

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:

04/27/2017

Document Number:

2226602

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: 10656 Contact Person: JUSTIN DUNN
Company Name: MORNING GUN EXPLORATION LLC Phone: (303) 847-1110
Address: 1601 ARAPAHOE ST Fax: ()
City: DENVER State: CO Zip: 80202 Email: JDUNN@MORNINGGUN.COM

Operator Bond Status: ☒ Blanket Surety ID: 2017-0040 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 04/01/2017 Form is being submitted by: Buyer

Non-Submitting Operator Information:

OGCC Number of NON-Submitting 70385 Name of NON-Submitting SMITH ENERGY CORP
NON-submitting Operator is Seller Contact Name GLENN S SMITH Title: AGENT/OWNER
NON-submitting Operator Contact Email: _____

Add/Change Transporter or Gatherer

☒ Add ☐ Delete Product: ☒ Oil ☐ Gas

OGCC Transporter No: 10597 Suffix: _____
Trans./Gatherer Name: COFFEYVILLE RESOURCES CRUDE TRANSPORTATION LLC
Address: 411 NE WASHINGTON BLVD PO BOX 3516 City: BARTLESVILLE State: OK Zip: 74006
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: DUNN,JUSTIN
Title: AGENT Email: JDUNN@MORNINGGUN.COM Date: 04/14/2017

CHANGE OF OPERATOR:

Name of Buying Operator: MORNING GUN EXPLORATION LLC Name of Selling Operator: SMITH ENERGY CORP
Signature: _____ Date: 04/01/2017 Signature: _____ Date: 04/01/2017
Print Name: DUNN,JUSTIN Title: AGENT Print Name: GLENN S SMITH Title: AGENT/OWNER

COGCC Approved: Matthew Lee Title: Director of COGCC Date: 05/19/2017

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CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 10656

Name of Operator: MORNING GUN EXPLORATION 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: 1

Total Approved: 2 Total out of Total Total Submitted: 2 are listed below:

| # | TYPE | API | FAC ID | Loc# | Facility | | Location (QQ/S/T/R) | Surety ID | Transporter / Gatherer |
|---|----------|-----------|--------|--------|---------------|--------|------------------------|-----------|---------------------------|
| | | | | | Name | Number | | | |
| 1 | WELL | 123-12452 | 244657 | 323023 | BASHOR | 18-1 | SWNW/18/9N/60 | | 10597 |
| 2 | LOCATION | 123- | 323023 | 323023 | BASHOR-69N60W | 18SWNW | SWNW/18/9N/60 | | |

Total Deleted: 0 Total out of Total Total Submitted: 2 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: 2 are listed below:

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