



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



RECEIVED
OCT 14 1994

CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR
(Please submit original and 3 copies per well)

FOR OFFICE USE ONLY
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*OGCC LEASE NO. 28800 28310		LEASE NAME Cliff D Sand		WELL NO. #2 UPRR Casement	API NO. 075071910
FIELD NAME & NO. Cliff 11400		COUNTY Logan	LOCATION (1/4, SEC, TWP, RNG) Part of D Sand Unit located in parts of Sections 28, 29, 32, 4, 5, 8 and 9, 11N-54W and Sections 12N-54W SWSW		
OPERATOR NAME Rex Monahan		OGCC OPR. NO. 59100	AREA CODE (303)	PHONE NUMBER 522-0774 S33 T 10N R 54W	
OPERATOR ADDRESS Box 1231		** PREVIOUS OPERATOR			
CITY Sterling	STATE Co	ZIP CODE 80751	EFFECTIVE DATE OF CHANGE June 1, 1994	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.)

"D" Sand

CURRENT WELL STATUS producing	DATE SHUT IN OR PRODUCTION RESUMED 5-9-94 6-1-94
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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 Scurlock Permian		OGCC NO. 68625
ADDRESS P. O. Box 4648		
CITY Houston	STATE Texas	ZIP CODE 77210-4648
AREA CODE (713)	PHONE NUMBER 646-4100	DATE OF FIRST PRODUCTION

GAS GATHERER (First Purchaser)

NAME KN Energy, Inc.		OGCC NO. 45825
ADDRESS P. O. Box 281304		
CITY Lakewood	STATE Co	ZIP CODE 80228-8304
AREA CODE (303)	PHONE NUMBER 989-1740	DATE OF FIRST SALES June, 1994

ROYALTY OWNER

STATE FEDERAL
 INDIAN FEE

State, Federal or Indian Lease # _____

TOTAL ACRES IN LEASE	ACRES ASSIGNED TO WELL	<input 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

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.

NAME (PRINT) Rex Monahan TITLE Operator DATE 10-13-94
SIGNED _____

(THIS SPACE FOR STATE OFFICE USE ONLY)

APPROVED BY [Signature] TITLE _____ DATE FEB 07 1995
DIRECTOR
O & G Cons. Comm.