RAILROAD COMMISSION OF TEXAS
Oil and Gas Division
PO Box 12967
Austin TX 78711-2967
www.rrc.state.tx.us

CERTIFICATE OF COMPLIANCE AND TRANSPORTATION AUTHORITY

READ INSTRUCTIONS ON BACK

P-4
5/02
www-1

1. Field name exactly as shown on proration schedule	2. Lease name as shown on proration schedule			
TAYLOR LINK W. (SAN ANDRES)	UNIVERSITY "S"			
3. Current operator name exactly as shown on P-5 Organization Report	4. Operator P-5 no.	5. Oil Lse/Gas ID no.	6. County	7. RRC district
ASPEN OPERATING COMPANY, L.L.C.	035430	30486	PECOS	08

8. Operator address including city, state, and zip code
801 CHERRY STREET, STE 810 UNIT 23
FORT WORTH, TX 76102

9. Well no(s) *(see instruction E)*
ALL #143-P, 144-P, 129-I

10. Classification
[X] Oil [ ] Gas [ ] Other *(see instruction A)*

11. Effective Date
04/27/2011

12. Purpose of Filing. (Complete section a or b below.) *(See instructions B and G)*

a. Change of: [X] operator [ ] oil or condensate gatherer [ ] gas gatherer [ ] gas purchaser [ ] gas purchaser system code
[ ] field name from: _____
[ ] lease name from: _____

— OR —

b. New RRC Number for: [ ] oil lease [ ] gas well [ ] other well (specify)_____
Due to: [ ] new completion or recompletion [ ] reclass oil to gas [ ] reclass gas to oil [ ] 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

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
PLAINS MARKETING L.P.	100

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.

PHARAOH OIL & GAS, INC.
Name of Previous Operator

Gary O. Bolen
Signature

Gary O. Bolen
Name (print)

[X] Authorized Employee of previous operator
[ ] Authorized agent of previous operator *(see instruction G)*

CEO
Title

4-27-2011
Date

432-770-5504
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.

STEVEN E. BAKER
Name (print)

Signature

PRESIDENT
Title

[X] Authorized Employee of current operator
[ ] Authorized agent of current operator *(see instruction G)*

E-mail Address (optional)

04/27/11
Date

817-882-9063
Phone with area code