

FORM

12

Rev
02/20

State of Colorado

Energy & Carbon Management Commission

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



FOR ECMC USE ONLY

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Receive Date:

11/15/2024

GAS FACILITY REGISTRATION/CHANGE OF OPERATOR

Per Rule 313B.a and Rule 313B.b, a Form 12 is required to register a new Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility. Financial Assurance is required per Rule 711. Per Rule 313B.c, a Form 12 is required for an annual report of changes to a Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility. Per Rule 313B.d, a Form 12 is required to report the transfer of ownership of a Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility.

Purpose of Form: (Select one)

New Registration

Annual Report of Changes

Change of Operator

Name of Operator: SUMMIT DJ-S LLC

ECMC Operator Number: 10835 Suff:

One Call Participation (One box must be checked.)

In checking this box, the Submitting Operator hereby confirms Tier One membership in the Utility Notification Center of Colorado (CO 811) and participation in Colorado's One Call notification system. [Rule 1102.n.]

In checking this box, the Operator hereby certifies it has no underground facilities and is exempt from CO 811 membership. [Rule 1102.n. (2)]

Address: 910 LOUISIANA ST STE 4200

City: HOUSTON State: TX Zip: 77002

Contact Name: jerry castillo
First Name Last Name

Phone: 832 9306524 Email: jerry.castillo@summitmidstream.com

NON-Submitting Operator Information:

ECMC Number of Non-Submitting: 10390 Name of Non-Submitting: STERLING ENERGY INVESTMENTS LLC

Non-Submitting Operator is: Selling Operator Contact Name: Randy Burton

Title: Operations Non-Submitting Operator Contact Email: rburton@sterlingenergy.us

Name of Buying Operator: SUMMIT DJ-S LLC	Name of Selling Operator: STERLING ENERGY INVESTMENTS LLC
Buying Operator ECMC Number: 10835	Selling Operator ECMC Number: 10390
Print Name: jerry castillo	Print Name: Randy Burton
Signature:	Signature:
Title: Director	Title: Operations
Date: 1/1/2023	Date: 1/1/2023

Operator Comments:

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

SUMMITTED BY:

Signed: _____ Print Name: jerry castillo

Title: Director Email: jerry.castillo@summitmidstream.com Date: 11/15/2024

ECMC Approved:

Date:

FACILITY ID:	426344
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CONDITIONS OF APPROVAL, IF ANY LIST

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

Signature:

ATTACHMENT LIST

<u>Att Doc Num</u>	<u>Name</u>
404006044	RATIFICATION DOCUMENT

Total Attach: 1 Files