

FORM
10Rev
10/12State 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:

01/24/2014

Document Number:

400537498

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: 47120 Contact Person: Michael Sollee
Company Name: KERR-MCGEE OIL & GAS ONSHORE LP Phone: (720) 929-6057
Address: P O BOX 173779 Fax: (720) 929-7057
City: DENVER State: CO Zip: 80217-3779 Email: michael.sollee@anadarko.com

Operator Bond Status: ☒ Blanket Surety ID: 2001-0023 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 01/13/2014 Form is being submitted by: Seller

Non-Submitting Operator Information:

OGCC Number of NON-Submitting 46290 Name of NON-Submitting K P KAUFFMAN COMPANY INC
NON-submitting Operator is Buyer Contact Name RICHARD STULTS Title: CFO
NON-submitting Operator Contact Email: KGILBERT@KPK.COM

Add/Change Transporter or Gatherer

☒ Add ☐ Delete Product: ☐ Oil ☒ Gas

OGCC Transporter No: 47120 Suffix: _____
Trans./Gatherer Name: KERR-MCGEE OIL & GAS ONSHORE LP
Address: P O BOX 173779 City: DENVER State: CO Zip: 80217-3779
Phone: () Email Contact: _____

☒ Add ☐ Delete Product: ☐ Oil ☒ Gas

OGCC Transporter No: 46290 Suffix: _____
Trans./Gatherer Name: K P KAUFFMAN COMPANY INC
Address: 1675 BROADWAY, STE 2800 City: DENVER State: CO Zip: 80202
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: Sollee, Michael
Title: Regulatory Supervisor Email: michael.sollee@anadarko.com Date: 01/24/2014

CHANGE OF OPERATOR:

Name of Buying Operator:

K P KAUFFMAN COMPANY INC

Name of Selling Operator:

KERR-MCGEE OIL & GAS ONSHORE LP


Signature: _____ Date: 01/13/2014

Signature: _____ Date: 01/13/2014

Print Name: RICHARD STULTS Title: CFO

Print Name: Sollee,Michael Title: Regulatory
Supervisor

COGCC Approved:



Title:

Director of COGCC

Date:

01/24/2014

State of Colorado
Oil and Gas Conservation Commission

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400537498**CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR**OGCC Operator Number: 47120Name 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: 2

Total Approved: 2 Total out of Total Total Submitted: 2 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	WELL	123-09580	241791	318645	JACK C. NOEL UNIT	2	NENE/18/4N/65W		46290
	WELL		241791	318645					47120
2	WELL	123-08867	241079	318304	JACK C. NOEL UNIT	1	NENW/18/4N/65W		46290
	WELL		241079	318304					47120

Total Deleted: 0 Total out of Total Total Submitted: 2 are listed below:

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

Total Pending: 0 Total out of Total Total Submitted: 2 are listed below:

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