

**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:

**11/13/2013**

Document Number:

**400512730****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: Judith Walter  
Company Name: ENCANA OIL & GAS (USA) INC Phone: (720) 876-3702  
Address: 370 17TH ST STE 1700 Fax: (720) 876-4702  
City: DENVER State: CO Zip: 80202-5632 Email: judith.walter@encana.com

Operator Bond Status: ☐ Blanket Surety ID: \_\_\_\_\_ 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 02/21/2012 Form is being submitted by: \_\_\_\_\_

**Add/Change Transporter or Gatherer**

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

OGCC Transporter No: 100123 Suffix: \_\_\_\_\_  
Trans./Gatherer Name: BASIN WESTERN INC  
Address: P O BOX 877 City: ROOSEVELT State: UT Zip: 84066  
Phone: (888) 722-5351 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: Walter, Judith  
Title: Regulatory Analyst Email: judith.walter@encana.com Date: 11/13/2013

**COGCC Approved:** Matthew Lee **Title:** Director of COGCC **Date:** 03/23/2016

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## CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 100185

Name of Operator: ENCANA OIL &amp; 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: 0      WATER GATHERING SYSTEM LINE: 0  
GAS PROCESSING PLANT: 0      PIT: 0      UIC ENHANCED RECOVERY: 0      WELL: 7

Total Approved: 7      Total out of Total Total Submitted: 7      are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	WELL	045-18694	412948	335825	N. Parachute	MF02C-16	SENE/17/6S/96W		100123
2	WELL	045-18705	412968	335825	N. Parachute	MF06B-16	SENE/17/6S/96W		100123
3	WELL	045-18699	412953	335825	N. Parachute	MF07B-16	SENE/17/6S/96W		100123
4	WELL	045-18703	412966	335825	N. PARACHUTE	MF07C-16	SENE/17/6S/96W		100123
5	WELL	045-18702	412963	335825	N. Parachute	MF11A-16	SENE/17/6S/96W		100123
6	WELL	045-18704	412967	335825	N. Parachute	MF06C-16	SENE/17/6S/96W		100123
7	WELL	045-18701	412962	335825	N. Parachute	MF12B-16	SENE/17/6S/96W		100123

Total Deleted: 0      Total out of Total Total Submitted: 7      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: 7      are listed below:

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