

**FORM  
10**Rev  
10/12**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:

**10/26/2012**

Document Number:

**2172783****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: 10428 Contact Person: JASON HAACK  
Company Name: DIVERSIFIED ENERGY LLC Phone: (303) 995-0826  
Address: 11479 S PINE DRIVE #29 Fax: (866) 378-6056  
City: PARKER State: CO Zip: 80134 Email: JHAACK@OAGPRODUCTION.COM

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**

Effective Date of Change Below 09/01/2012 Form is being submitted by: Buyer

**Non-Submitting Operator Information:**

OGCC Number of NON-Submitting 10097 Name of NON-Submitting DRY CREEK PETROLEUM LLC  
NON-submitting Operator is Seller Contact Name JOHN DINARDO Title: MANAGING MEMBER  
NON-submitting Operator Contact Email: \_\_\_\_\_

**Add/Change Transporter or Gatherer**

☒ **Add** ☐ **Delete** Product: ☒ **Oil** ☐ **Gas**

OGCC Transporter No: 70505 Suffix: \_\_\_\_\_  
Trans./Gatherer Name: PLAINS MARKETING LP  
Address: P O BOX 4648 City: HOUSTON State: TX Zip: 77210-4648  
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 listed 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: HAACK,JASON  
Title: MANAGING MEMBER Email: JHAACK@OAGPRODUCTION.COM Date: 09/01/2012

**CHANGE OF OPERATOR:**

Name of Buying Operator: DIVERSIFIED ENERGY LLC Name of Selling Operator: DRY CREEK PETROLEUM LLC  
Signature: \_\_\_\_\_ Date: 09/01/2012 Signature: \_\_\_\_\_ Date: 09/01/2012  
Print Name: HAACK,JASON Title: MANAGING MEMBER Print Name: JOHN DINARDO Title: MANAGING MEMBER

**COGCC Approved:** Matthew Lee **Title:** Director of COGCC **Date:** 11/07/2012

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## CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 10428

Name of Operator: DIVERSIFIED ENERGY LLC

FOR OGCC USE ONLY

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: 1	UIC ENHANCED RECOVERY: 0	WELL: 2

Total Approved: 3 Total out of Total Total Submitted: 3 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	PIT	081-	116613		A.P. URIE		NWSW/13/5N/96		
2	WELL	081-05288	222312	312772	A.P. URIE	2	SENE/14/5N/96W		70505
3	WELL	081-05291	222315	312774	J P WEISE	2	NWNE/14/5N/96W		70505

Total Deleted: 0 Total out of Total Total Submitted: 3 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: 3 are listed below:

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