Message Confirmation Report FEB-26-2007 09:38 MON

Fax Number :
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Page : 1
Start Time : FEB-26-2007 09:37 MON
Elapsed Time : 00'42"
Mode : STD G3
Results : [O.K]

Colorado Custom

Work Order Quote

To:	State of Wyoming
Today's Date:	February 21, 2007
WO #:	**WYA0O1**
Contract Reference #:	Attachment A
Budget:	Customization
Scope:	Wyoming State Compliance
Estimate of Hours:	20 hours per report
Specifications:	Form 39 – Drilling Rig Equipment - rendition Form 25 – Commercial/Agricultural/Industrial - rendition Form 40 – Oil & Gas Field Equipment - rendition

Renditions will all have the same format for the main body except with a different heading. The details will vary depending on the type of rendition it is.
Form 25 - Renditions will show the asset number, description, acquired year, acquired cost for each detail.

Questions:

Please sign below to confirm your agreement of the above.

_____ 2/26/07
DOR Signature **Date**

_____ _____
CCI Signature **Date**

* Projected delivery date may change if not approved within 15 days, price quote valid for 30 days.

11/20/2006 Amendment
The Oil and Gas Rendition for "Oil and Gas Equipment Grouped by Well" will be amended so that:
1. The assessed values as well as the assessed value totals will be removed from the report.
2. The Well name will be enlarged on the report so that more of the text will show.
3. The Well ID number will be added to the report.

The Amended report will be available in version 4.13.03. This release will be available April, 2007.

Colorado CustomWare, Inc.

Work Order Quote

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Form AT040

State of Wyoming,

OIL & GAS FIELD EQUIPMENT
PERSONAL PROPERTY—OWNED
DECLARATION SCHEDULE FOR 2007

ASSESSMENT DATE: January 1, 2007 **DUE DATE:** March 1, 2007

County Number	Parcel #	Act Number	Personal Prop. Type	DO NOT USE - FOR ASEESSOR USE ONLY
				Date received: _____ By: _____
Name and address of personal property listed here: (please make any corrections here)				Please indicate location of personal property: (please make any changes here) 1/4 _____ 1/4 _____ Section _____ Township _____ Range _____ Type of land this personal property is located on: (check one) [ ] Private [ ] Public

Please list all leased equipment and provide owner's name and address Please list only one location per form. Do not report depreciated costs. Please include freight & all installation costs (duplicate form as necessary)

NAICS CODE: _____

Owner and Address of leased property	Property Description Make / Model / Size / Serial #	Cost of Leased Property	Condition	Term (From - To)	Annual Rent

W.S. 39-13-107 (a)(i) I...the owner of (or agent, etc., as the case may be) do solemnly swear or affirm that the above and foregoing listed property is a full, true, correct and complete list of all property owned by me or under my control as agent or otherwise, and that I have not failed or neglected to list for taxation for the year _____, all property of which I am the owner of or of which I have control as agent, guardian, administrator or otherwise, in the county of _____, State of Wyoming and that I have not connived at any violation or evasion of the requirements of law in relation to the assessment of property for taxation. W.S. 18-3-205(b) Any person who fails to return any taxable property owned by him or under his control is guilty of a misdemeanor and upon conviction shall be fined not exceeding five hundred dollars ($500.00), imprisoned in the county jail not exceeding ninety (90) days, or both.

Type or print your name here: _____

Signature of owner/agent _____ Title _____ Date _____

Telephone number _____ Fax Number _____ Email: _____

Please sign below to confirm your agreement of the above.

Colorado CustomWare, Inc. 10 of 11 Confidential

Colorado CustomWare, Inc.

Form AD40

OIL & GAS FIELD EQUIPMENT
PERSONAL PROPERTY—OWNED
DECLARATION SCHEDULE FOR 2007

Assessment Date: January 1, 2007 **Due Date:** March 1, 2007

County Number	Parcel #	Act Number	Personal Prop. Type

DO NOT USE - FOR ASEESSOR USE ONLY

Date received: _____ By: _____

Name and address of personal property listed here: (please make any corrections here)

Please indicate location of personal property: (please make any changes here)

1/4 _____ 1/4 _____ Section _____ Township _____ Range _____

Type of land this personal property is located on: (check one) [ ] Private [ ] Public

Please complete the following information about the oil field equipment you own.

