

**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:****08/14/2014****Document Number:****400663658****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: 10396 Contact Person: Cheryl Rowell
Company Name: SOUTHWESTERN ENERGY PRODUCTION COMPANY Phone: (281) 618-7439
Address: 2350 N SAM HOUSTON PKWY EAST #125 Fax: ()
City: HOUSTON State: TX Zip: 77032 Email: cheryl_rowell@swn.com

Operator Bond Status: ☒ Blanket Surety ID: 2011-0201 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 07/01/2014 Form is being submitted by: Buyer

Non-Submitting Operator Information:

OGCC Number of NON-Submitting 10255 Name of NON-Submitting QUICKSILVER RESOURCES INC
NON-submitting Operator is Seller Contact Name Cindy Keister Title: Director Regulatory Affairs
NON-submitting Operator Contact Email: ckeister@qrinc.com

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: Rowell, Cheryl
Title: Sr. Staff Reg. Analyst Email: cheryl_rowell@swn.com Date: 08/14/2014

CHANGE OF OPERATOR:

Name of Buying Operator: SOUTHWESTERN ENERGY PRODUCTION COMPANY Name of Selling Operator: QUICKSILVER RESOURCES INC
Signature: _____ Date: 07/01/2014 Signature: _____ Date: 07/01/2014
Print Name: Rowell, Cheryl Title: Sr. Staff Reg. Analyst Print Name: Cindy Keister Title: Director Regulatory Affairs

COGCC Approved: Matthew Lee **Title:** Director of COGCC **Date:** 08/28/2014

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CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 10396

Name of Operator: SOUTHWESTERN ENERGY PRODUCTION COMPANY

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: 1	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: 5	UIC ENHANCED RECOVERY: 0	WELL: 0

Total Approved: 6 Total out of Total Total Submitted: 6 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	PIT	081-	260535	313134	WALKER	3-1	SWNE/3/7N/93W		
2	PIT		286608		WALKER 152 FT X	12-5	CNE/12/7N/93W		
3	PIT		427370		WALKER 173 FT X		NENW/12/7N/93W		
4	PIT		427371		WALKER 206 FT X				
5	PIT		427372		WALKER 786 FT X				
6	LOCATION		428570	428570	SIMONES	31-30	LOT 6/30/6N/90W		

Total Deleted: 0 Total out of Total Total Submitted: 6 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: 6 are listed below:

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