

**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 UNIVERSITY 53 (CANYON)		2. Lease name as shown on proration schedule UNIVERSITY "15"			
3. Current operator name exactly as shown on P-5 Organization Report TOC ENERGY RESOURCES, LLC		4. Operator P-5 no. 860965	5. Oil Lse/Gas ID no. 120155	6. County SCHLEICHER	7. RRC district 7C
8. Operator address including city, state, and zip code 777 Main St, Suite 1195 Fort Worth, Texas 76102		9. Well no(s) (see instruction E) 1			
		10. Classification <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)		11. Effective Date 5-1-19	
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	TARGA MIDSTREAM SERVICES	0040	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
SUNOCO PTNRS. MKTG.&TERMINALS LP	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.

UNIT PETROLEUM COMPANY

Name of Previous Operator

David P. Lawrence
Name (print)
Chief Landman

Signature

☐ Authorized Employee of previous operator

☒ Authorized agent of previous operator (see instruction G)

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.

Jim Murphy

Name (print)

Managing Member

Title

Signature

☒ Authorized Employee of current operator

☐ Authorized agent of current operator (see instruction G)

5-1-19

Date

(817) 348-0528

Phone with area code

E-mail Address (optional)