

RAILROAD COMMISSION OF TEXAS
OIL AND GAS DIVISION

BARRY T. SMITHERMAN, CHAIRMAN
DAVID PORTER, COMMISSIONER

RECEIVED

DEC 17 2012



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

1701 N. CONGRESS

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

12/11/2012

FORM P-4 NOTIFICATION

(OIL LEASE)

OPERATOR

BEACH EXPLORATION, INC.
800 N MARIENFIELD STE 200
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:

BEACH EXPLORATION, INC.
800 N MARIENFIELD STE 200
MIDLAND TX 79701

P-5 NO. 058915
PHONE: (432) 683-6226

HAS BEEN APPROVED ON DECEMBER 11, 2012 .

* * * * *

DISTRICT : 7C
COUNTY : CROCKETT
EFF. DATE: 12/01/2012

FIELD NAME: BOUSCAREN (STRAWN)
FIELD NO. : 10827 750
LEASE NAME: UNIVERSITY 14-1
LEASE NO : 16314

FOR THE PURPOSE OF: CHANGE OF GATHERER, CHANGE OF PURCHASER,
CHANGE OF OPERATOR
PREVIOUS OPERATOR: OXY USA INC.

P-5 NO: 630591

NAMED ON THE P-4:

TYPE	NAME	CODE	PRODUCT	% OF TAKE
------	------	------	---------	-----------

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.
DIRECTOR, O&G DIVISION
OIL AND GAS DIVISION

CC: RRC-7C, 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 BOUSCAREN (STRAWN)		2. Lease name as shown on proration schedule UNIVERSITY 14-1					
3. Current operator name exactly as shown on P-5 Organization Report BEACH EXPLORATION, INC.		4. Operator P-5 no. 058915	5. Oil Lse/Gas ID no. 16314	6. County CROCKETT	7. RRC district 7C		
8. Operator address including city, state, and zip code 800 N. MARIENFIELD, STE. 200 MIDLAND, TX 79701		9. Well no(s) (see instruction E) <div style="text-align: center; font-size: 1.2em;">1</div>					
		10. Classification <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)			11. Effective Date 12/01/12		
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 <div style="margin-left: 20px;"><input type="checkbox"/> field name from: _____ <input type="checkbox"/> lease name from: _____</div> 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 <i>(Attach an additional sheet in same format if more space is needed)</i>			Purchaser's RRC Assigned System Code	Percent of Take	Full-well stream
14. Authorized OIL or CONDENSATE Gatherer(s). (See instruction G).							
Name of OIL or CONDENSATE Gatherer(s) - List Highest Volume Gatherer First <i>(Attach an additional sheet in same format if more space is needed)</i>					Percent of Take	RRC USE ONLY	
						Reviewer's initials: _____	
						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.							
OXY USA INC. Name of Previous Operator					<div style="text-align: center;"> Signature</div>		
BEV HATFIELD Name (print)					<input checked="" type="checkbox"/> Authorized Employee of previous operator <input type="checkbox"/> Authorized agent of previous operator (see instruction G)		
REGULATORY ADVISOR Title					<div style="display: flex; justify-content: space-between;"><div>Date 12-03-12</div><div>Phone with area code (713) 350-4982</div></div>		
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.							
ROBERT N. HINSON Name (print)					<div style="text-align: center;"> Signature</div>		
VICE PRESIDENT 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)					<div style="display: flex; justify-content: space-between;"><div>Date</div><div>Phone with area code (432) 683-6226</div></div>		