

State of Colorado
Energy & Carbon Management Commission

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



Document Number:

403812593

Receive Date:

06/10/2024

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 # 403791161

OPERATOR INFORMATION

SELLING OPERATOR INFORMATION

ECMC Operator Number: 10459 Contact Name and Telephone:
Name of Operator: EXTRACTION OIL & GAS INC Name: Nathan Bennett
Address: 555 17TH STREET SUITE 3700 Phone: (303) 312-8166
City: DENVER State: CO Zip: 80202 Email: nbennett@civiresources.com

BUYING OPERATOR INFORMATION

ECMC Operator Number: 10670 Contact Name and Telephone:
Name of Operator: BISON IV OPERATING LLC Name: Abigail Wenk
Address: 518 17TH STREET SUITE 1800 Phone: (303) 8026655
City: DENVER State: CO Zip: 80202 Email: awenk@bisonog.com

TRANSFER INFO

Transfer Dates

Form 9 Intent - Anticipated Date of Transfer: 05/29/2024
Form 9 Subsequent - Effective Date of Transfer: s05/29/2024

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

This Form 09 Subsequent is CONFIDENTIAL. The estimated amount of Financial Assurance contemplates the entirety of the transactions between Civitas (as Parent) and Bison.

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

Print Name: Abigail Wenk Email: awenk@bisonog.com

Signature: _____ Title: Corporate Secretary Date: 06/10/2024

Wells & Facilities Transferred Summary

1	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	TANK BATTERY	-	448674	419853	DF RANKCH PC NI BATTERY	NESE	9	11N	61W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		10459	EXTRACTION OIL & GAS INC					
2	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	TANK BATTERY	-	448673	421212	FABRIZIUS-LARI	NWSW	33	11N	61W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		10459	EXTRACTION OIL & GAS INC					
3	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	LOCATION	-	448675	448675	DF RANCH PC NI BATTERY LOCATION	NESE	9	11N	61W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		10459	EXTRACTION OIL & GAS INC					
4	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	LOCATION	-	448676	448676	HUNG-RASM TB LOCATION	SWNW	29	11N	61W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		10459	EXTRACTION OIL & GAS INC					
5	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	TANK BATTERY	-	448677	448676	HUNG-RASM BATTERY	SWNW	29	11N	61W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		10459	EXTRACTION OIL & GAS INC					
6	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	LOCATION	-	448678	448678	SHABLE TB LOCATION 30 -41 30-43	SENE	30	11N	61W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		10459	EXTRACTION OIL & GAS INC					
7	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	TANK BATTERY	-	448679	448678	SHABLE BATTERY 30-41 30-43	SENE	30	11N	61W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		10459	EXTRACTION OIL & GAS INC					
8	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	LOCATION	-	448680	448680	STATE PC GC BATTERY LOCATION 36-16	SESE	36	12N	62W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		10459	EXTRACTION OIL & GAS INC					
9	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng

	TANK BATTERY	-	448681	448680	STATE PC GC BATTERY 36-16	SESE	36	12N	62W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		10459	EXTRACTION OIL & GAS INC					
10	<u>Facility Type</u>	<u>API</u>	<u>Facility ID</u>	<u>Location ID</u>	<u>Facility Name</u>	<u>QtrQtr</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>
	LOCATION	-	461140	461140	RAY STATE 13-16	SWSW	16	11N	61W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		10459	EXTRACTION OIL & GAS INC					
11	<u>Facility Type</u>	<u>API</u>	<u>Facility ID</u>	<u>Location ID</u>	<u>Facility Name</u>	<u>QtrQtr</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>
	OFF-LOCATION FLOWLINE	-	461795	461586	WELLHEAD LINE 2SWSW	SWSW	2	11N	61W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		10459	EXTRACTION OIL & GAS INC					
12	<u>Facility Type</u>	<u>API</u>	<u>Facility ID</u>	<u>Location ID</u>	<u>Facility Name</u>	<u>QtrQtr</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>
	OFF-LOCATION FLOWLINE	-	462598	461771	WELLHEAD LINE	SENE	15	11N	61W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		10459	EXTRACTION OIL & GAS INC					
13	<u>Facility Type</u>	<u>API</u>	<u>Facility ID</u>	<u>Location ID</u>	<u>Facility Name</u>	<u>QtrQtr</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>
	OFF-LOCATION FLOWLINE	-	462597	461771	WELLHEAD LINE	SENE	15	11N	61W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		10459	EXTRACTION OIL & GAS INC					
14	<u>Facility Type</u>	<u>API</u>	<u>Facility ID</u>	<u>Location ID</u>	<u>Facility Name</u>	<u>QtrQtr</u>	<u>Sec</u>	<u>Twp</u>	<u>Rng</u>
	OFF-LOCATION FLOWLINE	-	462596	461771	WELLHEAD LINE	SENE	15	11N	61W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	WELD		10459	EXTRACTION OIL & GAS INC					

