS GATHERER (First Purchaser)			
NAME N/A		OGCC NO.	
ADDRESS			
CITY	STATE	ZIP CODE	
AREA CODE	PHONE NUMBER	DATE OF FIRST SALE	

ROYALTY OWNER		
<input type="checkbox"/> STATE	<input type="checkbox"/> FEDERAL	
<input type="checkbox"/> INDIAN	<input checked="" type="checkbox"/> FEE	
State, Federal or Indian Lease # <u>UPRR Land Grant</u>		
TOTAL ACRES IN LEASE	ACRES ASSIGNED TO WELL	<input type="checkbox"/> Standup
Unitized Field		<input type="checkbox"/> LayDown

METHOD OF WATER DISPOSAL	
FACILITY NUMBER	N/A
<input type="checkbox"/> CENTRAL PIT	<input type="checkbox"/> COMMERCIAL PIT
<input type="checkbox"/> ON-SITE PIT	<input type="checkbox"/> INJECTION WELL
<input type="checkbox"/> N/A	

Remarks New OGCC Lease Number

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) Wanda Bartell TITLE Regulatory Analyst DATE 1-31-96

SIGNED

Wanda Bartell

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY

E. Brubling

TITLE

DIRECTOR
O & G Cons. Comm.

DATE

APR 02 1996