

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



OGCC RECEPTION

Receive Date:

01/16/2014

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400540811

**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:	<u>10000</u>	Contact Person:	<u>Patti Campbell</u>
Company Name:	<u>BP AMERICA PRODUCTION COMPANY</u>	Phone:	<u>(970) 335-3828</u>
Address:	<u>501 WESTLAKE PARK BLVD</u>	Fax:	<u>(970) 375-7529</u>
City:	<u>HOUSTON</u>	State:	<u>TX</u>
Zip:	<u>77079</u>	Email:	<u>patricia.campbell@bp.com</u>

Operator Bond Status:	<input type="checkbox"/> Blanket	Surety ID:	_____	Individual Surety ID:	<u>see listing by individual well</u>
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☐ **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: \_\_\_\_\_

**Add/Change Transporter or Gatherer**

<input checked="" type="checkbox"/> <b>Add</b>	<input type="checkbox"/> <b>Delete</b>	Product:	<input type="checkbox"/> <b>Oil</b>	<input checked="" type="checkbox"/> <b>Gas</b>
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OGCC Transporter No:	<u>10000</u>	Suffix:	_____
Trans./Gatherer Name:	<u>BP AMERICA PRODUCTION COMPANY</u>		
Address:	<u>501 WESTLAKE PARK BLVD</u>	City:	<u>HOUSTON</u>
		State:	<u>TX</u>
		Zip:	<u>77079</u>
Phone:	<u>(970) 335-3828</u>		
Email Contact:	<u>patricia.campbell@bp.com</u>		

Remark: The Mesaverde formation of this well is producing and was moved from Red Cedar to BP America Production Company as both gather and transporter.

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:	<u>Campbell,Patti</u>
Title:	<u>Regulatory Analyst</u>	Email:	<u>patricia.campbell@bp.com</u>
		Date:	<u>01/16/2014</u>

**COGCC Approved:** \_\_\_\_\_ **Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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## CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 10000

Name of Operator: BP AMERICA PRODUCTION COMPANY

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: 0

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

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