

**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:

04/27/2017

Document Number:

401266821**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: <u>10651</u>	Contact Person: <u>KENNY TRUEAX</u>
Company Name: <u>VERDAD RESOURCES LLC</u>	Phone: <u>(720) 651-8409</u>
Address: <u>5950 CEDAR SPRINGS ROAD</u>	Fax: <u>(720) 531-6111</u>
City: <u>DALLAS</u> State: <u>TX</u> Zip: <u>75235</u>	Email: <u>ktrueax@verdadoil.com</u>
Operator Bond Status: <input checked="" type="checkbox"/> Blanket Surety ID: <u>2017-0009</u> Individual Surety ID: <u>see listing by individual well</u>	

☐ New Well Cert of Clearance ☒ Change of Operator ☐ Add/Change Transporter or GathererEffective Date of Change Below 04/12/2017 Form is being submitted by: Buyer**Non-Submitting Operator Information:**

OGCC Number of NON-Submitting	<u>10583</u>	Name of NON-Submitting	<u>PETRO OPERATING COMPANY LLC</u>		
NON-submitting Operator is	<u>Seller</u>	Contact Name	<u>Erin Parker</u>	Title:	<u>Manager</u>
NON-submitting Operator	Contact Email:	<u>erinbparker9@gmail.com</u>			

**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: Transfer of one well location and 24 well APDs.

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: <u>TRUEAX,KENNY</u>
Title: <u>Regulatory Manager</u>	Email: <u>ktrueax@verdadoil.com</u> Date: <u>04/27/2017</u>

**CHANGE OF OPERATOR:**

Name of Buying Operator:	Name of Selling Operator:
<u>VERDAD RESOURCES LLC</u>	<u>PETRO OPERATING COMPANY LLC</u>
Signature: _____ Date: <u>04/12/2017</u>	Signature: _____ Date: <u>04/12/2017</u>
Print Name: <u>TRUEAX,KENNY</u> Title: <u>Regulatory Manager</u>	Print Name: <u>Erin Parker</u> Title: <u>Manager</u>

COGCC Approved: _____	Title: _____	Date: _____
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# State of Colorado

## Oil and Gas Conservation Commission

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

OGCC Operator Number: 10651

Name of Operator: VERDAD RESOURCES 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: 24

Total Approved: 0      Total out of Total Total Submitted: 25      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: 25      are listed below:

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

Total Pending: 25      Total out of Total Total Submitted: 25      are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	LOCATION		450069	450069	HOMESTEAD PAD	1N66W34	NWSE/34/1N/66W	20170010	
2	WELL	123-44641	450085	450069	HOMESTEAD	1	NWSE/34/1N/66W	20170009	
3	WELL	123-44639	450083	450069	HOMESTEAD	2	NWSE/34/1N/66W	20170009	
4	WELL	123-44645	450089	450069	HOMESTEAD	3	NWSE/34/1N/66W	20170009	
5	WELL	123-44633	450077	450069	HOMESTEAD	4	NWSE/34/1N/66W	20170009	
6	WELL	123-44628	450072	450069	HOMESTEAD	5	NWSE/34/1N/66W	20170009	
7	WELL	123-44626	450070	450069	HOMESTEAD	6	NWSE/34/1N/66W	20170009	
8	WELL	123-44642	450086	450069	HOMESTEAD	7	NWSE/34/1N/66W	20170009	
9	WELL	123-44647	450091	450069	HOMESTEAD	8	NWSE/34/1N/66W	20170009	
10	WELL	123-44630	450074	450069	HOMESTEAD	9	NWSE/34/1N/66W	20170009	
11	WELL	123-44625	450068	450069	HOMESTEAD	10	NWSE/34/1N/66W	20170009	
12	WELL	123-44632	450076	450069	HOMESTEAD	11	NWSE/34/1N/66W	20170009	
13	WELL	123-44629	450073	450069	HOMESTEAD	12	NWSE/34/1N/66W	20170009	
14	WELL	123-44640	450084	450069	HOMESTEAD	13	NESE/34/1N/66W	20170009	
15	WELL	123-44634	450078	450069	HOMESTEAD	14	NESE/34/1N/66W	20170009	
16	WELL	123-44638	450082	450069	HOMESTEAD	15	NESE/34/1N/66W	20170009	
17	WELL	123-44636	450080	450069	HOMESTEAD	16	NESE/34/1N/66W	20170009	
18	WELL	123-44643	450087	450069	HOMESTEAD	17	NESE/34/1N/66W	20170009	
19	WELL	123-44627	450071	450069	HOMESTEAD	18	NESE/34/1N/66W	20170009	
20	WELL	123-44631	450075	450069	HOMESTEAD	19	NESE/34/1N/66W	20170009	
21	WELL	123-44624	450067	450069	HOMESTEAD	20	NESE/34/1N/66W	20170009	
22	WELL	123-44646	450090	450069	HOMESTEAD	21	NESE/34/1N/66W	20170009	
23	WELL	123-44644	450088	450069	HOMESTEAD	22	NESE/34/1N/66W	20170009	
24	WELL	123-44637	450081	450069	HOMESTEAD	23	NESE/34/1N/66W	20170009	
25	WELL	123-44635	450079	450069	HOMESTEAD	24	NESE/34/1N/66W	20170009	