

FORM  
10Rev  
10/12State 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:

07/18/2013

Document Number:

400449717

## 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: 100185 Contact Person: JENNIFER LIND  
Company Name: ENCANA OIL & GAS (USA) INC Phone: (720) 876-5890  
Address: 370 17TH ST STE 1700 Fax: (720) 876-6890  
City: DENVER State: CO Zip: 80202-5632 Email: JENNIFER.LIND@ENCANA.COM

Operator Bond Status: ☒ Blanket Surety ID: 2009-0011 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 07/01/2013 Form is being submitted by: Buyer

**Non-Submitting Operator Information:**

OGCC Number of NON-Submitting 100264 Name of NON-Submitting XTO ENERGY INC  
NON-submitting Operator is Seller Contact Name KELLY KARDOS Title: PERMITTING SUPERVISOR  
NON-submitting Operator Contact Email: Kelly\_Kardos@xtoenergy.com

**Add/Change Transporter or Gatherer**

☒ Add ☐ Delete Product: ☐ Oil ☒ Gas

OGCC Transporter No: 100185 Suffix: \_\_\_\_\_  
Trans./Gatherer Name: ENCANA OIL & GAS (USA) INC  
Address: 370 17TH ST STE 1700 City: DENVER State: CO Zip: 80202-5632  
Phone: (720) 876-5890 Email Contact: JENNIFER.LIND@ENCANA.COM

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: JENNIFER LIND  
Title: REGULATORY ANALYST Email: JENNIFER.LIND@ENCANA.COM Date: 07/18/2013

**CHANGE OF OPERATOR:**

Name of Buying Operator: ENCANA OIL & GAS (USA) INC Name of Selling Operator: XTO ENERGY INC  
Signature: \_\_\_\_\_ Date: 07/01/2013 Signature: \_\_\_\_\_ Date: 07/01/2013  
Print Name: JENNIFER LIND Title: REGULATORY ANALYST Print Name: KELLY KARDOS Title: PERMITTING SUPERVISOR

**COGCC Approved:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# State of Colorado

## Oil and Gas Conservation Commission

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Document Number:

400449717**CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR**

OGCC Operator Number: 100185

Name of Operator: ENCANA OIL &amp; GAS (USA) INC

**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: 13

Total Approved: 0      Total out of Total Total Submitted: 13      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: 13      are listed below:

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

Total Pending: 13      Total out of Total Total Submitted: 13      are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	WELL	103-10582	278028	316467	LIBERTY UNIT	T18X-9G	SWSW/9/3S/96W		100185
2	WELL	103-10682	282956	316505	LIBERTY UNIT	396-24A1	SWNW/24/3S/96		100185
4	WELL	103-11610	414265	419450	Expanded Liberty Unit	395-21A1	SWNW/21/3S/95		100185
5	WELL	103-11612	414406	419501	EXPANDED LIBERTY	396-6A1	SENE/6/3S/96W		100185
6	WELL	103-11606	413160	414105	Expanded Liberty	396-15A1	Lot 4/15/3S/96W		100185
7	WELL	103-11611	414275	419901	Expanded Liberty Unit	396-18A1	SENE/18/3S/96W		
8	WELL	103-11339	297859	316683	INDEPENDENCE	396-25A1	SESE/25/3S/96W		100185
9	WELL	103-11249	295573	316677	Expanded Liberty Unit	396-31A1	SESE/31/3S/96W		100185
10	WELL	103-11338	297806	316682	Expanded Liberty Unit	496-9A1	NESW/9/4S/96W		100185
11	WELL	103-11391	298759	316685	Expanded Liberty Unit	495-6A1	NENW/6/4S/95W		100185
12	WELL	103-11392	298761	316686	EXPANDED LIBERTY	495-17A1	NWSW/17/4S/95		100185
13	WELL	045-17416	298760	324451	EXPANDED LIBERTY	495-22A1	SENW/22/4S/95W		100185
16	WELL	103-10545	275161	316445	INDEPENDENCE	T52X-29G	NWNE/29/3S/96W		100185