



# RAILROAD COMMISSION OF TEXAS

## OIL AND GAS DIVISION

04/03/2013

Sandridge Expl. And Prod., LLC  
123 Robert S Kerr Ave  
Oklahoma City OK 73102-6406

Sheridan Production Company, LLC  
9 Greenway Plaza Ste 1300  
Houston TX 77046

RE: District 08  
Lease: 11800, 23869, 36808, 34969, 12974, DP 749132, and (14829 for which I have no P-4)  
Lease Name: University, State of Texas "CZ", State 45, Double "M", State University -BJ-,  
University 9-40  
Field: Various Fields

Dear Operators,

Per a request from Sheridan Production Company LLC dated 03/26/2013, the pending operator change P-4's to Sheridan Production Company LLC signed by Ruth Magee and dated 02/26/2013 for the above referenced leases have been withdrawn. The P-4's will not be processed. The operator of record Sandridge Expl. And Prod., LLC #748011 shall remain responsible for the regulatory compliance of these leases including the plugging of any inactive wells on the above referenced leases up until the time they are transferred. If you have any questions regarding this matter, please contact Joe Stasulli, Compliance manager at (512) 463-3905 or by e-mail at [joe.stasulli@rrc.state.tx.us](mailto:joe.stasulli@rrc.state.tx.us).

Sincerely,

  
Joe Stasulli, Compliance Manager

Cc: Colin Lineberry  
Sandridge Expl. And Prod., LLC

RECEIVED  
APR 09 2013



March 26, 2013

THE RAILROAD COMMISSION OF TEXAS  
ATTN: P-4 DEPT  
1701 N. CONGRESS  
AUSTIN, TEXAS 78711-2967

Dear Sir or Madam:

Sheridan Production Company, LLC (SPC) recently submitted P-4 Operator, Gatherer and Purchaser changes for several wells/leases that should NOT be transferred from the current operator. The following is a list of P-4s that should be cancelled and/or **not** processed, please:

LEASE NAME	WELL #	RRC DISTRICT	COUNTY	RRCID	FIELD NAME
UNIVERSITY	ALL WELLS	08	ANDREWS	11800	FUHRMAN-MASCHO
STATE OF TEXAS "CZ"	ALL WELLS	08	ANDREWS	23869	COWDEN, NORTH
STATE 45	1	08	ANDREWS	36808	COWDEN, NORTH (DEEP)
DOUBLE "M"	ALL WELLS	08	ANDREWS	34969	COWDEN, NORTH (DEEP)
UNIVERSITY 9-40	1	08	ANDREWS	DP-749132	FUHRMAN-MASCHO
STATE UNIVERSITY -BJ-	ALL WELLS	08	ANDREWS	12974	TRIPLE-N, (PENN., UPPER)
STATE UNIVERSITY -BJ-	ALL WELLS	08	ANDREWS	14829	COWDEN, NORTH

Should you have any questions or need additional info, please feel free to contact me at 713-548-1070 or [jwilliams@sheridanproduction.com](mailto:jwilliams@sheridanproduction.com)

Sincerely,

Joyce A. Williams  
Regulatory Tech

[illegible]

