

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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04/13/2022

TRANSFER OF OPERATORSHIP

A Selling Operator will notify the Commission about the transfer of any Transferable Item associated with its Oil and Gas Operations to a Buying Operator by filing a Form 9, Transfer of Operatorship – Intent, with the Commission at least 30 days, or as soon as practicable, before the anticipated transfer date. (Rule 218.b.) When a transaction subject to a Form 9 – Intent becomes final, the Buying Operator will submit a Form 9 – Subsequent within 7 days of closing. (Rule 218.d.(1).)

Type of Form 9, Transfer of Operatorship: ☐ Intent ☒ Subsequent Intent # 402997082

OPERATOR INFORMATION

SELLING OPERATOR INFORMATION

OGCC Operator Number: 10768 Contact Name and Telephone:
Name of Operator: WAMSUTTER E&P LLC Name: Tyler Evans
Address: ONE WILLIAMS CENTER, MD 47 Phone: (918) 573-0454
City: TULSA State: OK Zip: 74172 Email: tyler.evans@williams.com

BUYING OPERATOR INFORMATION

OGCC Operator Number: 10776 Contact Name and Telephone:
Name of Operator: CROWHEART ENERGY LLC Name: Mike Grijalva
Address: 1225 17TH STREET SUITE 2950 Phone: (303) 656-5476
City: DENVER State: CO Zip: 80202 Email: m.grijalva@crowheartenergy.comM

TRANSFER INFO

Transfer Dates

Form 9 Intent - Anticipated Date of Transfer: 08/01/2021
Form 9 Subsequent - Effective Date of Transfer: 08/01/2021

Confidentiality

Transfer is Confidential: No

Financial Assurance

Form 9 Intent - Estimated amount of Financial Assurance the Buying Operator will submit prior to anticipated date of transfer: \$ 25,000
Form 9 Subsequent - The Buying Operator's Financial Assurance:

Surety ID	Bond Type	Amount
20210070	SURFACE	25,000
20210071	PLUGGING	60,000
20210072	PLUGGING	80,000

SUBSEQUENT LIABILITY

Rule 218.d.(1).D.i.

"For Transferable Items listed in Rule 218.d.(1).B.i an acknowledgment that upon the effective date of transfer, that the Buying Operator assumes all responsibility for compliance with the Act, the Commission's Rules, and all terms and conditions of existing Permits and Commission orders for the Transferable Items."

In checking this box the Buying Operator's acknowledges the subsequent liability pursuant to Rule 218.d.(1).D.i. ☒

Rule 218.d.(1).D.ii.

"For Transferable Items listed in Rule 218.d.(1).B.ii or iii, an acknowledgment that the Buying Operator may be or may become responsible for compliance with the Act, the Commission's Rules, and all terms and conditions of existing Permits and Commission orders if the Buying Operator takes any action, or fails to take any action, that would cause such Transferable Item to be out of compliance with the Act, the Commission's Rules, and all terms and conditions of existing Permits and Commission orders."

In checking this box the Buying Operator's acknowledges the subsequent liability pursuant to Rule 218.d.(1).D.ii. ☒

Rule 218.d.(1).D.iii.

"For Transferable Items not listed in Rule 218.d.(1).B.i-iii but Related in the Commission's records, an acknowledgment that the Commission will presume that the Transferable Item was transferred, and that the Buying Operator is responsible for compliance with the Act, the Commission's Rules, and all terms and conditions of existing Permits and Commission orders for the Transferable Items."

In checking this box the Buying Operator's acknowledges the subsequent liability pursuant to Rule 218.d.(1).D.iii. ☒

SUBMITTAL

OPERATOR COMMENT AND SUBMITTAL

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Callie Fiddes Email: c.fiddes@crowheartenergy.com

Signature: _____ Title: Regulatory Analyst Date: 04/13/2022

Wells & Facilities Transferred Summary

1	<u>Facility Type</u>	<u>API</u>	<u>Facility ID</u>	<u>Location ID</u>	<u>Facility Name</u>	<u>QtrQtr</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>
	WELL	081-06857	223491	313060	PEPLER FEE 12-18	SWNW	18	12N	91W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	MOFFAT	FEE	10768	10776					
2	<u>Facility Type</u>	<u>API</u>	<u>Facility ID</u>	<u>Location ID</u>	<u>Facility Name</u>	<u>QtrQtr</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>
	WELL	081-06898	223531	313078	LATIN 33-12	NWSE	12	9N	91W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	MOFFAT	FEE	10768	10776					
3	<u>Facility Type</u>	<u>API</u>	<u>Facility ID</u>	<u>Location ID</u>	<u>Facility Name</u>	<u>QtrQtr</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>
	WELL	081-06904	223537	313081	PO 12-12	SWNW	12	9N	91W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	MOFFAT	FEE	10768	10776					
4	<u>Facility Type</u>	<u>API</u>	<u>Facility ID</u>	<u>Location ID</u>	<u>Facility Name</u>	<u>QtrQtr</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>
	WELL	081-06951	223584	313092	BLUE SKY 44-1	SESE	1	9N	91W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	MOFFAT	FEE	10768	10776					
5	<u>Facility Type</u>	<u>API</u>	<u>Facility ID</u>	<u>Location ID</u>	<u>Facility Name</u>	<u>QtrQtr</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>
	WELL	081-06967	89304	313099	DENALI 15-12	NESW	12	9N	91W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	MOFFAT	FEE	10768	10776					
6	<u>Facility Type</u>	<u>API</u>	<u>Facility ID</u>	<u>Location ID</u>	<u>Facility Name</u>	<u>QtrQtr</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>
	WELL	081-07173	271331	313190	BAKERS PEAK UNIT 2-12	SWSE	12	11N	91W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	MOFFAT	STATE	10768	10776					
7	<u>Facility Type</u>	<u>API</u>	<u>Facility ID</u>	<u>Location ID</u>	<u>Facility Name</u>	<u>QtrQtr</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>
	WELL	081-07328	285957	313308	LANDING STRIP UNIT 1-6	NWSW	6	9N	90W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	MOFFAT	FED	10768	10776					
8	<u>Facility Type</u>	<u>API</u>	<u>Facility ID</u>	<u>Location ID</u>	<u>Facility Name</u>	<u>QtrQtr</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>
	WELL	081-07446	297531	313404	BIG HOLE GULCH UNIT 1-8	SESW	8	11N	94W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	MOFFAT	FED	10768	10776					

Incidents Transferred Summary

< No row provided >

Related Wells & Facilities Not Transferred Summary

< No row provided >

Related Incidents Not Transferred Summary

< No row provided >

Wells & Facilities Proposed Not Transferred Summary

< No row provided >

Incidents Proposed Not Transferred Summary

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Attachment List

<u>Att Doc Num</u>	<u>Name</u>
403014628	EDD-S-WELLS-FACILITIES-TRANSFERRED
403014637	FORM 9 SUBSEQUENT ATTESTATION
403014638	BUYER NOTIFIED LOCAL GOVT ATTESTATION

Total Attach: 3 Files

Condition of Approval

COA Type

Description

0 COA	

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)