



#10842

State of Colorado
Energy & Carbon Management Commission



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

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ECMC

DESIGNATION OF AGENT

Any party acting as an agent of an owner(s) of the lease or well shall have a valid Form 1A on file with the Commission. Individual access to online form submission will not be activated until this form is received, via mail or fax, at the address above. This designation shall remain in effect until written notice is provided by the owner to terminate the agent or representative. Approved persons to submit documents as employees of the company should be listed on Form 1A, no agent information required.

Agent Company Name: Switchback Restoration LLC			
Address: 1660 Lincoln Street Suite 2200		City: Denver	State: CO Zip: 80264
A Principal Agent serves as the representative of the operator, to accept and be served with notices from the Energy & Carbon Management Commission, or from other persons authorized under the Oil and Gas Conservation Act of the State of Colorado. Furthermore, the Principal Agent agrees to immediately report in writing, all changes of address of the agent, and any termination of the agent's authority, and in the latter case, the designation of a new agent or agents shall be immediately made.			
Name of Principal Agent: Christopher Caskey	Signature of Principal Agent: 	Title of Principal Agent: Partner	Action: <input checked="" type="checkbox"/> Add <input type="checkbox"/> Modify <input type="checkbox"/> Delete
Phone: 720-421-2633	Fax:	Email: chris@deltabrick.com	

The below listed individuals are designated as representatives, authorized to sign and submit forms on behalf of the operator:

Print Name	Signature	Title	Action: <input type="checkbox"/> Add <input type="checkbox"/> Modify <input type="checkbox"/> Delete
Phone	Email	Forms Authorized to Submit (ALL or Form #s)	

Print Name	Signature	Title	Action: <input type="checkbox"/> Add <input type="checkbox"/> Modify <input type="checkbox"/> Delete
Phone	Email	Forms Authorized to Submit (ALL or Form #s)	

Print Name	Signature	Title	Action: <input type="checkbox"/> Add <input type="checkbox"/> Modify <input type="checkbox"/> Delete
Phone	Email	Forms Authorized to Submit (ALL or Form #s)	

Pursuant to the Rules and Regulations, and Rules of Practice and Procedure of the Energy & Carbon Management Commission of the State of Colorado, the below-signed producer, operator, transporter, refiner, gasoline or other extraction plant operator, or initial purchaser who is conducting oil and gas operations in the State of Colorado, does hereby designate the above-listed Agent Company and/or representative(s) as authorized to sign on behalf of the operator.

Authorizing Company Name: Switchback Restoration LLC		ECMC Operator Number: 10842	Approval Date:
Print Authorizing Name: Christopher Caskey	Authorizing Signature: 	Authorizing Title (must be an officer): Partner	