**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 <b>COWDEN, NORTH</b>		2. Lease name as shown on proration schedule <b>STATE OF TEXAS "CZ"</b>					
3. Current operator name exactly as shown on P-5 Organization Report <b>Sheridan Production Company, LLC</b>		4. Operator P-5 no. <b>775854</b>	5. Oil Lse/Gas ID no. <b>23869</b>	6. County <b>ANDREWS</b>	7. RRC district <b>08</b>		
8. Operator address including city, state, and zip code <b>9 Greenway Plaza, STE 1300 Houston, TX 77046</b>		9. Well no(s) (see instruction E) <b>ALL WELLS</b>					
		10. Classification <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)		11. Effective Date <b>02/26/2013</b> <i>LM</i>			
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 checked="" type="checkbox"/> gas gatherer <input checked="" type="checkbox"/> gas purchaser <input type="checkbox"/> gas purchaser system code <input type="checkbox"/> field name from: _____ <input type="checkbox"/> lease name from: _____ <b>OR</b> 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
<i>LM</i> X	X	<b>DCP Midstream, LP</b>			<b>0001</b>	<b>100%</b>	
		<b>RECEIVED RRC OF TEXAS MAR 19 2013 ORG AUSTIN TX</b>					
14. Authorized OIL or CONDENSATE Gatherer(s). (See instruction G).						<b>RRC USE ONLY</b>	
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: _____	
<b>SENTINEL TRANSPORTATION, LLC</b>					<b>100.0</b>	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.							
<b>SandRidge Expl. and Prod., LLC</b> Name of Previous Operator				<i>Linda McDonald</i> Signature			
<b>Linda McDonald</b> Name (print)				<input checked="" type="checkbox"/> Authorized Employee of previous operator <input type="checkbox"/> Authorized agent of previous operator (see instruction G)			
<b>Director of Regulatory</b> Title				<b>02/26/2013</b> Date		<b>405-429-6085</b> 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.							
<b>Ruth Magee</b> Name (print)				<i>Ruth Magee</i> Signature			
<b>Land Manager</b> Title				<input checked="" type="checkbox"/> Authorized Employee of current operator <input type="checkbox"/> Authorized agent of current operator (see instruction G)			
<b>rmagee@sheridanproduction.com</b> E-mail Address (optional)				<b>02/26/2013</b> Date		<b>713-548-1073</b> Phone with area code	

**CERTIFICATE OF COMPLIANCE  
AND TRANSPORTATION AUTHORITY**

**P-4**

5/02—www-1

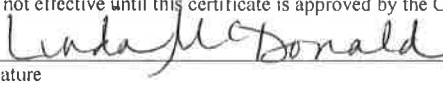
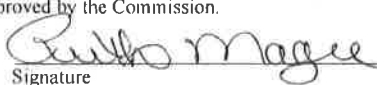
READ INSTRUCTIONS ON BACK

1. Field name exactly as shown on proration schedule <b>COWDEN, NORTH (DEEP)</b>		2. Lease name as shown on proration schedule <b>STATE 45</b>				
3. Current operator name exactly as shown on P-5 Organization Report <b>Sheridan Production Company, LLC</b>		4. Operator P-5 no. <b>775854</b>	5. Oil Lse/Gas ID no. <b>36808</b>	6. County <b>ANDREWS</b>	7. RRC district <b>08</b>	
8. Operator address including city, state, and zip code <b>9 Greenway Plaza, STE 1300 Houston, TX 77046</b>		9. Well no(s) (see instruction E) <b>1</b>				
		10. Classification <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)		11. Effective Date <b>02/26/2013</b> <i>LM</i>		
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 checked="" type="checkbox"/> gas gatherer <input checked="" type="checkbox"/> gas purchaser <input type="checkbox"/> gas purchaser system code <div style="margin-left: 40px;"><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 (Attach an additional sheet in same format if more space is needed)		Purchaser's RRC Assigned System Code	Percent of Take	Full-well stream
<i>LM</i> X	X	<b>DCP Midstream, LP</b>		<b>0001</b>	<b>100%</b>	
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	RRC USE ONLY Reviewer's initials: _____ Approval date: _____	
<b>SENTINEL TRASPORTATION, LLC</b>				<b>100.0</b>		
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.						
SandRidge Expl. and Prod., LLC Name of Previous Operator  Linda McDonald Name (print)  Director of Regulatory Title				<div style="text-align: center;"><i>Linda McDonald</i> Signature</div> <div><input checked="" type="checkbox"/> Authorized Employee of previous operator <input type="checkbox"/> Authorized agent of previous operator (see instruction G)</div> <div><b>02/26/2013</b> Date <b>405-429-6085</b> Phone with area code</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.						
Ruth Magee Name (print)  Land Manager Title  rmagee@sheridanproduction.com E-mail Address (optional)				<div style="text-align: center;"><i>Ruth Magee</i> Signature</div> <div><input checked="" type="checkbox"/> Authorized Employee of current operator <input type="checkbox"/> Authorized agent of current operator (see instruction G)</div> <div><b>02/26/2013</b> Date <b>713-548-1073</b> Phone with area code</div>		

