

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:

02/23/2016

Document Number:

2211657

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:	10395	Contact Person:	CHAD GOODWIN
Company Name:	GOODWIN ENERGY MANAGEMENT LLC	Phone:	(214) 537-6865
Address:	740 S OGDEN STREET	Fax:	()
City:	DENVER	State:	CO
Zip:	80209	Email:	GOODWINENERGYMANAGEMENT@GM AIL.COM

Operator Bond Status: ☒ Blanket Surety ID: 2013-0026 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 **01/01/2016** Form is being submitted by: **Buyer**

Non-Submitting Operator Information:

OGCC Number of NON-Submitting 74878 Name of NON-Submitting ROCKIES OIL & GAS INC

NON-submitting Operator is Seller Contact Name DONALD BARBURY Title: AGENT

NON-submitting Operator Contact Email: DWROGERS@INTEGRITY.COM

Add/Change Transporter or Gatherer

☒ Add ☐ Delete Product: ☐ Oil ☒ Gas

OGCC Transporter No: 47121 Suffix: _____

Trans./Gatherer Name: KERR MCGEE GATHERING LLC

Address: PO BOX 173779 City: DENVER State: CO Zip: 80217

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: GOODWIN,CHAD

Title: COO Email: GOODWINENERGYMANAGEMENT@G Date: 02/10/2016
MAIL.COM

CHANGE OF OPERATOR:

Name of Buying Operator:		Name of Selling Operator:	
GOODWIN ENERGY MANAGEMENT LLC		ROCKIES OIL & GAS INC	
Signature: _____	Date: <u>01/01/2016</u>	Signature: _____	Date: <u>01/01/2016</u>
Print Name: GOODWIN,CHAD	Title: COO	Print Name: DONALD BARBURY	Title: AGENT

COGCC Approved: Matthew Lee Title: Director of COGCC Date: 03/07/2016

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2211657**CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR**

OGCC Operator Number: 10395

Name of Operator: GOODWIN ENERGY MANAGEMENT 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: 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	001-09069	203509	320344	MOORE	1	NENW/9/2S/64W		47121
2	WELL	001-09076	203516	320348	MOORE	2	SENW/9/2S/64W		47121
3	WELL	001-09066	203506	320342	SATTERFIELD	1	SWNW/27/1S/64		47121

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			