

State of Colorado Oil and Gas Conservation Commission

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



OGCC RECEPTION

Receive Date: 08/14/2018

Document Number: 401733700

CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR

This form is to be used for Certification of Clearance to transport product off lease. A Form 10 shall be filed for a well within 30 days of first production or a change of transporter/gatherer. A Form 10 shall be filed within 15 days of a change or transfer of ownership of a well, location, pit or facility. Documentation for ratification of sale or transfer of ownership must be attached for Change of Operator. It is the Operator's responsibility to mail approved copies to the Transporter and/or Gatherer for each well listed. This form is not used for well name or well status changes. For more information, visit www.http://ogcc.state.co.us

OGCC Operator Number: 100264 Contact Person: Sephra Baca
Company Name: XTO ENERGY INC Phone: (817) 3785584
Address: 600 E EXCHANGE AVE Fax: ()
City: FORTH WORTH State: TX Zip: 76164 Email: sephra_baca@xtoenergy.com

Operator Financial Assurance: [X] Blanket Surety ID: 2010-0210 Individual Surety ID: see listing by individual well

[] New Well Cert of Clearance [X] Change of Operator [] Add/Change Transporter or Gatherer

Effective Date of Change Below 02/23/2018 Form is being submitted by: Buyer
Is the Buying Operator a Tier One member of the Utility Notification Center of Colorado (UNCC) that participates in Colorado's One Call notification system? Yes [X] No []
Non-Submitting Operator Information:
OGCC Number of NON-Submitting 10172 Name of NON-Submitting BOPCO LP
NON-submitting Operator is Seller Contact Name Edwin S. Ryan Jr. Title: VP for BOPCO, LLC
NON-submitting Operator Contact Email: win_ryan@xtoenergy.com

Add/Change Transporter or Gatherer

[X] Add [] Delete Product: [] Oil [X] Gas
OGCC Transporter No: 64581 Suffix:
Trans./Gatherer Name: NORTHWEST PIPELINE CORP
Address: 295 CHIPETA WAY City: SALT LAKE CITY State: UT Zip: 84108
Phone: () Email Contact:

[X] Add [] Delete Product: [X] Oil [] Gas
OGCC Transporter No: 16700 Suffix:
Trans./Gatherer Name: CHEVRON USA INC
Address: 6301 DEAUVILLE BLVD City: MIDLAND State: TX Zip: 79706
Phone: () Email Contact:

Remark:

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete. The transporter(s)/gatherer(s) is (are) authorized to transport the oil and/or gas produced from the listed well(s) and that this authorization will be valid until further notice to the transporter named herein or until cancelled by the Colorado Oil and Gas Conservation Commission.

SUBMITTED BY:

Signed: Title: Regulatory Analyst Print Name: Baca, Sephra Email: sephra_baca@xtoenergy.com Date: 08/14/2018

CHANGE OF OPERATOR:

Name of Buying Operator:

Name of Selling Operator:

XTO ENERGY INC

BOPCO LP

Signature: _____ Date: 02/23/2018

Signature: _____ Date: 02/23/2018

Print Name: Baca, Sephra Title: Regulatory Analyst

Print Name: Edwin S. Ryan Jr. Title: VP for BOPCO, LLC

COGCC Approved: _____

Title: _____

Date: _____

**State of Colorado
Oil and Gas Conservation Commission**

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CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 100264
Name of Operator: XTO ENERGY INC

FOR OGCC USE ONLY

CENTRALIZED EP WASTE MGMT FAC: 0	SERVICE SITE: 0	LOCATION: 0	OFF-LOCATION FLOWLINE: 0
UIC WATER TRANSFER STATION: 0	TANK BATTERY: 0	PIPELINE: 0	DOMESTIC TAP: 0
UIC SIMULTANEOUS DISPOSAL: 0	UIC DISPOSAL: 0	WELL: 4	CRUDE OIL TRANSFER LINE: 0
UIC ENHANCED RECOVERY: 0	LAND APPLICATION SITE: 0	PIT: 0	PRODUCE WATER TRANSFER SYSTEM: 0

Total Approved: 0 Total out of Total Total Submitted: 4 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			

Total Deleted: 0 Total out of Total Total Submitted: 4 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			

Total Pending: 4 Total out of Total Total Submitted: 4 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	WELL	103-11200	294599	316666	YELLOW CREEK	32-12-1	SWNW/32/1N/98		
2	WELL	103-11202	294601	316668	YELLOW CREEK	4-24-1	SENW/4/1S/98W		
3	WELL	103-11205	294604	316671	Yellow Creek Federal	28-23-1	NESW/28/1N/98W		
4	WELL	103-11206	294605	316672	YELLOW CREEK	28-44-1	SESE/28/1N/98W		