

FORM
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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:

11/24/2017

Document Number:

2228625

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: 10330 Contact Person: DAVE REBOL
Company Name: INVESTMENT EQUIPMENT LLC Phone: (970) 867-9007
Address: 412 W PLATTE AVE Fax: (970) 867-8374
City: FT MORGAN State: CO Zip: 80701 Email: INVESTMENTEQUIPMENT@GMAIL.COM

Operator Bond Status: ☒ Blanket Surety ID: 2010-0051 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 11/01/2017 Form is being submitted by: Buyer

Non-Submitting Operator Information:

OGCC Number of NON-Submitting 10536 Name of NON-Submitting SMITH ENERGY LLC
NON-submitting Operator is Seller Contact Name CHRIS SMITH Title: MANAGER
NON-submitting Operator Contact Email: SMITHENERGY@LIVE.COM

Add/Change Transporter or Gatherer

☒ Add ☐ Delete Product: ☒ Oil ☐ Gas

OGCC Transporter No: 83720 Suffix: _____
Trans./Gatherer Name: SUNCOR ENERGY (USA) INC
Address: 717 17TH STREET #2900 City: DENVER State: CO Zip: 80202
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: REBOL,DAVE
Title: MANAGING MEMBER Email: INVESTMENTEQUIPMENT@GMAIL.CO Date: 11/16/2017
M

CHANGE OF OPERATOR:

Name of Buying Operator: INVESTMENT EQUIPMENT LLC Name of Selling Operator: SMITH ENERGY LLC
Signature: _____ Date: 11/01/2017 Signature: _____ Date: 11/01/2017
Print Name: REBOL,DAVE Title: MANAGING MEMBER Print Name: CHRIS SMITH Title: MANAGER
MEMBER

COGCC Approved: _____

Title: Director of COGCC

Date: 01/19/2018

State of Colorado
Oil and Gas Conservation Commission

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2228625**CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR**

OGCC Operator Number: 10330

Name of Operator: INVESTMENT EQUIPMENT 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: 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: 1	UIC ENHANCED RECOVERY: 0	WELL: 1

Total Approved: 3 Total out of Total Total Submitted: 3 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	WELL	121-10695	267327	317365	STATE	31-22	NWNE/22/3S/50W		83720
2	TANK BATTERY	121-	432570	317365	STATE-63S50W	22NWNE	NWNE/22/3S/50W		
3	PIT		107521	402668	FRIEND STATE 1		SWNE/22/3S/50W		

Total Deleted: 0 Total out of Total Total Submitted: 3 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: 3 are listed below:

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