

RAILROAD COMMISSION OF TEXAS
OIL AND GAS DIVISION

ELIZABETH A. JONES, CHAIRMAN
DAVID PORTER,
COMMISSIONER



GIL BUJANO, P.E.
DEPUTY DIRECTOR, O&G DIVISION

1701 N. CONGRESS

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

04/06/2011

FORM P-4 NOTIFICATION (OIL LEASE)

OPERATOR

TREY RESOURCES INC.
P O BOX 50272
MIDLAND TX 79710

* * * * *
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:

TREY RESOURCES INC.
P O BOX 50272
MIDLAND TX 79710

P-5 NO. 868529
PHONE: (432) 570-6898

HAS BEEN APPROVED ON APRIL 6, 2011 .

* * * * *

DISTRICT : 08
COUNTY : ANDREWS
EFF. DATE: 04/01/2011

FIELD NAME: SHAFTER LAKE (SAN ANDRES)
FIELD NO. : 82570 500
LEASE NAME: UNIVERSITY '14'
LEASE NO : 39004

FOR THE PURPOSE OF: CHANGE OF OPERATOR

PREVIOUS OPERATOR: NRPC OPERATING II, LLC

P-5 NO: 615869

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.

Gil Bujano

APPROVED BY
GIL BUJANO, P.E.
DEPUTY DIRECTOR, O&G DIVISION
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 SHAFTER LAKE(SAN ANDRES)		2. Lease name as shown on proration schedule UNIVERSITY 14					
3. Current operator name exactly as shown on P-5 Organization Report TREY RESOURCES INC.		4. Operator P-5 no. 868529	5. Oil Lse/Gas ID no. 39004	6. County ANDREWS	7. RRC district 8		
8. Operator address including city, state, and zip code P.O. BOX 50272 MIDLAND, TX 79710		9. Well no(s) (see instruction E)					
		10. Classification <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)			11. Effective Date 04012011		
12. Purpose of Filing. (Complete section a or b below.) (See instructions B and G) a. Change of: <input checked="" 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 type="checkbox"/> field name from: _____ <input type="checkbox"/> lease name from: _____ OR b. New RRC Number for: <input type="checkbox"/> oil lease <input type="checkbox"/> gas well <input type="checkbox"/> other well (specify) _____ Due to: <input type="checkbox"/> new completion or recompletion <input type="checkbox"/> reclass oil to gas <input type="checkbox"/> reclass gas to oil <input 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			001	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.							
NRPC OPERATING II, LLC Name of Previous Operator Robert B. Pullen Name (print) Dr. Vice President Title							
Signature [Signature] <input checked="" type="checkbox"/> Authorized Employee of previous operator <input type="checkbox"/> Authorized agent of previous operator (see instruction G) 3/30/11 Date (602) 28-4753 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.							
David M Thomas III Name (print) President Title							
Signature [Signature] <input checked="" type="checkbox"/> Authorized Employee of current operator <input type="checkbox"/> Authorized agent of current operator (see instruction G) 4/1/2011 Date (432) 570-6898 ext 303 Phone with area code							
E-mail Address (optional)							