

**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:

05/22/2014

Document Number:

400613372**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: 10510 Contact Person: Dawn Meek
Company Name: TFI OPERATING COMPANY INC Phone: (303) 404-2159
Address: 555 ELDORADO BLVD #100 Fax: (720) 887-8220
City: BROOMFIELD State: CO Zip: 80021 Email: dawn@threeforksinc.com

Operator Bond Status: ☒ Blanket Surety ID: 2014-0042 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 04/03/2014 Form is being submitted by: Buyer

Non-Submitting Operator Information:

OGCC Number of NON-Submitting 10466 Name of NON-Submitting VANGUARD PERMIAN LLC
NON-submitting Operator is Seller Contact Name Chris Raper Title: Land Manager
NON-submitting Operator Contact Email: craper@vnrlc.com

Add/Change Transporter or Gatherer

☐ Add ☐ Delete Product: ☐ Oil ☐ Gas

OGCC Transporter No: _____ Suffix: _____
Trans./Gatherer Name: _____
Address: _____ City: _____ State: _____ Zip: _____
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: Dawn G. Meek
Title: Sr. Accountant Email: dawn@threeforksinc.com Date: 05/22/2014

CHANGE OF OPERATOR:

Name of Buying Operator: TFI OPERATING COMPANY INC Name of Selling Operator: VANGUARD PERMIAN LLC
Signature: _____ Date: 04/03/2014 Signature: _____ Date: 04/03/2014
Print Name: Dawn G. Meek Title: Sr. Accountant Print Name: Chris Raper Title: Land Manager

COGCC Approved: Matthew Lee Title: Director of COGCC Date: 06/24/2014

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CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 10510

Name of Operator: TFI OPERATING COMPANY 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: 0	WATER GATHERING SYSTEM LINE: 0
GAS PROCESSING PLANT: 0	PIT: 0	UIC ENHANCED RECOVERY: 0	WELL: 6

Total Approved: 6 Total out of Total Total Submitted: 6 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	WELL	123-37526	433190	432879	McCoy	2-4-33	NW/NW/33/4N/68		
2	WELL	123-37354	432913	432879	McCoy	2-2-33	NW/NW/33/4N/68		
3	WELL	123-37342	432892	432879	McCoy	22-33	NW/NW/33/4N/68		
4	WELL	123-37349	432904	432879	McCoy	11-33	NW/NW/33/4N/68		
5	WELL	123-37355	432917	432879	McCoy	21-33	NW/NW/33/4N/68		
6	WELL	123-37351	432906	432879	McCoy	12-33	NW/NW/33/4N/68		

Total Deleted: 0 Total out of Total Total Submitted: 6 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: 6 are listed below:

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