

**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:

04/11/2014

Document Number:

400580098**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:	10110	Contact Person:	Laura Harter
Company Name:	GREAT WESTERN OPERATING COMPANY LLC	Phone:	(970) 686-8831
Address:	1801 BROADWAY #500	Fax:	(866) 742-1784
City:	DENVER	State:	CO
Zip:	80202	Email:	lharter@gwogco.com
Operator Bond Status:	<input checked="" type="checkbox"/> Blanket	Surety ID:	2009-0080
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 11/01/2011

Form is being submitted by: _____

Add/Change Transporter or Gatherer

<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Delete	Product:	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Gas
OGCC Transporter No:	31295	Suffix:		
Trans./Gatherer Name:	HOLLYFRONTIER REFINING & MARKETING LLC			
Address:	PO BOX 1600	City:	ARTESIA	State: NM Zip: 88210
Phone:	(303) 883-6512	Email Contact:	Linda.McGill@hollyfrontier.com	
<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Delete	Product:	<input type="checkbox"/> Oil	<input checked="" type="checkbox"/> Gas
OGCC Transporter No:	10465	Suffix:		
Trans./Gatherer Name:	GEMINI MOTOR TRANSPORT LP			
Address:	10601 N PENNSYLVANIA AVENUE	City:	OKLAHOMA CITY	State: OK Zip: 73126
Phone:	(405) 568-6179	Email Contact:	matt.hamilton@loves.com	
<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Delete	Product:	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Gas
OGCC Transporter No:	10505	Suffix:		
Trans./Gatherer Name:	INCORR ENERGY GROUP LLC			
Address:	13275 E FREMONT PLACE SUITE 200	City:	CENTENNIAL	State: CO Zip: 80109
Phone:	(720) 810-8001	Email Contact:	renee.purdy@incorrenergy.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: Harter, Laura

Title: Office Manager

Email: lharter@gwogco.com

Date: 04/11/2014

COGCC Approved: _____

Title: _____

Date: _____

State of Colorado

Oil and Gas Conservation Commission

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CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 10110

Name of Operator: GREAT WESTERN 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: 5

Total Approved: 0 Total out of Total Total Submitted: 5 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: 5 are listed below:

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

Total Pending: 5 Total out of Total Total Submitted: 5 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	WELL	123-26749	296335	310651	PEPPLER	17-12	SWNW/17/6N/63		10465
	WELL		296335	310651					10505
	WELL		296335	310651					31295
2	WELL	123-25817	295832	310057	PEPPLER	17-22	SENW/17/6N/63W		10465
	WELL		295832	310057					10505
	WELL		295832	310057					31295
3	WELL	123-25480	294517	309864	TATMAN	34-13	NWSW/34/7N/64		10465
	WELL		294517	309864					10505
	WELL		294517	309864					31295
4	WELL	123-25478	294515	309862	TATMAN	34-23	NESW/34/7N/64W		10465
	WELL		294515	309862					10505
	WELL		294515	309862					31295
5	WELL	123-25479	294516	309863	TATMAN	34-53	NESW/34/7N/64W		10465
	WELL		294516	309863					10505
	WELL		294516	309863					31295