

FORM  
10Rev  
02/20

## 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:

09/22/2020

Document Number:

402485334

## 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.https://cogcc.state.co.us](https://cogcc.state.co.us)

OGCC Operator Number:	10456	Contact Person:	Reed Haddock
Company Name:	CAERUS PICEANCE LLC	Phone:	(720) 880-6369
Address:	1001 17TH STREET #1600	Fax:	(303) 565-4606
City:	DENVER	State:	CO
Zip:	80202	Email:	rhaddock@caerusoilandgas.com
Operator Financial Assurance:	<input checked="" type="checkbox"/> Blanket	Surety ID:	2013-0092
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	01/01/2017	Form is being submitted by:	Buyer
One Call Participation (One box must be checked.)			
<input checked="" type="checkbox"/> The Buying Operator is a Tier One membership in the Utility Notification Center of Colorado (CO 811) and participates in Colorado's One Call notification system. [Rule 1102.n.]			
<input type="checkbox"/> The Buying Operator has no underground facilities and is exempt from CO 811 membership. [Rule 1102.n.(2)]			

## Non-Submitting Operator Information:

OGCC Number of NON-Submitting	100185	Name of NON-Submitting	ENCANA OIL & GAS (USA) INC
NON-submitting Operator is	Seller	Contact Name	Julia Carter
		Title:	Regulatory Manager
NON-submitting Operator Contact Email: julia.carter@encana.com			

## Add/Change Transporter or Gatherer

<input type="checkbox"/> Add	<input type="checkbox"/> Delete	Product:	<input type="checkbox"/> Oil	<input type="checkbox"/> Gas
OGCC Transporter No:	Suffix:			
Trans./Gatherer Name:				
Address:	City:	State:	Zip:	
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:	Haddock, Reed
Title:	Regulatory Lead	Email: rhaddock@caerusoilandgas.com
		Date: 09/22/2020

**CHANGE OF OPERATOR:**

Name of Buying Operator:

**CAERUS PICEANCE LLC**

Name of Selling Operator:

**ENCANA OIL & GAS (USA) INC**

Signature: \_\_\_\_\_

Date: 01/01/2017

Signature: \_\_\_\_\_

Date: 01/01/2017

Print Name: Haddock,Reed

Title: Regulatory Lead

Print Name: Julia Carter

Title: Regulatory  
Manager

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

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

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

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

OGCC Operator Number: 10456

Name of Operator: CAERUS PICEANCE LLC

FOR OGCC USE ONLY

CENTRALIZED EP WASTE MGMT FAC: 0	SERVICE SITE: 0	LOCATION: 2	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: 0	CRUDE OIL TRANSFER LINE: 0
UIC ENHANCED RECOVERY: 0	LAND APPLICATION SITE: 0	PIT: 0	PRODUCE WATER TRANSFER SYSTEM: 0

Total Approved: 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 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: 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	LOCATION	045-	415949	415949	SGU	CDP J25	NWSE/25/4S/96W		
2	LOCATION		416051	416051		Frac Pad			