**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 <b>COWDEN, NORTH (DEEP)</b>		2. Lease name as shown on proration schedule <b>DOUBLE "M"</b>				
3. Current operator name exactly as shown on P-5 Organization Report <b>Sheridan Production Company, LLC</b>		4. Operator P-5 no. <b>775854</b>	5. Oil Lse/Gas ID no. <b>34969</b>	6. County <b>ANDREWS</b>	7. RRC district <b>08</b>	
8. Operator address including city, state, and zip code <b>9 Greenway Plaza, STE 1300 Houston, TX 77046</b>		9. Well no(s) (see instruction E) <b>ALL WELLS</b>				
		10. Classification <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)		11. Effective Date <b>LM</b> <b>02/26/2013</b>		
12. Purpose of Filing. (Complete section a or b below.) (See instructions B and G) <b>a. Change of:</b> <input checked="" type="checkbox"/> operator <input type="checkbox"/> oil or condensate gatherer <input checked="" type="checkbox"/> gas gatherer <input checked="" type="checkbox"/> gas purchaser <input type="checkbox"/> gas purchaser system code <input type="checkbox"/> field name from: _____ <input type="checkbox"/> lease name from: _____ <b>OR</b> <b>b. New RRC Number for:</b> <input type="checkbox"/> oil lease <input type="checkbox"/> gas well <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"/> other well (specify) _____ <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	<b>DGP Midstream, LP</b>		<b>0001</b>	<b>100</b>	
		<b>RECEIVED RRC OF TEXAS MAR 19 2013 O&amp;G AUSTIN TX</b>				
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	<b>RRC USE ONLY</b> Reviewer's initials: _____ Approval date: _____	
<b>SENTINEL TRANSPORTATION, LLC</b>				<b>100.0</b>		
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.						
Name of Previous Operator <b>SandRidge Expl. and Prod., LLC</b>				Signature 		
Name (print) <b>Linda McDonald</b>				<input checked="" type="checkbox"/> <b>Authorized Employee of previous operator</b> <input type="checkbox"/> <b>Authorized agent of previous operator (see instruction G)</b>		
Title <b>Director of Regulatory</b>				Date <b>02/26/2013</b>		
				Phone with area code <b>405-429-6085</b>		
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.						
Name (print) <b>Ruth Magee</b>				Signature 		
Title <b>Land Manager</b>				<input checked="" type="checkbox"/> <b>Authorized Employee of current operator</b> <input type="checkbox"/> <b>Authorized agent of current operator (see instruction G)</b>		
E-mail Address (optional) <b>rmagee@sheridanproduction.com</b>				Date <b>02/26/2013</b>		
				Phone with area code <b>713-548-1073</b>		

