

**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:

04/05/2016

Document Number:

401022194**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:	10618	Contact Person:	Abigail Wenk
Company Name:	BISON OIL & GAS LLC	Phone:	(720) 6446997
Address:	999 18TH STREET #3370	Fax:	(303) 9741767
City:	DENVER	Email:	awenk@bisonog.com
State:	CO		
Zip:	80202		
Operator Bond Status:	<input checked="" type="checkbox"/> Blanket	Surety ID:	2016-0032
		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 **04/01/2016** Form is being submitted by: **Buyer****Non-Submitting Operator Information:**

OGCC Number of NON-Submitting 74165 Name of NON-Submitting RENEGADE OIL & GAS COMPANY LLC
NON-submitting Operator is Seller Contact Name Ed Ingve Title: Manager
NON-submitting Operator Contact Email: ed@renegadeoilandgas.com

Add/Change Transporter or Gatherer

☒ Add ☐ Delete Product: ☒ Oil ☐ Gas

OGCC Transporter No: 33940 Suffix: _____
Trans./Gatherer Name: SHELL TRADING (US) COMPANY
Address: 1700 BROADWAY STE 1400 City: DENVER State: CO Zip: 80290
Phone: (303) 3187548 Email Contact: kent.mcalister@shell.com

☒ 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: (720) 9296000 Email Contact: aakers@bisonog.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: Austin Akers
Title: CEO Email: aakers@bisonog.com Date: 04/05/2016

CHANGE OF OPERATOR:

Name of Buying Operator:

BISON OIL & GAS LLC

Name of Selling Operator:

RENEGADE OIL & GAS COMPANY LLC

Signature: _____

Date: 04/01/2016

Signature: _____

Date: 04/01/2016

Print Name: Austin Akers

Title: CEO

Print Name: Ed Ingve

Title: Manager

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: 10618

Name of Operator: BISON OIL & GAS 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	005-06858	204773	320745	COLUMBINE-STATE	1	SESE/16/4S/64W		33940
	WELL		204773	320745					47121
2	WELL	005-06870	204785	320750	COLUMBINE-STATE	2	SENE/16/4S/64W		33940
	WELL		204785	320750					47121
3	WELL	005-06488	204403	320673	CAVANAUGH	1-X	SENE/21/4S/64W		33940
	WELL		204403	320673					47121
4	WELL	005-06523	204438	320678	Cavanaugh	3	SESW/15/4S/64W		33940
	WELL		204438	320678					47121
5	WELL	005-06834	204749	320743	CARRAWAY-	1	NWSE/21/4S/64W		33940
	WELL		204749	320743					47121