

**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:

**10/18/2016**

Document Number:

**2225121****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: 10636 Contact Person: JEREMY COOK  
Company Name: RAISA II OPERATING LLC Phone: (303) 854-9141  
Address: PO BOX 987 Fax: (720) 247-9059  
City: DENVER State: CO Zip: 80201 Email: JCOOK@RAISAENERGY.COM

Operator Bond Status: ☒ Blanket Surety ID: 2016-0113 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 10/01/2016 Form is being submitted by: Buyer

**Non-Submitting Operator Information:**

OGCC Number of NON-Submitting 10474 Name of NON-Submitting MENDELL FINISTERRE II LLC  
NON-submitting Operator is Seller Contact Name ROBERT AYLING Title: CFO  
NON-submitting Operator Contact Email: RAYLING@MENDELLENERGY.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: COOK, JEREMY  
Title: VP OF FINANCE Email: JCOOK@RAISAENERGY.COM Date: 09/30/2016

**CHANGE OF OPERATOR:**

Name of Buying Operator: RAISA II OPERATING LLC Name of Selling Operator: MENDELL FINISTERRE II LLC  
Signature: \_\_\_\_\_ Date: 10/01/2016 Signature: \_\_\_\_\_ Date: 10/01/2016  
Print Name: COOK, JEREMY Title: VP OF FINANCE Print Name: ROBERT AYLING Title: CFO

COGCC Approved: Matthew Lee Title: Director of COGCC Date: 12/01/2016

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

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2225121**CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR**

OGCC Operator Number: 10636

Name of Operator: RAISA II OPERATING 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: 2	TANK BATTERY: 1	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: 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	001-09829	439514	439515	ALICIA	12-15H-1N	SWSE/12/1S/68W		
2	LOCATION	001-	439515	439515	ALICIA	PAD	SWSE/12/1S/68W		
3	LOCATION		439637	439637	AFTON / ALICIA	BATTERY			
4	TANK BATTERY		444934	439637	Afton/Alicia Tank				

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: 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			