

State of Colorado
Oil and Gas Conservation Commission

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



DE	
FOR OGCC USE ONLY	

CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR

Form 10 is used for Certification of Clearance to transport product off lease. A Form 10 shall be filed within 15 days of a change or transfer of ownership of a well, location or facility. A Form 10 Certification of Clearance shall be filed within 30 days of initial sales or change of transporter gatherer. It is the Operator's responsibility to provide approved copies to the Transporter and/or Gatherer for each well listed. For more information visit www.cogcc.state.co.us.

1. OGCC Operator Number: <u>10311</u>	4. Contact Name: <u>Erin Ekblad</u>
2. Name of Operator: <u>Synergy Resources Corporation</u>	Phone: <u>720.616.4319</u>
3. Address: <u>20203 Highway 60</u>	Fax: <u>720.616.4301</u>
City: <u>Platteville</u> State: <u>CO</u> Zip: <u>80651</u>	Email: <u>eekblad@syrginfo.com</u>

Operator Bond Status ☒ Blanket ☐ Individual Surety ID# 2009-0043

☐ New Well Certification of Clearance
☒ Change of Operator ☒ Add/Change Transporter or Gatherer Effective Date of Change: 10.09.2015

Transporter or Gatherer Information

<input checked="" type="checkbox"/> Add <input type="checkbox"/> Delete	Product: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas
OGCC Transporter No: <u>10459</u>	Transporter/Gatherer Name: <u>SUNCOR ENERGY (USA) INC</u>
Address: <u>717 17TH STREET #2900</u>	City: <u>Denver</u> State: <u>CO</u> Zip: <u>80202</u>
Area Code and Phone Number: <u>303-227-6142</u>	Email Contact: <u>galaxander@suncor.com</u>

<input checked="" type="checkbox"/> Add <input type="checkbox"/> Delete	Product: <input type="checkbox"/> Oil <input type="checkbox"/> Gas
OGCC Transporter No: <u>4680</u>	Transporter/Gatherer Name: <u>DCP MIDSTREAM LP</u>
Address: <u>370 17TH STREET #2500</u>	City: <u>Denver</u> State: <u>CO</u> Zip: <u>80202</u>
Area Code and Phone Number: <u>303-605-2166</u>	Email Contact: <u>kerice@dcpmidstream.com</u>

<input type="checkbox"/> Add <input type="checkbox"/> Delete	Product: <input type="checkbox"/> Oil <input type="checkbox"/> Gas
OGCC Transporter No: _____	Transporter/Gatherer Name: _____
Address: _____	City: _____ State: _____ Zip: _____
Area Code and Phone Number: _____	Email Contact: _____

<input type="checkbox"/> Add <input type="checkbox"/> Delete	Product: <input type="checkbox"/> Oil <input type="checkbox"/> Gas
OGCC Transporter No: _____	Transporter/Gatherer Name: _____
Address: _____	City: _____ State: _____ Zip: _____
Area Code and Phone Number: _____	Email Contact: _____

Remarks: _____

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 all 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>Erin Ekblad</u>
Title: <u>Manager Regulatory Affairs</u>	Email: <u>eekblad@syrginfo.com</u> Date: <u>10.09.2015</u>

CHANGE OF OPERATOR:	
Name of Buying Operator: <u>Extraction Oil and Gas LLC</u>	Name of Selling Operator: <u>Synergy Resources Corporation</u>
Signature: <u>[Signature]</u> Date: <u>10-13-2015</u>	Signature: <u>[Signature]</u> Date: <u>10-13-2015</u>
Print Name/Title: <u>Matt Owens</u>	Print Name/Title: <u>William E. Scaff Jr.</u>

OGCC Approved: _____ Title: _____ Date: _____

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OGCC Operator Number: 10311

NEW WELL CERTIFICATION OF CLEARANCE FOR TRANSPORTER and/or GATHERER

#	API#:	Date of First Production:	Date of First Sales: Oil Gas	Well Name:	Well No.	Location(QQ,STR)
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						

CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

#	TYPE	OGCC Identifying Number: API#, Facility ID, Location ID	Well or Facility Name:	No.	Location(QQ,STR)
1	Well	05-123-34660	SRC Aims	10PD	NESE/10/5N/66W
2	Well	05-123-34662	SRC Aims	33-10D	NESE/10/5N/66W
3	Well	05-123-34545	SRC Aims	34-10D	NESE/10/5N/66W
4	Well	05-123-34531	SRC Aims	43-10D	NESE/10/5N/66W
5	Well	05-123-34533	SRC GCC	41-10D	NESE/10/5N/66W
6	Well	05-123-34538	SRC GCC	42-10D	NESE/10/5N/66W
7	Well	05-123-34541	SRC GCC	10VD	NESE/10/5N/66W
8	Well	05-123-34539	SRC GCC	11-11D	NESE/10/5N/66W
9	Well	05-123-34543	SRC GCC	12-11D	NESE/10/5N/66W
10					
11					
12					
13					
14					