

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:

Document Number:

401243703

## 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: 10071 Contact Person: TRACEY FALLANG  
 Company Name: BARRETT CORPORATION\* BILL Phone: (303) 2939100  
 Address: 1099 18TH ST STE 2300 Fax: ( )  
 City: DENVER State: CO Zip: 80202 Email: TFALLANG@BILLBARRETTCORP.COM

Operator Bond Status: ☒ Blanket Surety ID: 2004-0060 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 06/01/2017 Form is being submitted by: Buyer

### Non-Submitting Operator Information:

OGCC Number of NON-Submitting 10110 Name of NON-Submitting GREAT WESTERN OPERATING COMPANY LLC  
 NON-submitting Operator is Seller Contact Name Jay Smith Title: Chief Operating Officer  
 NON-submitting Operator Contact Email: JSMITH@GWOGCO.COM

### Add/Change Transporter or Gatherer

<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Delete	Product: <input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Gas
OGCC Transporter No: <u>83720</u> Suffix: _____			
Trans./Gatherer Name: <u>SUNCOR ENERGY (USA) INC</u>			
Address: <u>717 17TH STREET #2900</u>		City: <u>DENVER</u>	State: <u>CO</u> Zip: <u>80202</u>
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: <u>10623</u> Suffix: _____			
Trans./Gatherer Name: <u>SINCLAIR CRUDE COMPANY</u>			
Address: <u>550 EAST SOUTH TEMPLE</u>		City: <u>SALT LAKE CITY</u>	State: <u>UT</u> Zip: <u>84102</u>
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: <u>70505</u> Suffix: _____			
Trans./Gatherer Name: <u>PLAINS MARKETING LP</u>			
Address: <u>333 CLAY ST #1600</u>		City: <u>HOUSTON</u>	State: <u>TX</u> Zip: <u>77002</u>
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: <u>10540</u> Suffix: _____			
Trans./Gatherer Name: <u>NGL CRUDE LOGISTICS LLC</u>			
Address: <u>3773 CHERRY CREEK NORTH DR SUITE 1000</u>		City: <u>DENVER</u>	State: <u>CO</u> Zip: <u>80209</u>
Phone: ( )		Email Contact: _____	

<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Delete		Product:	<input type="checkbox"/> Oil	<input checked="" type="checkbox"/> Gas
OGCC Transporter No: <u>10390</u> Suffix: _____					
Trans./Gatherer Name: <u>STERLING ENERGY INVESTMENTS LLC</u>					
Address: <u>1200 17TH STREET #2850</u>		City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>	
Phone: (    )		Email Contact: _____			

  

<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Delete		Product:	<input type="checkbox"/> Oil	<input checked="" type="checkbox"/> Gas
OGCC Transporter No: <u>4680</u> Suffix: _____					
Trans./Gatherer Name: <u>DCP MIDSTREAM LP</u>					
Address: <u>370 17TH STREET - SUITE 2500</u>		City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80202</u>	
Phone: (    )		Email Contact: _____			

  

<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Delete		Product:	<input type="checkbox"/> Oil	<input checked="" type="checkbox"/> Gas
OGCC Transporter No: <u>47121</u> Suffix: _____					
Trans./Gatherer Name: <u>KERR MCGEE GATHERING LLC</u>					
Address: <u>PO BOX 173779</u>		City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80217</u>	
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: <u>10597</u> Suffix: _____					
Trans./Gatherer Name: <u>COFFEYVILLE RESOURCES CRUDE TRANSPORTATION LLC</u>					
Address: <u>411 NE WASHINGTON BLVD PO BOX 3516</u>		City: <u>BARTLESVILLE</u>	State: <u>OK</u>	Zip: <u>74006</u>	
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: <u>78100</u> Suffix: _____					
Trans./Gatherer Name: <u>SHELL OIL COMPANY</u>					
Address: <u>P O BOX 576</u>		City: <u>HOUSTON</u>	State: <u>TX</u>	Zip: <u>77001</u>	
Phone: (    )		Email Contact: _____			

  

<input type="checkbox"/> Add	<input checked="" type="checkbox"/> Delete		Product:	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Gas
OGCC Transporter No: <u>10512</u> Suffix: _____					
Trans./Gatherer Name: <u>ROSE ROCK MIDSTREAM FIELD SERVICES LLC</u>					
Address: <u>3030 NW EXPRESSWAY SUITE 1100</u>		City: <u>OKLAHOMA CITY</u>	State: <u>OK</u>	Zip: <u>73112</u>	
Phone: (    )		Email Contact: _____			

  

<input type="checkbox"/> Add	<input checked="" type="checkbox"/> Delete		Product:	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Gas
OGCC Transporter No: <u>10266</u> Suffix: _____					
Trans./Gatherer Name: <u>ANDERSON CRUDE TRANSPORTATION INC</u>					
Address: <u>PO BOX 691</u>		City: <u>KIMBALL</u>	State: <u>NE</u>	Zip: <u>69145</u>	
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: FALLANG, TRACEY \_\_\_\_\_

Title: REGULATORY MANAGER \_\_\_\_\_

Email: TFALLANG@BILLBARRETTCORP.COM Date: \_\_\_\_\_

**CHANGE OF OPERATOR:**

Name of Buying Operator:

Name of Selling Operator:

**BARRETT CORPORATION\* BILL**

**GREAT WESTERN OPERATING COMPANY LLC**

Signature: Tracey Fallang Date: 06/01/2017

Signature: J. Smith Date: 06/01/2017

Print Name: FALLANG, TRACEY Title: REGULATORY MANAGER

Print Name: Jay Smith Title: Chief Operating Officer

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

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

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

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State of Colorado  
Oil and Gas Conservation Commission

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Document Number:

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CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 10071

Name of Operator: BARRETT CORPORATION\* BILL

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: 0

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

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