

**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:

01/06/2014

Document Number:

400535230**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: 100185 Contact Person: Amy Henline
Company Name: ENCANA OIL & GAS (USA) INC Phone: (720) 876-3364
Address: 370 17TH ST STE 1700 Fax: ()
City: DENVER State: CO Zip: 80202-5632 Email: amy.henline@encana.com

Operator Bond Status: ☒ Blanket Surety ID: 2012-0118 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 10/01/2013 Form is being submitted by: Seller

Non-Submitting Operator Information:

OGCC Number of NON-Submitting 10442 Name of NON-Submitting HUNTER RIDGE ENERGY SERVICES LLC
NON-submitting Operator is Buyer Contact Name Amy Henline Title: Permitting Analyst
NON-submitting Operator Contact Email: amy.henline@encana.com

Add/Change Transporter or Gatherer

☒ Add ☐ Delete Product: ☒ Oil ☐ Gas

OGCC Transporter No: 10442 Suffix: _____
Trans./Gatherer Name: HUNTER RIDGE ENERGY SERVICES LLC
Address: 370 17TH STREET #1700 City: DENVER State: CO Zip: 80202
Phone: (720) 876-3364 Email Contact: amy.henline@encana.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: _____ Print Name: Henline,Amy
Title: Permitting Analyst Email: amy.henline@encana.com Date: 01/06/2014

CHANGE OF OPERATOR:

Name of Buying Operator: HUNTER RIDGE ENERGY SERVICES LLC Name of Selling Operator: ENCANA OIL & GAS (USA) INC
Signature: _____ Date: 10/01/2013 Signature: _____ Date: 10/01/2013
Print Name: Amy Henline Title: Permitting Analyst Print Name: Henline,Amy Title: Permitting Analyst

COGCC Approved: _____

Title: Director of COGCCDate: 02/24/2014

State of Colorado
Oil and Gas Conservation Commission

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CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 100185

Name of Operator: ENCANA OIL & GAS (USA) INC

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: 2	WATER GATHERING SYSTEM LINE: 0
GAS PROCESSING PLANT: 0	PIT: 0	UIC ENHANCED RECOVERY: 0	WELL: 2

Total Approved: 4 Total out of Total Total Submitted: 4 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	UIC DISPOSAL	045-	159300		SGU CP01B-27 M23		SWSW/23/4S/96W		
2	UIC DISPOSAL		159389		STORY GULCH UNIT		SENW/26/4S/96W		
3	WELL	045-15495	406	335680	SGU	CP01B-27	SWSW/23/4S/96W		10442
4	WELL	045-11293	280586	335669	SGU	8506B F26	SENW/26/4S/96W		10442

Total Deleted: 0 Total out of Total Total Submitted: 4 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: 4 are listed below:

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