NAICS CODE: _____

Operator ID # _____ **Contact Person** _____

API Number _____ **Unit Name** _____ **Group Number** _____

Field Name _____ **Basin** _____

Well Type [ ] Gas [ ] Oil [ ] CBM [ ] Inj

Well Status [ ] Producing [ ] shut In [ ] Permanently Abandoned [ ] Temporarily Abandoned [ ] Equipment in place [ ] Equipment removed

*Please list only one location per form. Do not report depreciated costs. Please do include freight & **all** installation costs (use additional pages if necessary)*

Oil and / or Gas Field Equipment Description (include all equipment/GPU's/wellhead/tanks/metering equipment/ compressors//flow lines/ buildings/furniture & fixtures)	**Model**	**Units or Footage**	**Size**	**Pressure Capacity**	**Condition**	**Year Installed**	**Installed Cost**

Confidential

Colorado CustomWare, Inc.

OIL & GAS FIELD EQUIPMENT
PERSONAL PROPERTY—OWNED
DECLARATION SCHEDULE FOR 2007

INSTRUCTION SHEET FOR FILING ATD 39 and/or 40

1. WHO MUST FILE: Owners of, or acting agents of, any oil or gas properties within the State of Wyoming, as required by W.S. 39-11-103 (a) (i), 39-13-103 (b) (v) and 39-13-107 (b) (ix), or personal property brought, driven or coming into Wyoming, or acquired, after the assessment date and prior to December 31 which remains in Wyoming at least thirty (30) days and has not been regularly assessed for taxation in any other Wyoming County… 39-13-103 (a) (i) (B).

2. FAILURE TO FILE: An annual report or the filing of an incomplete report will result in a valuation and assessment by the County Assessor from the "BEST INFORMATION AVAILABLE" Incomplete reports **WILL** be returned to the respondent and considered as **not filed**.

3. Electronic media filing must be approved by the applicable County Assessors Office. Computer programs should be designed to coincide with the State form.

GENERAL INFORMATION

A. Please indicate the well's location in the upper right hand box.

B. Please list one well per form. You may duplicate the form as necessary.

C. Owner or operator's information; Operator ID is the number issued by the Wyoming Oil & Gas Conservation Commission (OGCC). The API number is the number of the well issued by the Wyoming Oil & Gas Conservation Commission. The Group Number is the number of the well (s) issued by the Wyoming's Mineral Tax Division, Department of Revenue, this number is used to identify the lease or unit.

D. Fill in all information on the lease. Indicate the number of wells applicable to identify the lease or unit.

E. Indicate the number of wells "Plugged and Abandoned" and "Temporarily Abandoned". Indicate the number of wells "Shut In".

F. Please list all Surface Equipment and Gathering Systems. List all like equipment together, IE; Well Heads, Valves, Motors, Treaters, etc., by their individual types. **Describe and indicate number of units, size, capacity, model, condition and age.**

G. The column titled "Company Installed Cost" means the cost of the equipment and **all** installed costs to put the equipment in operation.

H. List all structures on the lease (if applicable); warehouses, well houses, pump housing etc. Describe and indicate measurements, structure type, condition and age.

I. List all "MATERIALS AND SUPPLIES" not held for resale.

J. List all "LEASED EQUIPMENT" the same as all other equipment. Fill in the information pertaining to the Lessor. The information provided here will not be used for your assessment.

K. Answer all questions completely and thoroughly. Your signature will validate your report.

L. Additional information your company may wish to supply regarding valuation that would result in a more equitable assessment should be submitted with this report.

Colorado CustomWare, Inc.
8 of 11
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COMMERCIAL / AGRICULTURAL/ INDUSTRIAL
PERSONAL PROPERTY—OWNED
DECLARATION SCHEDULE FOR 2007

Assessment Date: January 1, 2007 **Due Date:** March 1, 2007

County Number	Parcel #	Act Number	Personal Prop. Type	DO NOT USE - FOR ASEESSOR USE ONLY Date received: By:
Name and address of personal property listed here: (please make any corrections here)				Please indicate location of personal property: (please make any changes here)

PERSONAL PROPERTY DETAIL LISTING: Please list all personal property you own and use in your business or operation (Include **all** installed costs)—do not list licensed vehicles (please indicate any changes to the following list by lining out the items that have been removed and filling in the new items purchased) (duplicate form as necessary). Please sign the reporting rendition on the bottom of page 2 and return the completed form by March 1, 2007

NAICS CODE: _____

Item	Make	Model	Serial #	Year	New/Used	Original

Please see second page for leased equipment reporting requirements.

