

RAILROAD COMMISSION OF TEXAS  
OIL AND GAS DIVISION

CHRISTI CRADDICK, CHAIRMAN  
RYAN SITTON, COMMISSIONER  
WAYNE CHRISTIAN, COMMISSIONER



LORI WROTENBERY  
DIRECTOR, O&G DIVISION

1701 N. CONGRESS

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

07/14/2017  
FORM P-4 NOTIFICATION (GAS WELL)

OPERATOR

CAMBRIAN MANAGEMENT, LTD.  
PO BOX 272  
MIDLAND TX 79702

\* \* \* \* \*  
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:

CAMBRIAN MANAGEMENT, LTD.  
PO BOX 272  
MIDLAND TX 79702

P-5 NO. 126758  
PHONE: (432) 620-9181

HAS BEEN APPROVED ON JULY 13, 2017 .

\* \* \* \* \*

DISTRICT : 7C  
COUNTY : UPTON  
EFF. DATE: 06/01/2017

FIELD NAME: BLOCK 4 (DEVONIAN)  
FIELD NO. : 09144 200  
LEASE NAME: UNIVERSITY 4 "9" H  
RRC IDENT : 185597 WELL NO. : 1

FOR THE PURPOSE OF: CHANGE OF OPERATOR

PREVIOUS OPERATOR: NEARBURG PRODUCING COMPANY P-5 NO: 601738

NAMED ON THE P-4:

| TYPE      | NAME                                 | CODE   | PRODUCT | % OF TAKE |
|-----------|--------------------------------------|--------|---------|-----------|
| GATHERER  | ENERGY TRANSFER COMPANY              | ENETR  | GAS     | 100.000   |
| PURCHASER | ENERGY TRANSFER COMPANY              | 252017 | GAS     | 100.000   |
|           | SYSTEM: 0001 ENERGY TRANSFER COMPANY |        |         |           |
| GATHERER  | ENTERPRISE CRUDE OIL LLC             | ENTCO  | COND    | 100.000   |

PLEASE NOTIFY THE AUSTIN OFFICE OF THE RAILROAD COMMISSION IF ANY OF THE  
ABOVE INFORMATION IS NOT CORRECT.

APPROVED BY  
LORI WROTENBERY  
DIRECTOR, O&G DIVISION  
OIL AND GAS DIVISION

CC: RRC-7C, AND ALL NAMED PARTIES

READ INSTRUCTIONS ON BACK

|  |           |  |  |   |   |  |                     |
|--|-----------|--|--|---|---|--|---------------------|
| 1. Field name exactly as shown on proration schedule<br><b>Block 4 (Devonian)</b>  |           | 2. Lease name as shown on proration schedule<br><b>University 4 "9" H</b>  |  |   |   |  |                     |
| 3. Current operator name exactly as shown on P-5 Organization Report<br><b>Cambrian Management, Ltd.</b>   |           | 4. Operator P-5 no.<br><b>126758</b>   | 5. Oil Lse/Gas ID no.<br><b>185597</b> | 6. County<br><b>Upton</b>   | 7. RRC district<br><b>7C</b>                  |  |                     |
| 8. Operator address including city, state, and zip code<br><b>PO Box 272<br/>Midland, TX 79702</b>   |           | 9. Well no(s) (see instruction E)<br><div style="text-align: center; font-size: 1.2em;"><b>1</b></div>   |  |   |   |  |                     |
|  |           | 10. Classification<br><input type="checkbox"/> Oil <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)                                    |  | 11. Effective Date<br><b>06/01/17</b>   |   |  |                     |
| 12. Purpose of Filing. (Complete section a or b below.) (See instructions B and G)<br><b>a. Change of:</b> <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<br><div style="margin-left: 40px;"><input type="checkbox"/> field name from: _____<br/><input type="checkbox"/> lease name from: _____</div> <b>OR</b><br><b>b. New RRC Number for:</b> <input type="checkbox"/> oil lease <input type="checkbox"/> gas well <input type="checkbox"/> other well (specify) _____ <b>Due to:</b> <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<br>Gatherer(s) or Purchaser(s) As Indicated in Columns to the Left<br>(Attach an additional sheet in same format if more space is needed) |  |   | Purchaser's<br>RRC<br>Assigned<br>System Code | Percent of<br>Take                                     | Full-well<br>stream |
| X  |           | Energy Transfer Company  |  |   |   | 100  |                     |
|  | X         | Energy Transfer Company  |  |   | 0001  | 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<br>(Attach an additional sheet in same format if more space is needed)  |           |  |  |   | Percent of<br>Take                            | Reviewer's initials: _____<br><br>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.  |           |  |  |   |   |  |                     |
| Nearburg Producing Company<br>Name of Previous Operator<br><br>Duane A Davis<br>Name (print)<br><br>COO/CFO<br>Title   |           |  |  | Signature _____<br><br><input checked="" type="checkbox"/> Authorized Employee of previous operator <input type="checkbox"/> Authorized agent of previous operator (see instruction G)<br><br>06/01/17 Date (214) 739-1778 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.   |           |  |  |   |   |  |                     |
| Denise Jones<br>Name (print)<br><br>Regulatory Analyst<br>Title<br><br>djones@cambrianmgmt.com<br>E-mail Address (optional)  |           |  |  | Signature _____<br><br><input checked="" type="checkbox"/> Authorized Employee of current operator <input type="checkbox"/> Authorized agent of current operator (see instruction G)<br><br>06/01/17 Date (432) 620-9181 Phone with area code   |   |  |                     |