



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

FOR OGCC USE ONLY



CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR

This form should be completed and filed by the New Operator. **Submit original plus one copy.** Use Page 2 of Form 10 for multiple wells changing from the same operator to the new operator or when the "Change of Transporter/Gatherer" on multiple wells are the same. This form is not to be used for Well Name changes or Status changes. Form more information/codes, see www.oil-gas.state.co.us/forms. **It is the Operator's responsibility to mail approved copies to the new Transporter and/or Gatherer for each well listed.**

RECEIVED

JUL 29 2008

Operator Bond Status

- Blanket
- Individual

1. OGCC Operator Number: 17180	4. Contact Name and Phone
2. Name of Operator: Citation Oil & Gas Corp.	Bridget Lisenbe
3. Address: P O Box 690688	No: (281) 517-7186
City: Houston State: TX Zip: 77269	Fax: (281) 469-9667

Change of Operator

Add/Change Transporter or Gatherer

Effective Date: _____

Effective Date: 2/1/2008

Complete This Section for a New or Individual Well:

Well Name & Number: Dubois 6	API Number: 05- 075-09344
Location: (QtrQtr, Sec, Twp, Rng, Meridian): NWNE 7 9N 52W 6 PM	
Date of First Production: 09/20/2005	Date of First Sales: Oil: 2/1/2008
Gas: _____	

<input type="checkbox"/> Add <input checked="" type="checkbox"/> Delete	<input type="checkbox"/> Add <input type="checkbox"/> Delete
Product: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas	Product: <input type="checkbox"/> Oil <input type="checkbox"/> Gas
Name of Transporter/Gatherer: Frontier Oil and Refining Co. OGCC Transporter No: 31295	Name of Transporter/Gatherer: _____ OGCC Transporter No: _____
Address: 4610 S. Ulster Street Suite 200	Address: _____
City: Denver State: CO Zip: 80237-4322	City: _____ State: _____ Zip: _____
Area Code and Phone Number: (303) 714-0100	Area Code and Phone Number: _____

<input checked="" type="checkbox"/> Add <input type="checkbox"/> Delete	<input type="checkbox"/> Add <input type="checkbox"/> Delete
Product: <input type="checkbox"/> Oil <input type="checkbox"/> Gas	Product: <input type="checkbox"/> Oil <input type="checkbox"/> Gas
Name of Transporter/Gatherer: Dixon Brothers OGCC Transporter No: 200069	Name of Transporter/Gatherer: _____ OGCC Transporter No: _____
Address: P. O. Drawer 8	Address: _____
City: Newcastle State: WY Zip: 82701	City: _____ State: _____ Zip: _____
Area Code and Phone Number: (307) 746-2788	Area Code and Phone Number: _____

Remarks: _____

The undersigned certifies that the rules and regulations of the Oil and Gas Conservation Commission of the State of Colorado have been complied with except as noted above and that the transporter(s) is (are) authorized to transport the oil and/or gas produced from the above described well 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.

Name of Buyer or Current Operator: Citation Oil & Gas Corp.	Name of Selling Operator: _____
Signature: Mercedes Ponzio Date: 07/24/08	Signature: _____ Date: _____
Print Name: Mercedes Ponzio Title: Permitting Assistant	Print Name: _____ Title: _____

OGCC Approved: David S. Nash Title: DM Date: 12/12/08