

APR 23 2014

CERTIFICATE OF COMPLIANCE
AND TRANSPORTATION AUTHORITY

P-4

5/02—WWW-1

READ INSTRUCTIONS ON BACK

O&G

Midland

1. Field name exactly as shown on proration schedule BLOCK 20 (BONE SPRING)		2. Lease name as shown on proration schedule UNIVERSITY 20-12				
3. Current operator name exactly as shown on P-5 Organization Report Wycoco Oil & Gas LLC		4. Operator P-5 no. 945368	5. Oil Lse/Gas ID no. 34773	6. County WINKLER	7. RRC district 08	
8. Operator address including city, state, and zip code PO Box 12367 Odessa, Texas 79768-2367		9. Well no(s) (see instruction E) 1			11. Effective Date 4-1-2014	
12. Purpose of Filing. (Complete section a or b below.) (See instructions B and G)		10. Classification <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)				
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		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).		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
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Regency Marketing L.P.	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 (Attach an additional sheet in same format if more space is needed)	Percent of Take	Reviewer's initials: _____	Approval date: _____
Plains Marketing L.P.	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.

OXY USA INC.
Name of Previous Operator

DONNA MAHAN
Name (print)

REGULATORY COORDINATOR
Title

Signature: *Donna Mahan*

Authorized Employee of previous operator Authorized agent of previous operator (see instruction G)

04/07/14 Date (713) 215-7649 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.

Ricky Mitchell
Name (print)

Agent
Title

wycocoilgas@yahoo.com
E-mail Address (optional)

Signature: *Ricky Mitchell*

Authorized Employee of current operator Authorized agent of current operator (see instruction G)

4-22-14 Date 432-5566579 Phone with area code