



Receive Date: 09/29/2014

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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

OGCC Operator Number: 10407 Contact Person: CLAY EVANS
Company Name: ANTLER ENERGY LLC Phone: (307) 380-7616
Address: PO BOX 104 Fax: (307) 383-7067
City: BAGGS State: WY Zip: 82321 Email: ANTLERENERGY@YAHOO.COM

Operator Bond Status: [X] Blanket Surety ID: 2014-0108 Individual Surety ID: see listing by individual well

[] New Well Cert of Clearance [X] Change of Operator [] Add/Change Transporter or Gatherer

Effective Date of Change Below 08/01/2014 Form is being submitted by: Buyer

Non-Submitting Operator Information:

OGCC Number of NON-Submitting 18950 Name of NON-Submitting COMBINED RESOURCES CORP
NON-submitting Operator is Seller Contact Name LES EVANS Title: VP/OPS
NON-submitting Operator Contact Email: LES@ENERGYGROUPOK.COM

Add/Change Transporter or Gatherer

[X] Add [] Delete Product: [] Oil [X] Gas
OGCC Transporter No: 60788 Suffix:
Trans./Gatherer Name: QUESTAR PIPELINE COMPANY
Address: PO BOX 45433 City: SALT LAKE CITY State: UT Zip: 84145
Phone: () Email Contact:

[X] Add [] Delete Product: [X] Oil [] Gas
OGCC Transporter No: 70505 Suffix:
Trans./Gatherer Name: PLAINS MARKETING LP
Address: 333 CLAY ST #1600 City: HOUSTON State: TX Zip: 77002
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: EVANS,CLAY
Title: MANAGER Email: ANTLERENERGY@YAHOO.COM Date: 09/17/2014

CHANGE OF OPERATOR:

Name of Buying Operator:

Name of Selling Operator:

ANTLER ENERGY LLC

COMBINED RESOURCES CORP

Signature: _____ Date: 08/01/2014

Signature: _____ Date: 08/01/2014

Print Name: EVANS,CLAY Title: MANAGER

Print Name: LES EVANS Title: VP/OPS

COGCC Approved:



Title: Director of COGCC

Date: 11/20/2014

**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 10407
Name of Operator: ANTLER ENERGY 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: 1	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: 1

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	LOCATION	081-	312868	312868	BAGGS LAND &	15NENE	NENE/15/12N/92		
2	WELL	081-06029	222669	312868	BAGGS LAND &	1	NENE/15/12N/92		60788
	WELL		222669	312868					70505

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			