

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:

Document Number:

401120753

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

OGCC Operator Number: 47120 Contact Person: CHERYL LIGHT
Company Name: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6461
Address: P O BOX 173779 Fax: (720) 929-7461
City: DENVER State: CO Zip: 80217-3779 Email: CHERYL.LIGHT@ANADARKO.COM

Operator Bond Status: [X] Blanket Surety ID: 2001-0124 Individual Surety ID: see listing by individual well

[] New Well Cert of Clearance [X] Change of Operator [] Add/Change Transporter or Gatherer

Effective Date of Change Below 09/30/2016 Form is being submitted by: Seller

Non-Submitting Operator Information:

OGCC Number of NON-Submitting 10548 Name of NON-Submitting HRM RESOURCES II LLC
NON-submitting Operator is Buyer Contact Name L ROGER HUTSON Title: PRESIDENT
NON-submitting Operator Contact Email: LRHUTSON@hrmres.com

Add/Change Transporter or Gatherer

[X] Add [] Delete Product: [] Oil [X] 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:

[X] Add [] Delete Product: [X] Oil [] Gas
OGCC Transporter No: 10030 Suffix:
Trans./Gatherer Name: TRIMAC TRANSPORTATION CENTRAL INC
Address: P O BOX 3000 City: RAPDI CITY State: SD Zip: 57702
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: [Signature] Print Name: PATRICK G MCGRAW
Title: LAND MANAGER Email: patrick.mcgraw@anadarko.com Date:

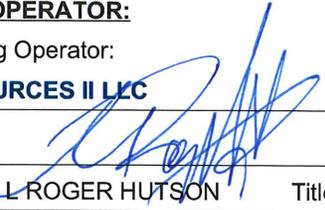
CHANGE OF OPERATOR:

Name of Buying Operator:

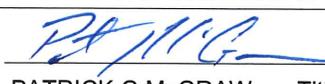
Name of Selling Operator:

HRM RESOURCES II LLC

KERR MCGEE OIL & GAS ONSHORE LP

Signature: 

Date: 09/30/2016

Signature: 

Date: 09/30/2016

Print Name: L ROGER HUTSON

Title: PRESIDENT

Print Name: PATRICK G MCGRAW

Title: LAND 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: 47120

Name of Operator: KERR MCGEE OIL & GAS ONSHORE LP

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: 10

Total Approved: 0 Total out of Total Total Submitted: 10 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: 10 are listed below:

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

Total Pending: 10 Total out of Total Total Submitted: 10 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	WELL	001-09301	203741	320428	HSR-VAN SCHAACK	10-10	NWSE/10/2S/66W		10030
	WELL		203741	320428					47121
2	WELL	001-09237	203677	320407	HSR-TR RANCH	16-3	SESE/3/2S/66W		10030
	WELL		203677	320407					47121
3	WELL	001-09304	203744	320431	HSR-VAN SCHAACK	8-11	SENE/11/2S/66W		10030
	WELL		203744	320431					47121
4	WELL	001-09284	203724	320423	HSR-VAN SCHAACK	2-11	NWNE/11/2S/66W		10030
	WELL		203724	320423					47121
5	WELL	001-09312	203752	320435	HSR-VAN SCHAACK	12-11	NWSW/11/2S/66		10030
	WELL		203752	320435					47121
6	WELL	001-09307	203747	320433	HSR-TR RANCH	10-3	NWSE/3/2S/66W		10030
	WELL		203747	320433					47121
7	WELL	001-09314	203754	320437	HSR-LUNNON	2-3	NWNE/3/2S/66W		10030
	WELL		203754	320437					47121
8	WELL	001-09189	203629	320391	HSR LAWSON	8-3	SENE/3/2S/66W		10030
	WELL		203629	320391					47121
9	WELL	001-09313	203753	320436	HSR-CUNNINGHAM	7-10	SWNE/10/2S/66W		10030
	WELL		203753	320436					47121
10	WELL	001-09254	203694	320411	HSR ACKARD	5-2	SWNW/2/2S/66W		10030
	WELL		203694	320411					47121