

FORM  
10Rev  
02/20State 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:

08/04/2020

Document Number:

402458471

## 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:	10000	Contact Person:	Patti Campbell
Company Name:	BP AMERICA PRODUCTION COMPANY	Phone:	(970) 712-5997
Address:	1199 MAIN AVENUE SUITE 101	Fax:	( )
City:	DURANGO	State:	CO
Zip:	81301	Email:	patti.campbell@bpx.com
Operator Financial Assurance:	<input checked="" type="checkbox"/> Blanket	Surety ID:	2020-0027
Individual Surety ID:	see listing by individual well		

☐ New Well Cert of Clearance ☒ Change of Operator ☐ Add/Change Transporter or GathererEffective Date of Change Below 02/28/2020 Form is being submitted by: Seller

One Call Participation (One box must be checked.)

☒ 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.]☐ 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	10749	Name of NON-Submitting	SIMCOE LLC
NON-submitting Operator is	Buyer	Contact Name	Scott S. Quillin
		Title:	Attorney-in-Fact
NON-submitting Operator Contact Email:	squillin@ikav.com		

**Add/Change Transporter or Gatherer**

<input checked="" type="checkbox"/> Add	<input type="checkbox"/> Delete	Product:	<input type="checkbox"/> Oil	<input checked="" type="checkbox"/> Gas
OGCC Transporter No:	10749	Suffix:		
Trans./Gatherer Name:	SIMCOE LLC			
Address:	THREE ALLEN CENTER, 333 CLAY ST SUITE 3900	City:	HOUSTON	State: TX
Zip:	77002			
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:	Campbell,Patti
Title:	Regulatory Analyst	Email: patti.campbell@bpx.com
Date:	08/04/2020	

**CHANGE OF OPERATOR:**

Name of Buying Operator:

**SIMCOE LLC**

Name of Selling Operator:


**BP AMERICA PRODUCTION COMPANY**

Signature: \_\_\_\_\_ Date: 02/28/2020

Signature: \_\_\_\_\_ Date: 02/28/2020

Print Name: Scott S. Quillin Title: Attorney-in-Fact

Print Name: Campbell,Patti Title: Regulatory Analyst

**COGCC Approved:** 

**Title:** Director of COGCC

**Date:** 11/24/2020

# State of Colorado

## Oil and Gas Conservation Commission

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

OGCC Operator Number: 10000

Name of Operator: BP AMERICA PRODUCTION COMPANY

FOR OGCC USE ONLY

CENTRALIZED EP WASTE MGMT FAC: 0	SERVICE SITE: 0	LOCATION: 0	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: 13	CRUDE OIL TRANSFER LINE: 0
UIC ENHANCED RECOVERY: 0	LAND APPLICATION SITE: 0	PIT: 1	PRODUCE WATER TRANSFER SYSTEM: 0

Total Approved: 14 Total out of Total Total Submitted 14 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	WELL	067-09997	450138	325890	East Sauls Creek 26	2-1	SWSE/27/35N/6W		10749
2	WELL	067-09996	450137	325890	East Sauls Creek 26	2-2	SWSE/27/35N/6W		10749
3	WELL	067-09999	450140	326646	East Sauls Creek 35	3-1	SWNE/34/35N/6W		10749
4	WELL	067-09998	450139	326646	East Sauls Creek 35	3-2	SWNE/34/35N/6W		10749
5	WELL	067-09995	450136	325891	East Sauls Creek 35	4-1	NESE/34/35N/6W		10749
6	WELL	067-09994	450135	325891	East Sauls Creek 35	4-2	NESE/34/35N/6W		10749
7	WELL	067-10007	452119		Tiffany	3-1	NWSW/21/33N/6		10749
8	WELL	067-10015	453802		Tiffany	3-2	NWSW/21/33N/6		10749
9	WELL	067-10012	452599		Tiffany	3-3	NWSW/21/33N/6		10749
10	WELL	067-10022	454869	325516	Harper 01-18	2	SESW/18/34N/6W		10749
11	WELL	067-10024	455302	334337	Secord 17U-34-6	2	NWSW/17/34N/6		10749
12	PIT	067-	275636	334337	DRILLING PIT		NWSW/17/34N/6		
13	WELL	067-10023	455301	334337	Secord 17U-34-6	3	NWSW/17/34N/6		10749
14	WELL	007-06334	456612	456613	Ross	2	NENE/13/32N/6W		10749

Total Deleted: 0 Total out of Total Total Submitted 14 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 14 are listed below:

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