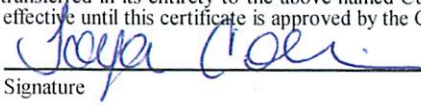



CERTIFICATE OF COMPLIANCE
AND TRANSPORTATION AUTHORITY

READ INSTRUCTIONS ON BACK

P-4

5/02
EAG0502

1. Field name exactly as shown on proration schedule Block 31 (Devonian)		2. Lease name as shown on proration schedule Block 31 Unit					
3. Current operator name exactly as shown on P-5 Organization Report OXY USA Inc		4. Operator P-5 no. 630591	5. Oil Lse/Gas ID no. 00442	6. County CRANE	7. RRC district 8		
8. Operator address including city, state, and zip code P.O. Box 4294 HOUSTON, TEXAS 77210-4294		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 11/01/2010			
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 checked="" type="checkbox"/> gas gatherer <input checked="" type="checkbox"/> gas purchaser <input checked="" 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	Occidental Energy Marketing Inc.			0001	100%	
X		Oxy USA Inc.				100%	
14. Authorized OIL or CONDENSATE Gatherer(s). (See instruction G).						RRC USE ONLY	
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	Reviewer's initials: _____	
Enterprise Crude Oil LLC					100%	Approval date: _____	
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.							
BP America Production Co.					 Signature		
Name of Previous Operator							
Toya Colvin							
Name (print)					<input checked="" type="checkbox"/> Authorized Employee of previous operator <input type="checkbox"/> Authorized agent of previous operator (see instruction G)		
Regulatory Analyst					11/01/2010 281-366-7148		
Title					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.							
Elizabeth Bush-Ivie					 Signature		
ame (print)							
Regulatory Team Leader							
Title					<input checked="" type="checkbox"/> Authorized Employee of current operator <input type="checkbox"/> Authorized agent of current operator (see instruction G)		
E-mail Address (optional)					11/4/10 713-366-5303		
					Date Phone with area code		