

FORM  
10Rev  
10/12State 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:

Document Number:

401094954

## 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:	10261	Contact Person:	Donald Barbula
Company Name:	BAYSWATER EXPLORATION AND PRODUCTION LLC	Phone:	(303) 893.2503
Address:	730 17TH ST STE 610	Fax:	(303) 893.2508
City:	DENVER	State:	CO
Zip:	80202	Email:	DBarbula@Bayswater.us
Operator Bond Status:	<input checked="" type="checkbox"/> Blanket	Surety ID:	2010-0112
		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 08/19/2016

Form is being submitted by: Buyer

## Non-Submitting Operator Information:

OGCC Number of NON-Submitting 30658 Name of NON-Submitting FOUNTAINHEAD RESOURCES LTD

NON-submitting Operator is Seller Contact Name DAVID A GOTTENBORG Title: Manager

NON-submitting Operator Contact Email: dave@fountainheadresources.net

## Add/Change Transporter or Gatherer

<input checked="" type="checkbox"/> Add <input type="checkbox"/> Delete	Product: <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Gas
OGCC Transporter No: 4680 Suffix:	
Trans./Gatherer Name: DCP MIDSTREAM LP	
Address: 370 17TH STREET - SUITE 2500 City: DENVER State: CO Zip: 80202	
Phone: ( ) Email Contact:	
<input checked="" type="checkbox"/> Add <input type="checkbox"/> Delete	Product: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas
OGCC Transporter No: 31295 Suffix:	
Trans./Gatherer Name: HOLLYFRONTIER REFINING & MARKETING LLC	
Address: PO BOX 1600 City: ARTESIA State: NM Zip: 88210	
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: Donald W. Barbula

Print Name: Barbula, Donald

Title: Sr. V. P. of Operations

Email: DBarbula@Bayswater.us

Date:

**CHANGE OF OPERATOR:**

Name of Buying Operator:

**BAYSWATER EXPLORATION AND PRODUCTION LLC**

Name of Selling Operator:

**FOUNTAINHEAD RESOURCES LTD**

Signature:

*Donald W. Barbula*

Date:

08/19/2016

Signature:

*David A. Gottenborg*

Date:

08/19/2016

Print Name: Barbula, Donald

Title: Sr. V. P. of  
Operations

Print Name:

DAVID A  
GOTTENBORG

Title: Manager

**COGCC Approved:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_

# State of Colorado

## Oil and Gas Conservation Commission

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

OGCC Operator Number: 10261

Name of Operator: BAYSWATER EXPLORATION AND PRODUCTION 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: 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: 4

Total Approved: 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 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: 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	WELL	123-12238	244444	322902	LITTLE WILL	9	SWSE/25/6N/65W		4680
	WELL		244444	322902					31295
2	WELL	123-11986	244193	322748	LITTLE WILL	8	SWNE/35/6N/65W		4680
	WELL		244193	322748					31295
3	WELL	123-11419	243627	319530	LITTLE WILL	2	NWSE/25/6N/65W		4680
	WELL		243627	319530					31295
4	WELL	123-11295	243503	319449	KAMMERZELL	NORDIC 1-6	SWSE/6/4N/66W		4680
	WELL		243503	319449					31295