

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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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: [X] Intent [] Subsequent Intent # 0

OPERATOR INFORMATION

SELLING OPERATOR INFORMATION

OGCC Operator Number: 39560 Contact Name and Telephone: Paul Herring
Name of Operator: TOP OPERATING COMPANY Name: Paul Herring
Address: 3609 S WADSWORTH BLVD STE 340 Phone: (303) 727-9915
City: LAKEWOOD State: CO Zip: 80235 Email: paul.herring@topoperating.com

BUYING OPERATOR INFORMATION

OGCC Operator Number: 10547 Contact Name and Telephone: Theodore Pagano
Name of Operator: HELENA RESOURCES INC Name: Theodore Pagano
Address: 2960 SIMMS DR Phone: (970) 590-3944
City: LAKEWOOD State: CO Zip: 80215 Email: tapagano@helena-resources.com

TRANSFER INFO

Transfer Dates

Form 9 Intent - Anticipated Date of Transfer: 11/01/2022
Form 9 Subsequent - Effective Date of Transfer: s

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:

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

Buying Operator, Helena Resources, Inc., will submit financial assurance for this well with its initial Form 3 submittal due February 1, 2023.

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

Print Name: Jessica Donahue Email: jdonahue@ardorenvironmental.com

Signature: _____ Title: Compliance Specialist Date: 12/20/2022

Wells & Facilities Proposed for Transfer Summary

1	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	WELL	123-23006	278075	305462	HAYS #2	NENW	32	5N	65W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD	FEE	39560	TOP OPERATING COMPANY					
2	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	LOCATION	-	305462	305462	HAYS-65N65W #32NENW	NENW	32	5N	65W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		39560	TOP OPERATING COMPANY					
3	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	LOCATION	-	319419	319419	HAYS, THURMAN-65N65W #32NWNW	NWNW	32	5N	65W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		39560	TOP OPERATING COMPANY					
4	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	WELL	123-11229	243438	319419	HAYS, THURMAN #1	NWNW	32	5N	65W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD	FEE	39560	TOP OPERATING COMPANY					
5	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	OFF-LOCATION FLOWLINE	-	476990	319419	WELLHEAD LINE 32NWNW	NWNW	32	5N	65W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		39560	TOP OPERATING COMPANY					
6	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	OFF-LOCATION FLOWLINE	-	476991	305462	WELLHEAD LINE 32NENW	NENW	32	5N	65W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		39560	TOP OPERATING COMPANY					
7	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	LOCATION	-	319066	319066	RUNYAN 1	SESE	17	3N	68W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		39560	TOP OPERATING COMPANY					
8	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	WELL	123-10614	242823	319066	RUNYAN 1	SESE	17	3N	68W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD	FEE	39560	TOP OPERATING COMPANY					

Incidents Proposed for Transfer Summary

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Related Wells & Facilities Not Proposed for Transfer Summary

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Related Incidents Not Proposed for Transfer Summary

1	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>
	402868163	OPEN REMEDIATION PROJECT		39560	TOP OPERATING COMPANY
2	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>
	672500260	INSPECTION WITH CORRECTIVE ACTION	12/16/2016	39560	TOP OPERATING COMPANY
3	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>
	672500358	INSPECTION WITH CORRECTIVE ACTION	01/25/2017	39560	TOP OPERATING COMPANY
4	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>
	679700449	INSPECTION WITH CORRECTIVE ACTION	05/24/2017	39560	TOP OPERATING COMPANY
5	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>
	684900215	INSPECTION WITH CORRECTIVE ACTION	12/09/2015	39560	TOP OPERATING COMPANY
6	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>
	672500260	INSPECTION WITH CORRECTIVE ACTION	12/16/2016	39560	TOP OPERATING COMPANY
7	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>
	672500358	INSPECTION WITH CORRECTIVE ACTION	01/25/2017	39560	TOP OPERATING COMPANY
8	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>
	679700449	INSPECTION WITH CORRECTIVE ACTION	05/24/2017	39560	TOP OPERATING COMPANY
9	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>
	684900215	INSPECTION WITH CORRECTIVE ACTION	12/09/2015	39560	TOP OPERATING COMPANY

Attachment List

Att Doc Num	Name
2357783	CORRESPONDENCE
2357784	CORRESPONDENCE
403018204	Form 09 SUBMITTED
403081099	EDD-I-WELLS-FACILITIES-PROPOSED
403081119	EDD-I-RELATED-INCIDENTS-Not-PROP
403266183	FORM 9 INTENT ATTESTATION

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 resolved all issues and accepted the COAs. Form 9 approved.	05/12/2023
Financial Assurance	<p>I have reviewed the above captioned Form 9 Transfer. The transfer is ready for approval once both parties have accepted the COAs below.</p> <p>Assuming the other Form 9 requirements are met, all Form 9s shall now be passed with the following two COAs:</p> <p>The Buying Operator must file a Form 3, Financial Assurance Plan, within 10 business days of Form 9 approval. 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. 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>Please use the following comment when submitting the revised Form 3.</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>	05/05/2023

Total: 2 comment(s)