

RAILROAD COMMISSION OF TEXAS
OIL AND GAS DIVISION

VICTOR G. CARRILLO, CHAIRMAN
ELIZABETH A. JONES,
COMMISSIONER
MICHAEL L. WILLIAMS,
COMMISSIONER



1701 N. CONGRESS

CAPITOL STATION - P.O. BOX 12967 AUSTIN, TEXAS 78711-2967

08/09/2010

FORM P-4 NOTIFICATION

(OIL LEASE)

OPERATOR

PECOS OPERATING COMPANY, LLC
400 W ILLINOIS AVE SUITE 1210
MIDLAND TX 79701

* * * * *
THE FOLLOWING RRC FORM P-4 "PRODUCER'S CERTIFICATE OF COMPLIANCE AND
AUTHORIZATION TO TRANSPORT OIL AND/OR CASINGHEAD GAS FROM AN OIL LEASE
OR GAS AND/OR CONDENSATE FROM A GAS WELL" FILED BY:

PECOS OPERATING COMPANY, LLC
400 W ILLINOIS AVE SUITE 1210
MIDLAND TX 79701

P-5 NO. 649245
PHONE: (432) 620-8480

HAS BEEN APPROVED ON AUGUST 9, 2010 .

* * * * *

DISTRICT : 08

FIELD NAME: MARTIN (CONSOLIDATED)

COUNTY :

FIELD NO. : 57774 275

EFF. DATE: 06/01/2010

LEASE NAME: GOLDSMITH, N. SAN ANDRES CONS. U

LEASE NO : 40071

FOR THE PURPOSE OF: OIL FIELD TRANSFER

NAMED ON THE P-4:

TYPE	NAME	CODE	PRODUCT	% OF TAKE
GATHERER	ENTERPRISE CRUDE OIL LLC	ENTCO	OIL	100.000
GATHERER	DCP MIDSTREAM, LP	DCPMI	CAS	100.000
PURCHASER	DCP MIDSTREAM, LP	195918	CAS	100.000

SYSTEM: 0001 DCP MIDSTREAM, LP

PLEASE NOTIFY THE AUSTIN OFFICE OF THE RAILROAD COMMISSION IF ANY OF THE
ABOVE INFORMATION IS NOT CORRECT.

Dorsey V. Twidwell, Jr.

APPROVED BY

DORSEY V. TWIDWELL JR.

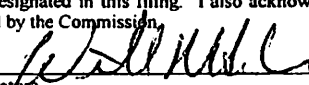
ASST. DIRECTOR, ADMN. COMPLIANCE
OIL AND GAS DIVISION

CC: RRC-08, AND ALL NAMED PARTIES

**CERTIFICATE OF COMPLIANCE
AND TRANSPORTATION AUTHORITY**

P-4
5/02—www.1

READ INSTRUCTIONS ON BACK

1. Field name exactly as shown on proration schedule Martin (Consolidated)		2. Lease name as shown on proration schedule Goldsmith, N. San Andres Cons.U					
3. Current operator name exactly as shown on P-5 Organization Report Pecos Operating Company, LLC		4. Operator P-5 no. 649245	5. Oil Lse/Gas ID no.	6. County Andrews	7. RRC district 8		
8. Operator address including city, state, and zip code 400 W. Illinois Ave., Suite 1210 Midland, TX 79701		9. Well no(s) (see instruction E) All					
		10. Classification <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)			11. Effective Date 6-1-10		
12. Purpose of Filing. (Complete section a or b below.) (See instructions B and G) a. Change of: <input type="checkbox"/> operator <input type="checkbox"/> oil or condensate gatherer <input type="checkbox"/> gas gatherer <input type="checkbox"/> gas purchaser <input type="checkbox"/> gas purchaser system code <input checked="" type="checkbox"/> field name from: Goldsmith, N (San Andres, Con.) <input type="checkbox"/> lease name from: _____ OR b. New RRC Number for: <input checked="" type="checkbox"/> oil lease <input type="checkbox"/> gas well Due to: <input type="checkbox"/> new completion or recompletion <input type="checkbox"/> reclass oil to gas <input type="checkbox"/> reclass gas to oil <input checked="" type="checkbox"/> other well (specify) Previous lease # 22681 <input checked="" type="checkbox"/> consolidation, unitization, or subdivision (oil lease only)							
13. Authorized GAS WELL GAS or CASINGHEAD GAS Gatherer(s) and/or Purchaser(s). (See instruction G).							
Gatherer	Purchaser	Name of GAS WELL GAS or CASINGHEAD GAS Gatherer(s) or Purchaser(s) As Indicated in Columns to the Left (Attach an additional sheet in same format if more space is needed)			Purchaser's RRC Assigned System Code	Percent of Take	Full-well stream
x	x	DCP Midstream, LP			0001	100%	
14. Authorized OIL or CONDENSATE Gatherer(s). (See instruction G).							
Name of OIL or CONDENSATE Gatherer(s) - List Highest Volume Gatherer First (Attach an additional sheet in same format if more space is needed)					Percent of Take	RRC USE ONLY Reviewer's initials: _____ Approval date: _____	
Enterprise Crude Oil, LLC					100%		
15. PREVIOUS OPERATOR CERTIFICATION FOR CHANGE OF OPERATOR P-4 FILING. Being the PREVIOUS OPERATOR, I certify that operating responsibility for the well(s) designated in this filing, located on the subject lease has been transferred in its entirety to the above named Current Operator. I understand, as Previous Operator, that designation of the above named operator as Current Operator is not effective until this certificate is approved by the Commission.							
Name of Previous Operator _____ Name (print) _____ Title _____				Signature _____ <input type="checkbox"/> Authorized Employee of previous operator <input type="checkbox"/> Authorized agent of previous operator (see instruction G) Date _____ Phone with area code _____			
16. CURRENT OPERATOR CERTIFICATION. By signing this certificate as the Current Operator, I certify that all statements on this form are true and correct and I acknowledge responsibility for the regulatory compliance of the subject lease including plugging of well(s) pursuant to Rule 14. I further acknowledge that I assume responsibility for the physical operation, control, and proper plugging of each well designated in this filing. I also acknowledge that I will remain designated as the Current Operator until a new certificate designating a new Current Operator is approved by the Commission.							
William R. Huck Name (print) _____ Manager _____ Title _____ sherma@pecoscompanies.com E-mail Address (optional)				Signature  _____ <input checked="" type="checkbox"/> Authorized Employee of current operator <input type="checkbox"/> Authorized agent of current operator (see instruction G) 7-13-10 Date _____ (432) 620-8480 Phone with area code			