

**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:

08/31/2015

Document Number:

2559359**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:	10529	Contact Person:	RUTH GODDARD
Company Name:	TRITON WATER DISPOSAL SERVICES LLC	Phone:	(970) 302-4906
Address:	1530 16TH STREET #300	Fax:	(970) 515-6950
City:	DENVER	State:	CO
Zip:	80202	Email:	RGODDARD@EXPEDITION-WATER.COM
Operator Bond Status:	<input checked="" type="checkbox"/> Blanket	Surety ID:	2014-0086
		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 **05/28/2015** Form is being submitted by: **Buyer****Non-Submitting Operator Information:**

OGCC Number of NON-Submitting 10449 Name of NON-Submitting TRITON ENERGY SERVICES LLC
NON-submitting Operator is Seller Contact Name JEFF DONALDSON Title: AGENT
NON-submitting Operator Contact Email: JEFFDONALDSON42@AOL.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: GODDARD, RUTH
Title: AGENT Email: RGODDARD@EXPEDITION-WATER.COM Date: 08/25/2015

CHANGE OF OPERATOR:

Name of Buying Operator:	Name of Selling Operator:
TRITON WATER DISPOSAL SERVICES LLC	TRITON ENERGY SERVICES LLC
Signature: _____ Date: 05/28/2015	Signature: _____ Date: 05/28/2015
Print Name: GODDARD, RUTH Title: AGENT	Print Name: JEFF DONALDSON Title: AGENT

COGCC Approved:**Title:** Director of COGCC**Date:** 09/01/2015

State of Colorado
Oil and Gas Conservation Commission

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2559359**CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR**OGCC Operator Number: 10529Name of Operator: TRITON WATER DISPOSAL SERVICES 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: 2	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: 0

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	LOCATION	123-	436533	436533	TRITON	1	SWNW/23/4N/66		
2	LOCATION		432476	432476					
3	LAND APPLICATION SITE		436629		Sorin Nat Res Land Application		NWSW/26/6N/65 W		

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			