

**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:

01/14/2013

Document Number:

400368162**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: 8960 Contact Person: Olga Chikaloff
Company Name: BONANZA CREEK ENERGY OPERATING COMPANY LLC Phone: (720) 440-6100
Address: 410 17TH STREET SUITE #1400 Fax: (720) 279-2331
City: DENVER State: CO Zip: 80202 Email: ochikaloff@bonanzacrk.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 01/14/2013

Form is being submitted by: _____

Add/Change Transporter or Gatherer

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

OGCC Transporter No: 200189 Suffix: _____
Trans./Gatherer Name: HIGH SIERRA CRUDE OIL & MARKETING
Address: 14301 CALIBER DR #100 City: OKLAHOMA CITY State: OK Zip: 73134
Phone: () Email Contact: _____

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

OGCC Transporter No: 4680 Suffix: _____
Trans./Gatherer Name: DCP MIDSTREAM LP
Address: 370 17TH STREET - SUITE 2500 City: DENVER State: CO Zip: 80202
Phone: (303) 595-3331 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: Olga Chikaloff
Title: Engineering Tech Email: ochikaloff@bonanzacrk.com Date: 01/14/2013

COGCC Approved: Matthew Lee **Title:** Director of COGCC **Date:** 04/23/2013

State of Colorado

Oil and Gas Conservation Commission

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400368162**CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR**

OGCC Operator Number: 8960

Name of Operator: BONANZA CREEK ENERGY OPERATING COMPANY 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: 0 UIC ENHANCED RECOVERY: 0 WELL: 4

Total Approved: 4 Total out of Total Total Submitted: 4 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	WELL	123-22704	275943	305246	70 RANCH	13-27	NWSW/27/5N/63		4680
	WELL		275943	305246					200189
2	WELL	123-22703	275944	305245	70 RANCH	11-27	NWNW/27/5N/63		4680
	WELL		275944	305245					200189
3	WELL	123-22705	275942	305247	70 RANCH	22-27	SESW/27/5N/63W		4680
	WELL		275942	305247					200189
4	WELL	123-31484	416768	416799	70 Ranch	23-27	NESW/27/5N/63W		4680
	WELL		416768	416799					200189

Total Deleted: 0 Total out of Total Total Submitted: 4 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: 4 are listed below:

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