



OGCC RECEPTION Receive Date: 06/19/2018 Document Number: 401595442

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

OGCC Operator Number: 10625 Contact Person: Robert Price Company Name: HIGHLANDS NATURAL RESOURCES CORPORATION Phone: (303) 3221066 Address: 220 JOSEPHINE STREET Fax: () City: DENVER State: CO Zip: 80206 Email: robert.price@highlandsnr.com

Operator Financial Assurance: [X] Blanket Surety ID: 1986-0022 Individual Surety ID: see listing by individual well

[] New Well Cert of Clearance [X] Change of Operator [] Add/Change Transporter or Gatherer

Effective Date of Change Below 06/01/2018 Form is being submitted by: Seller Is the Buying Operator a Tier One member of the Utility Notification Center of Colorado (UNCC) that participates in Colorado's One Call notification system? Yes [] No [X]

Non-Submitting Operator Information: OGCC Number of NON-Submitting 90450 Name of NON-Submitting TRUE OIL LLC NON-submitting Operator is Buyer Contact Name John Fanto Title: Manager NON-submitting Operator Contact Email: john.fanto@truecos.com

Add/Change Transporter or Gatherer

[X] Add [] Delete Product: [X] Oil [] Gas OGCC Transporter No: 200538 Suffix: Trans./Gatherer Name: BLACK GOLD ENERGY TRANSPORT LLC Address: 25449 COUNTY ROAD T City: BRUSH State: CO Zip: 80723 Phone: () Email Contact:

[X] Add [] Delete Product: [X] Oil [] Gas OGCC Transporter No: 10562 Suffix: Trans./Gatherer Name: COLORADO CRUDE CARRIERS INC Address: 20739 HWY 392 City: GREELY State: CO Zip: 80631 Phone: () Email Contact:

[X] Add [] Delete Product: [X] Oil [] Gas OGCC Transporter No: 10584 Suffix: Trans./Gatherer Name: DIAMOND B OILFIELD TRUCKING Address: 212 WEST CACTUS City: PLENTYWOOD State: MT Zip: 59254 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>10538</u>	Suffix: _____	
Trans./Gatherer Name: <u>KAUFFMAN TRANSPORTATION LLC</u>		
Address: <u>58975 E HWY 36</u>	City: <u>STRASBURG</u>	State: <u>CO</u> Zip: <u>80136</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>10549</u>	Suffix: _____	
Trans./Gatherer Name: <u>NOW OR NEVER TRUCKING INC</u>		
Address: <u>1925 1ST AVE</u>	City: <u>GREELEY</u>	State: <u>CO</u> Zip: <u>80631</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>10569</u>	Suffix: _____	
Trans./Gatherer Name: <u>CIRCUIT TRUCKING LLC</u>		
Address: <u>4540 NORTH SALEM RD</u>	City: <u>REXBURG</u>	State: <u>ID</u> Zip: <u>83440</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>10674</u>	Suffix: _____	
Trans./Gatherer Name: <u>SPLINTER A TRUCKING INC</u>		
Address: <u>8484 EVERETT WAY UNIT D</u>	City: <u>ARVADA</u>	State: <u>CO</u> Zip: <u>80005</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: Robert Price
 Title: President Email: robert.price@highlandsnr.com Date: 06/19/2018

CHANGE OF OPERATOR:

Name of Buying Operator:	Name of Selling Operator:
<u>TRUE OIL LLC</u>	<u>HIGHLANDS NATURAL RESOURCES CORPORATION</u>
Signature: _____ Date: <u>06/01/2018</u>	Signature: _____ Date: <u>06/01/2018</u>
Print Name: <u>John Fanto</u> Title: <u>Manager</u>	Print Name: <u>Robert Price</u> Title: <u>President</u>

COGCC Approved:  **Title:** Director of COGCC **Date:** 07/11/2018

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

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 10625

Name of Operator: HIGHLANDS NATURAL RESOURCES CORPORATION

FOR OGCC USE ONLY

CENTRALIZED EP WASTE MGMT FAC: 0	SERVICE SITE: 0	LOCATION: 1	OFF-LOCATION FLOWLINE: 0
UIC WATER TRANSFER STATION: 0	TANK BATTERY: 0	PIPELINE: 0	DOMESTIC TAP: 0
UIC SIMULTANEOUS DISPOSAL: 0	UIC DISPOSAL: 0	WELL: 8	CRUDE OIL TRANSFER LINE: 0
UIC ENHANCED RECOVERY: 0	LAND APPLICATION SITE: 0	PIT: 0	PRODUCE WATER TRANSFER SYSTEM: 0

Total Approved: 9 Total out of Total Total Submitted: 9 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	LOCATION	005-	449920	449920	Highlands	5-64 15-16	NESE/15/5S/64W		
2	WELL	005-07266	449919	449920	CITADEL	5-64 15-16-	NESE/15/5S/64W		
3	WELL	005-07267	449921	449920	WILDHORSE	5-64 15-16-	NESE/15/5S/64W		10562
4	WELL	005-07268	449922	449920	HAGAR	5-64 15-16-	NESE/15/5S/64W		
5	WELL	005-07269	449923	449920	POWELL	5-64 15-16-	NESE/15/5S/64W		10562
6	WELL	005-07340	454164	449920	Thunder	5-64 15-16-	NESE/15/5S/64W		
7	WELL	005-07341	454165	449920	Grizzly	5-64 15-16-	NESE/15/5S/64W		
8	WELL	005-07342	454167	449920	Ouray	5-64 15-16-	NESE/15/5S/64W		
9	WELL	005-07343	454168	449920	Buckskin	5-64 15-16-	NESE/15/5S/64W		

Total Deleted: 0 Total out of Total Total Submitted: 9 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: 9 are listed below:

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