

State of Colorado
Oil and Gas Conservation Commission

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



OGCC RECEPTION

Receive Date:

08/16/2012

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CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR

This form is to be used for Certification of Clearance to transport product off lease. A Form 10 shall be filed for a well within 30 days of first production or a change of transporter/gatherer. A Form 10 shall be filed within 15 days of a change or transfer of ownership of a well, location, pit or facility. Documentation for ratification of sale or transfer of ownership must be attached for Change of Operator. **It is the Operator's responsibility to mail approved copies to the Transporter and/or Gatherer for each well listed.** This form is not used for well name or well status changes. For more information, visit [www.http://cogcc.state.co.us](http://cogcc.state.co.us)

OGCC Operator Number: <u>100322</u>	Contact Person: <u>TANIA MCNUTT</u>
Company Name: <u>NOBLE ENERGY INC</u>	Phone: <u>(303) 228-4392</u>
Address: <u>1625 BROADWAY STE 2200</u>	Fax: <u>(303) 228-4286</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: _____

Operator Bond Status: Blanket Surety ID: _____ Individual Surety ID: **see listing by individual well**

New Well Cert of Clearance **Change of Operator** **Add/Change Transporter or Gatherer**

Add/Change Transporter or Gatherer

<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Delete	Product: <input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Gas
OGCC Transporter No: <u>83720</u>	Suffix: _____		
Trans./Gatherer Name: <u>SUNCOR ENERGY (USA) INC</u>			
Address: <u>103 FOULK RD STE 202 ATTN: JENNIFER LAJOIE</u>	City: <u>WILMINGTON</u>	State: <u>DE</u>	Zip: <u>19803</u>
Phone: <u>(403) 205-6898</u>	Email Contact: _____		

<input type="checkbox"/> Add	<input checked="" type="checkbox"/> Delete	Product: <input type="checkbox"/> Oil	<input checked="" type="checkbox"/> Gas
OGCC Transporter No: _____	Suffix: _____		
Trans./Gatherer Name: _____			
Address: _____	City: _____	State: _____	Zip: _____
Phone: ()	Email Contact: _____		

Remark: _____

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete. The transporter(s)/gatherer(s) is (are) authorized to transport the oil and/or gas produced from the above described well(s) 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.

SUBMITTED BY:

Signed: _____ Print Name: TANIA MCNUTT
Title: REGULATORY ANALYST Email: _____ Date: 08/14/2012

CHANGE OF OPERATOR:

Name of Buying Operator: _____	Name of Selling Operator: _____
Signature: _____ Date: _____	Signature: _____ Date: _____
Print Name: _____ Title: _____	Print Name: _____ Title: _____

COGCC Approved: *Matthew Lee* **Title:** Director of COGCC **Date:** 10/16/2012

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FOR OGCC USE ONLY

CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 100322

Name of Operator: NOBLE ENERGY INC

CENTRALIZED EP WASTE MGMT FAC: 0	GAS STORAGE FACILITY: 0	SERVICE SITE: 0	UIC SIMULTANEOUS DISPOSAL: 0
GAS COMPRESSOR: 0	LOCATION: 0	TANK BATTERY: 0	UIC WATER TRANSFER STATION: 0
GAS GATHERING SYSTEM: 0	PIPELINE: 0	UIC DISPOSAL: 0	WATER GATHERING SYSTEM LINE: 0
GAS PROCESSING PLANT: 0	PIT: 0	UIC ENHANCED RECOVERY: 0	WELL: 0

Total Approved: 0 Total out of Total Total Submitted: 0 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			

Total Deleted: 0 Total out of Total Total Submitted: 0 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			

Total Pending: 0 Total out of Total Total Submitted: 0 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			