

**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:

02/19/2014

Document Number:

400554909**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:	200192	Contact Person:	Jeff Reale
Company Name:	MISTY MOUNTAIN OPERATING LLC	Phone:	(970) 663-1448
Address:	5441 BOEING DR #100	Fax:	(970) 667-0046
City:	LOVELAND	Email:	jeff@mistymountainop.com
State:	CO	Zip:	80538
Operator Bond Status:	<input checked="" type="checkbox"/> Blanket	Surety ID:	2014-0018
Individual Surety ID:	see listing by individual well		

☐ New Well Cert of Clearance ☒ Change of Operator ☐ Add/Change Transporter or GathererEffective Date of Change Below **02/13/2014** Form is being submitted by: **Buyer****Non-Submitting Operator Information:**

OGCC Number of NON-Submitting	76840	Name of NON-Submitting	SCHNEIDER ENERGY SERVICES INC
NON-submitting Operator is	Seller	Contact Name	Jeff Schneider
		Title:	President
NON-submitting Operator Contact Email:	JeffS@schneiderenergy.com		

Add/Change Transporter or Gatherer☒ Add ☐ Delete **Product:** ☒ Oil ☐ Gas

OGCC Transporter No:	10266	Suffix:	
Trans./Gatherer Name:	ANDERSON CRUDE TRANSPORATION INC		
Address:	PO BOX 691	City:	KIMBALL
		State:	NE
		Zip:	69145
Phone: ()	Email Contact:		

☒ Add ☐ Delete **Product:** ☐ Oil ☒ Gas

OGCC Transporter No:	4680	Suffix:	
Trans./Gatherer Name:	DCP MIDSTREAM LP		
Address:	370 17TH STREET - SUITE 2500	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:	Reale,Jeff
Title: Manager	Email:	jeff@mistymountainop.com
	Date:	02/19/2014

CHANGE OF OPERATOR:

Name of Buying Operator:

Name of Selling Operator:

MISTY MOUNTAIN OPERATING LLC

SCHNEIDER ENERGY SERVICES INC

Signature: _____ Date: 02/13/2014

Signature: _____ Date: 02/13/2014

Print Name: Reale,Jeff Title: Manager

Print Name: Jeff Schneider Title: President

COGCC Approved: _____

Title: _____

Date: _____

State of Colorado

Oil and Gas Conservation Commission

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CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 200192

Name of Operator: MISTY MOUNTAIN OPERATING LLC

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: 2	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: 3

Total Approved: 0 Total out of Total Total Submitted: 5 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: 5 are listed below:

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

Total Pending: 5 Total out of Total Total Submitted: 5 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	WELL	123-38403	434983	434982	Goza	18-44	NESE/18/6N/65W		4680
	WELL		434983	434982					10266
2	WELL	123-38402	434981	434982	Goza	1-Ae	NESE/18/6N/65W		4680
	WELL		434981	434982					10266
3	WELL	123-38401	434980	434982	Goza	2-Ae	NESE/18/6N/65W		4680
	WELL		434980	434982					10266
4	LOCATION	123-	434982	434982	Goza	1-Ae,2-	NESE/18/6N/65W		
5	LOCATION		434984	434984	Goza Battery		SESE/18/6N/65W		