

**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:

01/29/2013

Document Number:

400373299**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: Heather Mitchell
Company Name: ENCANA OIL & GAS (USA) INC Phone: (720) 876-3070
Address: 370 17TH ST STE 1700 Fax: (720) 876-4070
City: DENVER State: CO Zip: 80202-5632 Email: heather.mitchell@encana.com

Operator Bond Status: ☒ Blanket Surety ID: 2010-0017 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 01/03/2013 Form is being submitted by: Buyer

Non-Submitting Operator Information:

OGCC Number of NON-Submitting 100322 Name of NON-Submitting NOBLE ENERGY INC
NON-submitting Operator is Seller Contact Name Dave Padgett Title: Attorney In fact
NON-submitting Operator Contact Email: dpadgett@nobleenergyinc.com

Add/Change Transporter or Gatherer

☒ Add ☐ Delete Product: ☐ Oil ☒ Gas

OGCC Transporter No: 10146 Suffix: _____
Trans./Gatherer Name: SUMMIT OPERATING LLC
Address: 1245 BRICKYARD RD #210 City: SALT LAKE CITY State: UT Zip: 84106
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: Heather Mitchell
Title: Regulatory Analyst Email: heather.mitchell@encana.com Date: 01/29/2013

CHANGE OF OPERATOR:

Name of Buying Operator: ENCANA OIL & GAS (USA) INC Name of Selling Operator: NOBLE ENERGY INC
Signature: _____ Date: 01/03/2013 Signature: _____ Date: 01/03/2013
Print Name: Heather Mitchell Title: Regulatory Analyst Print Name: Dave Padgett Title: Attorney In fact

COGCC Approved: Matthew Lee Title: Director of COGCC Date: 04/03/2014

State of Colorado
Oil and Gas Conservation Commission

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400373299**CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR**

OGCC Operator Number: 100185

Name of Operator: ENCANA OIL & 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: 2	UIC ENHANCED RECOVERY: 0	WELL: 2

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	077-09058	284462	334356	HYRUP	15-44C	SESE/15/8S/96W		10146
2	PIT	077-	288690		HYRUP	15P	SESE/15/8S/96W		
3	PIT		414314		HYRUP 15P	288690			
4	WELL	077-05155	221356	312373	KENNON	1	SESE/15/8S/96W		10146

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			