

**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:

**01/10/2014**

Document Number:

**1536866****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: 68710 Contact Person: ANDY PETERSON  
Company Name: PETERSON ENERGY OPERATING INC Phone: (970) 669-7411  
Address: 2154 W EISENHOWER BLVD Fax: (970) 669-4077  
City: LOVELAND State: CO Zip: 80537 Email: ANDY@PETERSONENERGY.COM

Operator Bond Status: ☒ Blanket Surety ID: 2009-0055 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 11/18/2013 Form is being submitted by: Buyer

**Non-Submitting Operator Information:**

OGCC Number of NON-Submitting 10199 Name of NON-Submitting WINDY HILL GAS STORAGE LLC  
NON-submitting Operator is Seller Contact Name JEFFREY MCMAHON Title: MANAGER  
NON-submitting Operator Contact Email: \_\_\_\_\_

**Add/Change Transporter or Gatherer**

☐ Add ☐ Delete Product: ☐ Oil ☐ 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 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: PETERSON,ANDY  
Title: PRESIDENT Email: ANDY@PETERSONENERGY.COM Date: 11/18/2013

**CHANGE OF OPERATOR:**

Name of Buying Operator: PETERSON ENERGY OPERATING INC Name of Selling Operator: WINDY HILL GAS STORAGE LLC  
Signature: \_\_\_\_\_ Date: 11/18/2013 Signature: \_\_\_\_\_ Date: 11/18/2013  
Print Name: PETERSON,ANDY Title: PRESIDENT Print Name: JEFFREY MCMAHON Title: MANAGER

COGCC Approved: Matthew Lee Title: Director of COGCC Date: 01/10/2014

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

OGCC Operator Number: 68710

Name of Operator: PETERSON ENERGY OPERATING 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: 3

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	WELL	087-08137	273101	313961	UWHGS	1-17	NW/17/3N/55W		
2	WELL	087-08145	289190	313965	WINDY HILL	3-17D	SENE/17/3N/55W		
3	WELL	087-08146	289189	313966	WINDY HILL	7-17S	NESW/17/3N/55W		

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			