Colorado CustomWare, Inc.
6 of 11
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DRILLING RIG EQUIPMENT
PERSONAL PROPERTY—OWNED
DECLARATION SCHEDULE FOR 2007

Assessment Date: January 1, 2007 **Due Date:** March 1, 2007

County Number	Parcel #	Act Number	Personal Prop Type	DO NOT USE - FOR ASSESSOR USE ONLY Date received: By:
Name and address of personal property listed here (please make any corrections here)				Please indicate location of personal property (please make any changes here) 1/4 1/4 Section Township Range Type of land this personal property is located on: (check one) [ ] Private [ ] Public

Please complete the following information about the drilling rig equipment you lease. NAICS CODE: _____

Please list all leased equipment and provide owner's name and address. Please list only one location Per form. Do not report depreciated costs. Please do include freight & all installed costs. (duplicate form as necessary)

Owner and Address of leased property	Property Description Make / Model / Size / Serial #	Cost of Leased Property	Condition	Term (From - To)	Annual Rent

W.S. 39-13-107 (a) (i) I, the owner of (or agent, etc., as the case may be) do solemnly swear or affirm that the above and foregoing listed property is a full, true, correct and complete list of all property owned by me or under my control as agent or otherwise, and that I have not failed or neglected to list for taxation for the year , all property of which I am the owner of or of which I have control as agent, guardian, administrator or otherwise, in the county of , State of Wyoming and that I have not connived at any violation or evasion of the requirements of law in relation to the assessment of property for taxation. W.S. 18-3-205(b) Any person who fails to return any taxable property owned by him or under his control is guilty of a misdemeanor and upon conviction shall be fined not exceeding five hundred dollars ($500.00), imprisoned in the county jail not exceeding ninety (90) days, or both.

Type or print your name here: _____

Signature of owner/agent_____ Title _____ Date _____

Telephone number _____ Fax Number _____ Email: _____

State of Wyoming

DRILLING RIG EQUIPMENT
PERSONAL PROPERTY—OWNED
DECLARATION SCHEDULE FOR 2007

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DO NOT USE - FOR ASSESSOR USE ONLY

Date received _____ By _____

Name and address of personal property listed here. (please make any corrections here)

Please indicate location of personal property: (please make any changes here)

1/4 _____ 1/4 _____ Section _____ Township _____ Range _____

Type of land this personal property is located on: (check one) [ ] Private [ ] Public

Please complete the following information about the drilling rig equipment you own.

NAICS CODE: _____

Drill Collars

Quantity	Size	Length in Feet	Slick	Spiral

Miscellaneous Equipment: Hand tools / Compressors / Welders, etc.

Description / Make / Model	Serial #	New/Used	Year Built	Date Acquired	Installed Cost

State of Wyoming

DRILLING RIG EQUIPMENT
PERSONAL PROPERTY—OWNED
DECLARATION SCHEDULE FOR 2007

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Date received: By:

Name and address of personal property listed here: (please make any corrections here)

Please indicate location of personal property (please make any changes here)

1/4 1/4 Section Township Range

Type of land this personal property is located on: (check one) [ ] Private [ ] Public

Please complete the following information about the drilling rig equipment you own.

NAICS CODE:

Contact Person Telephone

Rig Name Rig Number Rig Age

Stacked Rigs % complete Capable of Operation [ ] Yes [ ] No Drilling for: [ ] Gas [ ] Oil [ ] CBM

Drawworks Make Model Depth Rating feet

[ ] Electric [ ] Mechanical Engines Make HP Rating

Make HP Rating

Make HP Rating

Drill Pipe

Joints	Feet	Size	Lbs. Per Foot	Grade	New/Used	Installed Cost

Tool Pusher Living Quarters or Location

Size: Length x Width	Year Built	Capacity—# of People

DRILLING RIG EQUIPMENT
PERSONAL PROPERTY—OWNED
DECLARATION SCHEDULE FOR 2007

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