

Ratification
Doc# 1310052

FORM
10
Rev
03/18

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:
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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.http://ogcc.state.co.us](http://ogcc.state.co.us)

OGCC Operator Number: 26580 Contact Person: Larry Smith
Company Name: BURLINGTON RESOURCES OIL & GAS LP Phone: (832) 486-2590
Address: 925 N ELDRIDGE PARKWAY Fax: ()
City: HOUSTON State: TX Zip: 77079 Email: larry.r.smith@conocophillips.com

Operator Financial Assurance: Blanket Surety ID: 2016-0097 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 _____ 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 10633 Name of NON-Submitting CRESTONE PEAK RESOURCES OPERATING LLC
NON-submitting Operator is Buyer Contact Name David Stewart Title: VP EHS&R
NON-submitting Operator Contact Email: David.Stewart@Crestonepr.com

Add/Change Transporter or Gatherer

Add Delete Product: Oil Gas
OGCC Transporter No: 10674 Suffix: _____
Trans./Gatherer Name: SPLINTER A TRUCKING INC
Address: 8484 EVERETT WAY UNIT D City: ARVADA State: CO Zip: 80005
Phone: (303) 796-2705 Email Contact: bwilky@suncor.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: [Signature] Print Name: Larry Smith
Title: Sr. Reg Coordinator Email: larry.r.smith@conocophillips.com Date: 7/21/20

CHANGE OF OPERATOR:
Name of Buying Operator: CRESTONE PEAK RESOURCES OPERATING LLC Name of Selling Operator: BURLINGTON RESOURCES OIL & GAS LP
Signature: [Signature] Date: 7/21/20 Signature: [Signature] Date: 7/21/20
Print Name: David Stewart Title: VP EHS&R Print Name: Larry Smith Title: Sr. Reg Coordinator

COGCC Approved: _____

Title: _____

Date: _____