

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



## CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR

Form 10 is used for Certification of Clearance to transport product off lease. A Form 10 shall be filed within 16 days of a change or transfer of ownership of a well, location or facility. A Form 10 Certification of Clearance shall be filed within 30 days of initial sales or change of transporter gatherer. It is the Operator's responsibility to provide approved copies to the Transporter and/or Gatherer for each well listed. For more information visit [www.ogcc.state.co.us](http://www.ogcc.state.co.us).

FOR OGCC USE ONLY

1. OGCC Operator Number: 78110  
 2. Name of Operator: SWEPI LP  
 3. Address: 4582 S Ulster St Pkwy #1400  
 City: Denver State: CO Zip: 80237  
 4. Contact Name: Anne Baldrige  
 Phone: (303) 305-7555  
 Fax: \_\_\_\_\_  
 Email: a.baldrige@shell.com

Operator Bond Status ☐ Blanket ☐ Individual

Surety ID# \_\_\_\_\_

☐ New Well Certification of Clearance☒ Change of Operator ☐ Add/Change Transporter or Gatherer Effective Date of Change: \_\_\_\_\_

## Transporter or Gatherer Information

☐ Add ☐ Delete Product: ☐ Oil ☐ Gas  
 OGCC Transporter No: \_\_\_\_\_ Transporter/Gatherer Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Area Code and Phone Number: \_\_\_\_\_ Email Contact: \_\_\_\_\_

☐ Add ☐ Delete Product: ☐ Oil ☐ Gas  
 OGCC Transporter No: \_\_\_\_\_ Transporter/Gatherer Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Area Code and Phone Number: \_\_\_\_\_ Email Contact: \_\_\_\_\_

☐ Add ☐ Delete Product: ☐ Oil ☐ Gas  
 OGCC Transporter No: \_\_\_\_\_ Transporter/Gatherer Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Area Code and Phone Number: \_\_\_\_\_ Email Contact: \_\_\_\_\_

☐ Add ☐ Delete Product: ☐ Oil ☐ Gas  
 OGCC Transporter No: \_\_\_\_\_ Transporter/Gatherer Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Area Code and Phone Number: \_\_\_\_\_ Email Contact: \_\_\_\_\_

Remarks: \_\_\_\_\_

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 all 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: Anne Baldrige  
 Title: Regulatory and Env. Asset Lead - SWAN

Print Name: Anne BaldrigeEmail: a.baldrige@shell.com

Date: \_\_\_\_\_

## CHANGE OF OPERATOR:

Name of Buying Operator:

SWEPI LP

Signature: Richard W. LewisDate: 4-15-2013

Print Name/Title:

Richard W. Lewis, Attorney In Fact

Email: richard.w.lewis@shell.com

Name of Selling Operator:

Quicksilver Resources, Inc.

Signature: Cindy KeisterDate: 4-17-2013

Print Name/Title:

Cindy Keister, Dir of Regulatory Affairs

Email: ckeister@qrrc.com

OGCC Approved: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

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OGCC Operator Number: 78110

NEW WELL CERTIFICATION OF CLEARANCE FOR TRANSPORTER and/or GATHERER

#	API#:	Date of First Production:	Date of First Sales: Oil Gas	Well Name:	Well No.	Location(QQ,STR)
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						

CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

#	TYPE	OGCC Identifying Number: API#, Facility ID, Location ID	Well or Facility Name:	No.	Location(QQ,STR)
1	Well	05 107 06246 00	Camilletti	21-10	SENW, Sec 10, T6N, R86W
2	Location	426839	Camilletti	21-10	SENW, Sec 10, T6N, R86W
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					