

**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:**

**404116453**

**Receive Date:**

**12/19/2025**

**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 #                      0

**OPERATOR INFORMATION**

**SELLING OPERATOR INFORMATION**

ECMC Operator Number: <u>10066</u>	Contact Name and Telephone:
Name of Operator: <u>MATRIX PRODUCTION COMPANY</u>	Name: <u>Pat Thompson</u>
Address: <u>5725 COMMONWEALTH BLVD</u>	Phone: <u>(1) 2812651212</u>
City: <u>SUGAR LAND</u> State: <u>TX</u> Zip: <u>77479</u>	Email: <u>pthompson@matrix-companies.com</u>

**BUYING OPERATOR INFORMATION**

ECMC Operator Number: <u>7125</u>	Contact Name and Telephone:
Name of Operator: <u>BEEMAN OIL &amp; GAS INC</u>	Name: <u>Lisa Lawton</u>
Address: <u>13635 E 104TH AVENUE STE 400</u>	Phone: <u>(1) 9708464639</u>
City: <u>COMMERCE CITY</u> State: <u>CO</u> Zip: <u>80022</u>	Email: <u>lisa@beemanoil.com</u>

**TRANSFER INFO**

**Transfer Dates**

Form 9 Intent - Anticipated Date of Transfer: 04/01/2025

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: \$ 1,079,578

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.

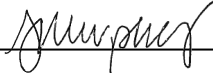
**SUBMITTAL**

**OPERATOR COMMENT AND SUBMITTAL**

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

Print Name: Pat Thompson Email: pthompson@matrix-companies.com

Title: Corporate Secretary Date: 12/19/2025

ECMC Approved:  Title: Director of ECMC Date: 12/22/2025

**Wells & Facilities Proposed for Transfer Summary**

1	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	UIC DISPOSAL	-	150915	315800	SULLIVAN, M C SWD 1	NWSW	24	3N	90W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	RIO BLANCO		10066	MATRIX PRODUCTION COMPANY					
2	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	WELL	103-09265	231594	315800	SULLIVAN, M C #SWD 1	NWSW	24	3N	90W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	RIO BLANCO		10066	MATRIX PRODUCTION COMPANY					
3	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	LOCATION	-	315800	315800	SULLIVAN, M C 3N90W/24NWSW		24	3N	90W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	RIO BLANCO		10066	MATRIX PRODUCTION COMPANY					
4	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	WELL	103-09258	231587	315799	TEXACO - SULLIVAN, MC (NCT-1)	SWNE	26	3N	90W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	RIO BLANCO		10066	MATRIX PRODUCTION COMPANY					
5	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	LOCATION	-	315799	315799	TEXACO - SULLIVAN, MC (NCT-1) 3N90W26SWNE	SWNE	26	3N	90W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	RIO BLANCO		10066	MATRIX PRODUCTION COMPANY					
6	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	WELL	103-09217	231546	315778	GOVT TRINITY (NCT-1)#1	NESE	27	3N	90W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	RIO BLANCO	FEE	10066	MATRIX PRODUCTION COMPANY					
7	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	LOCATION	-	315778	315778	GOVT TRINITY (NCT-1)#1 3N90W/27NESE	NESE	27	3N	90W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	RIO BLANCO		10066	MATRIX PRODUCTION COMPANY					
8	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng
	WELL	103-09250	231579	315795	SEELY LAND & LIVESTOCK #1	SWNW	26	3N	90W
	<u>County</u>	<u>Min.Owner. Type</u>	<u>Current Operator Num</u>	<u>Current Operator Name</u>					
	RIO BLANCO	FEE	10066	MATRIX PRODUCTION COMPANY					
9	Facility Type	API	Facility ID	Location ID	Facility Name	QtrQtr	Sec	Twp	Rng

	LOCATION	-	315795	315795	SEELY LAND & LIVESTOCK #1 3N90W/26SWNW	SWNW	26	3N	90W
	<u>County</u>	<u>Min.Owner. Type</u>		<u>Current Operator Num</u>	<u>Current Operator Name</u>				
	RIO BLANCO			10066	MATRIX PRODUCTION COMPANY				
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>
	WELL	081-06849	223483	313056	FEDERAL #19-1	NWNE	19	12N	100W
	<u>County</u>	<u>Min.Owner. Type</u>		<u>Current Operator Num</u>	<u>Current Operator Name</u>				
	MOFFAT			10066	MATRIX PRODUCTION COMPANY				
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>
	LOCATION	-	313056	313056	FEDERAL 12N100W/19NWNE	NWNE	19	12N	100W
	<u>County</u>	<u>Min.Owner. Type</u>		<u>Current Operator Num</u>	<u>Current Operator Name</u>				
	MOFFAT			10066	MATRIX PRODUCTION COMPANY				
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>
	LEASE	-	36990		FEDERAL 19-1	NWNE	19	12N	100W
	<u>County</u>	<u>Min.Owner. Type</u>		<u>Current Operator Num</u>	<u>Current Operator Name</u>				
	MOFFAT	FEE		10066	MATRIX PRODUCTION COMPANY				

**Incidents Proposed for Transfer Summary**

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**Related Wells & Facilities Not Proposed for Transfer Summary**

< No row provided >

**Related Incidents Not Proposed for Transfer Summary**

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**ATTACHMENT LIST**

<b>Att Doc Num</b>	<b>Name</b>
404116453	Form 09 SUBMITTED
404479900	EDD-I-WELLS-FACILITIES-PROPOSED
404480083	FORM 9 INTENT ATTESTATION

Total Attach: 3 Files

**COA Type****Description**

	Selling Operator to determine if a new Form 10 is required for any remaining operations. If required, File a Form 10 within 30 calendar days of the date of this approval.
	The SELLING Operator must file an updated Form 3, Financial Assurance Plan, within 7 calendar days of Form 9 approval. Selling Operator's Financial Assurance remains subject to Rule 706, and not eligible for release until Buyer's replacement Financial Assurance has been approved by ECMC Submission of a new Form 3 is required to un-map facilities from the submitted and approved surety instruments, and to reflect your updated financial assurance obligation after completion of transfer..
2 COAs	

## General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Financial Assurance	Buying and Selling Operators are to work collectively to ensure all Production is properly reported.	12/22/2025
Total: 1 comment(s)		