

FORM
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02/20

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:

03/05/2020

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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.https://cogcc.state.co.us](https://cogcc.state.co.us)

OGCC Operator Number: 19160Contact Person: Coby LazarineCompany Name: CONOCO PHILLIPS COMPANYPhone: (281) 206-5324Address: 925 N ELDRIDGE PARKWAYFax: ()City: HOUSTON State: TX Zip: 77079Email: coby.l.lazarine@conocophillips.comOperator Financial Assurance: ☒ BlanketSurety ID: 2016-0097Individual Surety ID: see listing by individual well☐ New Well Cert of Clearance☒ Change of Operator☐ Add/Change Transporter or GathererEffective Date of Change Below 03/03/2020Form is being submitted by: Seller

One Call Participation (One box must be checked.)

☒ The Buying Operator is a Tier One membership in the Utility Notification Center of Colorado (CO 811) and participates in Colorado's One Call notification system. [Rule 1102.n.]☐ The Buying Operator has no underground facilities and is exempt from CO 811 membership. [Rule 1102.n.(2)]**Non-Submitting Operator Information:**OGCC Number of NON-Submitting 10633Name of NON-Submitting CRESTONE PEAK RESOURCES OPERATING LLCNON-submitting Operator is BuyerContact Name David StewartTitle: VP EHS&RNON-submitting Operator Contact Email: david.stewart@crestonepr.com**Add/Change Transporter or Gatherer**☒ Add☐ DeleteProduct: ☒ Oil☐ GasOGCC Transporter No: 10674Suffix: Trans./Gatherer Name: SPLINTER A TRUCKING INCAddress: 8484 EVERETT WAY UNIT DCity: ARVADAState: COZip: 80005Phone: (303) 796-2705Email Contact: bwilky@suncor.comRemark:

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: Smith, LarryTitle: Sr. Reg CoordinatorEmail: larry.r.smith@conocophillips.comDate: 03/05/2020

CHANGE OF OPERATOR:			
Name of Buying Operator:		Name of Selling Operator:	
<u>CRESTONE PEAK RESOURCES OPERATING LLC</u>		<u>CONOCO PHILLIPS COMPANY</u>	
Signature: _____	Date: <u>03/03/2020</u>	Signature: _____	Date: <u>03/03/2020</u>
Print Name: <u>David Stewart</u>	Title: <u>VP EHS&R</u>	Print Name: <u>Smith,Larry</u>	Title: <u>Sr. Reg Coordinator</u>

COGCC Approved: _____ **Title:** _____ **Date:** _____

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CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 19160

Name of Operator: CONOCO PHILLIPS COMPANY

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: 6	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: 7 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: 7 are listed below:

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

Total Pending: 7 Total out of Total Total Submitted: 7 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	LOCATION	005-	465461	465461	STATE MASSIVE	5-65 2-3	SENE/2/5S/65W		
2	WELL	005-07448	465460	465461	STATE MASSIVE 5-65	1DH	SENE/2/5S/65W		10674
3	WELL	005-07449	465462	465461	STATE MASSIVE 5-65	2DH	SENE/2/5S/65W		10674
4	WELL	005-07450	465463	465461	STATE MASSIVE 5-65	2BH	SENE/2/5S/65W		10674
5	WELL	005-07451	465464	465461	STATE MASSIVE 5-65	2CH	SENE/2/5S/65W		10674
6	WELL	005-07452	465465	465461	STATE MASSIVE 5-65	2AH	SENE/2/5S/65W		10674
7	WELL	005-07453	465466	465461	STATE MASSIVE 5-65	1CH	SENE/2/5S/65W		10674