Image# 201903289145968146				PAGE 1/5
FEC FORM 1	STATEMEN ORGANIZ		Off	ice Use Only
1. NAME OF	(Check if name	Example: If typing, type		
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
Newfield Explora	ation Company Po	litical Action Con	nmittee (NE	WFIELD PAC)
ADDRESS (number and street)	4 Waterway Square Place			
(Check if address	Suite 100			
is changed)	The Woodlands		TX 7738	 BO
			STATE ▲	− ZIP CODE ▲
COMMITTEE'S E-MAIL ADDR				
(Check if address is changed)	shea.loper@encana.co)m 		
	Optional Second E-Mail Add	dress		
	monica.spencer@en	cana.com		
COMMITTEE'S WEB PAGE A (Check if address is changed)	ADDRESS (URL)			
2. DATE 03 /	28 / Y Y Y Y 2019			
3. FEC IDENTIFICATION	NUMBER ► C C	00443523		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have examined	this Statement and to the best	of my knowledge and belief i	t is true, correct and	complete.
Type or Print Name of Treasu	Irer Loper, Shea, , Mr.,			
Signature of Treasurer	per, Shea, , Mr.,	[Electronically Filed]	Date 03	D D / Y Y Y Y 28 / 2019
NOTE: Submission of false, erro	oneous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing ON SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information	below.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee information below.)	e. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Office Sought: House Senate Presi	Stateident
(c) This committee supports/opposes only one candidate, and is NOT an authorized commi	ittee.
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Par
Political Action Committee (PAC):	
(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
Corporation Corporation w/o Capital Stock	Labor Organization
Membership Organization Trade Association	Cooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separation of the support of	arate segregated fund or par
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceer committees/organizations, at least one of which is an authorized committee of a federal can	
(h) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, none of which is an authorized committee of a federal candidate.	
Committees Participating in Joint Fundraiser	
1 FEC ID number C	
2 FEC ID number C	
3 FEC ID number C	
4	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Newfield Exploration Company Political Action Committee (NEWFIELD PAC)

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

N	ewfield Explor	ration Company									
	Mailing Address	4 Waterway Square Place, Suite 100									
		The Woodlands	TX 77	380 							
		CITY	STATE	ZIP CODE							
Relationship: 🗴 Connected Organization 🚺 Affiliated Committee 🚺 Joint Fundraising Representative 🚺 Leadership PAC Sponsor											
7.	7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.										

Loper, She	ι, , Mr.,	
Full Name		
Mailing Address	370 17th St	
	Suite 1700	
	Denver CO 80202 - - - -	
Title or Position	CITY STATE ZIP CODE	
Treasurer	Telephone number 720 876 5812	

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Loper, Shea, , Mr.,
Mailing Address	370 17th St
	Suite 1700
	Denver CO 80202 - <th< td=""></th<>
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 720 876 5812

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FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent			1		1																					
Mailing Address																										
		L																								
]-[
							С	ITY	/								STA	ΤE				ZIF	Р С	OD	Ε	
Title or Position																										
												Tele	eph	one	e ni	umt	ber] – [

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Wells F	-argo		
Mailing Address	1000 Louisiana St.		
	Houston		77002
	CITY	STATE	ZIP CODE
Name of Bank, Depository, e	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint	Fundraising	Participant:
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1. [FEC ID number	С
2.	FEC ID number	С
3.	FEC ID number	С
4.	FEC ID number	С

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor ENCANA OIL & GAS (USA) INC. PAC

1				
Mailing Address	370 17TH STREET, SUITE 1	700		
	DENVER			80202
Relationship:	CITY	∕▲	STATE 🔺	ZIP CODE
Connected C	Drganization X Affiliated Co	ommittee Joi	nt Fundraising Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																														
Mailing Address	l																													
	l																													
																												- [
TITLE OR POSITION	TITLE OR POSITION ▼ CITY ▲															S	TAT	E				ZIP	С	DD	E					
														hor	ne I	Nur	nbe	er			·L				- L					

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.																															
Mailing Address																															
	L																														
																						L						- [_			
	CITY 🔺													STATE A								ZIP CODE									