

FORM
10Rev
03/18State 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:

401674610

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:	10110	Contact Person:	Miracle Pfister
Company Name:	GREAT WESTERN OPERATING COMPANY LLC	Phone:	(720) 595-2250
Address:	1801 BROADWAY #500	Fax:	()
City:	DENVER	State:	CO
Zip:	80202	Email:	mpfister@gwogco.com
Operator Financial Assurance:	<input checked="" type="checkbox"/> Blanket	Surety ID:	2013-0028
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 6-18-2018 Form is being submitted by: Seller
Is the Buying Operator a Tier One member of the Utility Notification Center of Colorado (UNCC) that participates in Colorado's One Call notification system? Yes ☒ No ☐

Non-Submitting Operator Information:

OGCC Number of NON-Submitting 10459 Name of NON-Submitting EXTRACTION OIL & GAS INC
NON-submitting Operator is Buyer Contact Name Matt Owens Title President
NON-submitting Operator Contact Email: mowens@extractionog.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: Pfister, Miracle
Title: Regulatory Manager Email: mpfister@gwogco.com Date: _____

CHANGE OF OPERATOR:

Name of Buying Operator:	Name of Selling Operator:
<u>EXTRACTION OIL & GAS INC</u>	<u>GREAT WESTERN OPERATING COMPANY LLC</u>
Signature: <u>[Signature]</u> Date: <u>6-18-18</u>	Signature: <u>[Signature]</u> Date: <u>6-18-18</u>
Print Name: <u>Matt Owens</u> Title: <u>President</u>	Print Name: <u>Pfister, Miracle</u> Title: <u>Regulatory Manager</u>

COGCC Approved: _____

Title: _____

Date: _____

FORM
10

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

401674610

CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 10110

Name of Operator: GREAT WESTERN OPERATING COMPANY LLC

FOR OGCC USE ONLY

CENTRALIZED EP WASTE MGMT FAC: 0 SERVICE SITE: 0 LOCATION: 1 OFF-LOCATION FLOWLINE: 0
UIC WATER TRANSFER STATION: 0 TANK BATTERY: 0 PIPELINE: 0 DOMESTIC TAP: 0
UIC SIMULTANEOUS DISPOSAL: 0 UIC DISPOSAL: 0 WELL: 7 CRUDE OIL TRANSFER LINE: 0
UIC ENHANCED RECOVERY: 0 LAND APPLICATION SITE: 0 PIT: 0 PRODUCE WATER TRANSFER SYSTEM: 0

Total Approved: 0 Total out of Total Total Submitted: 8 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: 8 are listed below:

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

Total Pending: 8 Total out of Total Total Submitted: 8 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	LOCATION	001-	437211	437211	Rock Family LE Pad	13-021HN	SENW/24/1S/66W		
2	WELL	001-09806	437205	437211	Rock Family LE	13-3HC	SENW/24/1S/66W		
3	WELL	001-09807	437206	437211	Rock Family LE	13-4HC	SENW/24/1S/66W		
4	WELL	001-09808	437207	437211	Rock Family LE	13-29HN	SENW/24/1S/66W		
5	WELL	001-09809	437208	437211	Rock Family LE	13-021HN	SENW/24/1S/66W		
6	WELL	001-09810	437209	437211	Rock Family LE	13-3HN	SENW/24/1S/66W		
7	WELL	001-09811	437212	437211	Rock Family LE	13-28HN-1	SENW/24/1S/66W		
8	WELL	001-09812	437213	437211	Rock Family LE	13-4HN	SENW/24/1S/66W		