FOR OFFICIAL USE ONLY

FORM 38

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State of Colorado Energy & Carbon Management Commission

1120 Lincoln street, Suite 801, Denver, Colorado 80203 (303) 894-2100 Fax: (303) 894-2109



PAYMENT OF PROCEEDS HEARING REQUEST

This form may be submitted only by a payee legally entitled to payment from proceeds derived from the sale of oil, gas, or associated products from a well in Colorado. The payee is to complete this form (one form per well), attach required documentation and mail to: ECMC, 1120 Lincoln Street, Suite 801, Denver, Colorado 80203 or fax to: (303) 894-2109. ECMC will investigate the report and determine what action, if any, should be taken.

DAVEE INFORMATION

TATELINION	
NAME OF PAYEE:	PHONE NO:
ADDRESS:	FAX:
CITY: STATE: ZIP:	E-MAIL:
	PAYEE NUMBER:
MINERAL INFORMATION	
WELL NAME: COUNTY	:
QTR/QTR SEC: TOWNSHIP: RANGE:	
API NUM	BER:
NON-COMPLIANCE ISSUES NOT RESOLVED	
(PLEASE CHECK ALL THAT APPLY)	
Required checkstub detail not provided:	
Late payment	
Non payment	
No interest paid on late payment	
No response to Form 37 inquiry	

All pertinent documentation must be attached. This includes: completed copy of operator contact Form 37, proof of mailing, response (if received from operator), redacted checkstub detail and any other documentation necessary.