

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

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



**Document Number:**

**403186278**

**Receive Date:**

**10/04/2022**

**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 # 403178592

**OPERATOR INFORMATION**

**SELLING OPERATOR INFORMATION**

OGCC Operator Number: 10690 Contact Name and Telephone:  
 Name of Operator: IMPETRO RESOURCES LLC Name: Brent Bongers  
 Address: 558 CASTLE PINES PKWY UNIT B-4 Phone: (361) 935-5633  
 City: CASTLE PINES State: CO Zip: 80108 Email: bbongers@impetroresources.com

**BUYING OPERATOR INFORMATION**

OGCC Operator Number: 81490 Contact Name and Telephone:  
 Name of Operator: ST CROIX OPERATING INC Name: Paul Melnychenko  
 Address: P O BOX 13799 Phone: (303) 489-9298  
 City: DENVER State: CO Zip: 80201 Email: stcroixexp@aol.com

**TRANSFER INFO**

**Transfer Dates**

Form 9 Intent - Anticipated Date of Transfer: 09/27/2022

Form 9 Subsequent - Effective Date of Transfer: s09/27/2022

**Confidentiality**

Transfer is Confidential: Yes

**Financial Assurance**

Form 9 Intent - Estimated amount of Financial Assurance the Buying Operator will submit prior to anticipated date of transfer:\$ 0

Form 9 Subsequent - The Buying Operator's Financial Assurance:

Surety ID	Bond Type	Amount
20000108	PLUGGING	60,000

**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.**



**Wells & Facilities Transferred Summary**

1	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	WELL	121-11094	474452	474453	ALICE SEEDORF #1	NESW	22	2N	49W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WASHINGTON	FEE	10690	IMPETRO RESOURCES LLC					
2	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	LOCATION	-	474453	474453	ALICE SEEDORF #1	NESW	22	2N	49W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WASHINGTON		10690	IMPETRO RESOURCES LLC					
3	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	LOCATION	-	474451	474451	ALICE SEEDORF PRODUCTION FACILITY #	SESW	22	2N	49W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WASHINGTON		10690	IMPETRO RESOURCES LLC					

**Incidents Transferred Summary**

&lt; No row provided &gt;

**Related Wells & Facilities Not Transferred Summary**

&lt; No row provided &gt;

**Related Incidents Not Transferred Summary**

&lt; No row provided &gt;

**Wells & Facilities Proposed Not Transferred Summary**

&lt; No row provided &gt;

**Incidents Proposed Not Transferred Summary**

&lt; No row provided &gt;

## Attachment List

<b>Att Doc Num</b>	<b>Name</b>
1310995	CORRESPONDENCE
1310996	CORRESPONDENCE
403186278	Form 09 SUBMITTED
403187188	BUYER NOTIFIED LOCAL GOVT ATTESTATION
403187189	FORM 9 SUBSEQUENT ATTESTATION
403187206	EDD-S-WELLS-FACILITIES-TRANSFERRED

Total Attach: 6 Files

**COA Type**

**Description**

0 COA

## General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Financial Assurance	Both operators have agreed to the COA and met the requirements for the Form 9 Transfer. Form 9 Approved.	11/18/2022
Financial Assurance	<p>All,</p> <p>This transfer is ready for approval. I will need both operators to review the Conditions of Approval (COA) listed below. Please respond that you have reviewed and will abide by these conditions.</p> <p>The Buying Operator must file a Form 3, Financial Assurance Plan, within 10 business days of Form 9 approval –OR– by the applicable deadline as described in the Notice to Operators, Delayed Deadline for Rule 702.b(1)A.i., whichever is later. Per Rule 702, Buyer will then provide any required additional financial assurance as soon as practicable but no later than 90 days from the Commission’s approval of the Form 3, Financial Assurance Plan.</p> <p>The Selling Operator must file a Form 3, Financial Assurance Plan within 10 business days of Form 9 approval –OR– by the applicable deadline as described in the Notice to Operators, Delayed Deadline for Rule 702.b(1)A.i., whichever is later. Per Rule 702, Seller will then provide any required additional financial assurance as soon as practicable but no later than 90 days from the Commission’s approval of the Form 3, Financial Assurance Plan.</p> <p>If either operator has already submitted their Form 3, please us the following comment when re-submitting their Form 3 per the COA referenced above:</p> <p>This Form 3 Document # ____ is submitted as a result of an approved Form 9 Transfer of Operatorship and it replaces Form 3 document # ____.</p> <p>Please reach out with any questions.</p> <p>Kindly, Deb</p>	11/15/2022

Total: 2 comment(s)