**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 <b>TRIPLE-N (PENN., UPPER)</b>		2. Lease name as shown on proration schedule <b>STATE UNIVERSITY -BJ-</b>					
3. Current operator name exactly as shown on P-5 Organization Report <b>Sheridan Production Company, LLC</b>		4. Operator P-5 no. <b>775854</b>	5. Oil Lsc/Gas ID no. <b>12974</b>	6. County <b>ANDREWS</b>	7. RRC district <b>08</b>		
8. Operator address including city, state, and zip code <b>9 Greenway Plaza, STE 1300 Houston, TX 77046</b>		9. Well no(s) (see instruction E) <b>ALL WELLS</b>					
		10. Classification <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)		11. Effective Date <b>02/26/2013</b> <i>YM</i>			
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 checked="" type="checkbox"/> gas gatherer <input checked="" type="checkbox"/> gas purchaser <input type="checkbox"/> gas purchaser system code <input type="checkbox"/> field name from: _____ <input type="checkbox"/> lease name from: _____ <b>OR</b> 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
<i>YM</i> <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<b>DCP Midstream, LP</b>			<b>0001</b>	<b>100%</b>	
RECEIVED RRC OF TEXAS MAR 19 2013 O&G AUSTIN TX							
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: _____	
<b>SENTINEL TRANSPORTATION, LLC</b>					<b>100.0</b>	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.							
<b>SandRidge Expl. and Prod., LLC</b>				<i>Linda McDonald</i>			
Name of Previous Operator				Signature			
<b>Linda McDonald</b>				<input checked="" type="checkbox"/> Authorized Employee of previous operator <input type="checkbox"/> Authorized agent of previous operator (see instruction G)			
Name (print)							
<b>Director of Regulatory</b>				<b>02/26/2013</b>			
Title				Date			
				<b>405-429-6085</b>			
				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.							
<b>Ruth Magee</b>				<i>Ruth Magee</i>			
Name (print)				Signature			
<b>Land Manager</b>				<input checked="" type="checkbox"/> Authorized Employee of current operator <input type="checkbox"/> Authorized agent of current operator (see instruction G)			
Title							
<b>rmagee@sheridanproduction.com</b>				<b>02/26/2013</b>			
E-mail Address (optional)				Date			
				<b>713-548-1073</b>			
				Phone with area code			



# 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 <b>FUHRMAN-MASCHO</b>		2. Lease name as shown on proration schedule <b>UNIVERSITY 9-40</b>		
3. Current operator name exactly as shown on P-5 Organization Report <b>Sheridan Production Company, LLC</b>		4. Operator P-5 no. <b>775854</b>	5. Oil Lse/Gas ID no. <b>DP-749132</b>	6. County <b>ANDREWS</b>
8. Operator address including city, state, and zip code <b>9 Greenway Plaza, STE 1300 Houston, TX 77046</b>		7. RRC district <b>08</b>		
		9. Well no(s) (see instruction E) <b>1</b>		
		10. Classification <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)		11. Effective Date <b>02/26/13</b>
12. Purpose of Filing. (Complete section a or b below.) (See instructions B and G)				
a. Change of: <input checked="" type="checkbox"/> operator <input checked="" type="checkbox"/> oil or condensate gatherer <input checked="" type="checkbox"/> gas gatherer <input checked="" type="checkbox"/> gas purchaser <input checked="" type="checkbox"/> gas purchaser system code				
OR <input type="checkbox"/> field name from: _____ <input type="checkbox"/> lease name from: _____				
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	DCP MIDSTREAM, LP		RECEIVED RRC OF TEXAS MAR 19 2013 O&G AUSTIN TX
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	RRC USE ONLY	
ENTERPRISE CRUDE PIPELINE LLC		50 %	Reviewer's initials: _____	
ENTERPRISE CRUDE OIL LLC		50 %	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.				
SandRidge Expl. and Prod., LLC		Signature: <u>Linda McDonald</u>		
Name of Previous Operator		<input checked="" type="checkbox"/> Authorized Employee of previous operator <input type="checkbox"/> Authorized agent of previous operator (see instruction G)		
Linda McDonald		Date: <u>02/26/2013</u> Phone with area code: <u>405-429-6085</u>		
Name (print)				
Director of Regulatory				
Title				
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.				
Ruth Magee		Signature: <u>Ruth Magee</u>		
Name (print)		<input checked="" type="checkbox"/> Authorized Employee of current operator <input type="checkbox"/> Authorized agent of current operator (see instruction G)		
Land Manager		Date: <u>02/26/2013</u> Phone with area code: <u>713-548-1073</u>		
Title				
rmagee@sheridanproduction.com				
E-mail Address (optional)				