Incidents Transferred Summary

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Related Wells & Facilities Not Transferred Summary

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Related Incidents Not Transferred Summary

1	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>	<u>Compl. Resp. Op #</u>	<u>Compl. Resp. Op. Name</u>
	696303026	INSPECTION WITH CORRECTIVE ACTION	05/25/2023	10459	EXTRACTION OIL & GAS INC		
2	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>	<u>Compl. Resp. Op #</u>	<u>Compl. Resp. Op. Name</u>
	696303030	INSPECTION WITH CORRECTIVE ACTION	03/12/2021	10459	EXTRACTION OIL & GAS INC		
3	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>	<u>Compl. Resp. Op #</u>	<u>Compl. Resp. Op. Name</u>
	696305290	INSPECTION WITH CORRECTIVE ACTION	03/15/2021	10459	EXTRACTION OIL & GAS INC		
4	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>	<u>Compl. Resp. Op #</u>	<u>Compl. Resp. Op. Name</u>
	696302469	INSPECTION WITH CORRECTIVE ACTION	09/26/2023	10459	EXTRACTION OIL & GAS INC		
5	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>	<u>Compl. Resp. Op #</u>	<u>Compl. Resp. Op. Name</u>
	696305410	INSPECTION WITH CORRECTIVE ACTION	09/11/2020	10459	EXTRACTION OIL & GAS INC		
6	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>	<u>Compl. Resp. Op #</u>	<u>Compl. Resp. Op. Name</u>
	696303511	INSPECTION WITH CORRECTIVE ACTION	11/17/2023	10459	EXTRACTION OIL & GAS INC		
7	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>	<u>Compl. Resp. Op #</u>	<u>Compl. Resp. Op. Name</u>
	696305404	INSPECTION WITH CORRECTIVE ACTION	08/13/2021	10459	EXTRACTION OIL & GAS INC		
8	<u>Document Numbers</u>	<u>Incident Type</u>	<u>Incident Date</u>	<u>Current Op #</u>	<u>Current Op. Name</u>	<u>Compl. Resp. Op #</u>	<u>Compl. Resp. Op. Name</u>
	696304941	INSPECTION WITH CORRECTIVE ACTION	11/17/2023	100322	NOBLE ENERGY INC		

Wells & Facilities Proposed Not Transferred Summary

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Incidents Proposed Not Transferred Summary

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ATTACHMENT LIST

<u>Att Doc Num</u>	<u>Name</u>
403812593	Form 09 SUBMITTED
403819996	EDD-S-WELLS-FACILITIES-TRANSFERRED
403819997	EDD-S-RELATED-INCIDENTS-NOT-TRAN
403819998	BUYER NOTIFIED LOCAL GOVT ATTESTATION
403819999	FORM 9 SUBSEQUENT ATTESTATION

Total Attach: 5 Files

COA Type	Description
	The Operator must file an updated Form 3, Financial Assurance Plan, within 7 calendar days of Form 9 approval.
1 COA	

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)