


**CERTIFICATE OF COMPLIANCE
AND TRANSPORTATION AUTHORITY**

P-4

5/02
DBC0702

READ INSTRUCTIONS ON BACK

1. Field name exactly as shown on proration schedule MARTIN (CONSOLIDATED)		2. Lease name as shown on proration schedule PHILLIPS UNIVERSITY -T-					
3. Current operator name exactly as shown on P-5 Organization Report SANDRIDGE EXPL. & PROD., LLC		4. Operator P-5 no. 748011	5. Oil Lse/Gas ID no. 36488	6. County ANDREWS	7. RRC district 08		
8. Operator address including city, state, and zip code 123 ROBERT S. KERR AVENUE OKLAHOMA CITY, OK 73102		9. Well no(s) (see instruction E) 2 42-003-04643					
		10. Classification <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other (see instruction A)		11. Effective Date 06/01/2010			
12. Purpose of Filing. (Complete section a or b below.) (See instruction B and G) a. Change of: <input 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 checked="" type="checkbox"/> field name from: MARTIN (SAN ANDRES) 38185 <input checked="" type="checkbox"/> lease name from: UNIVERSITY T 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 Gatherers 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			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: _____				
CONOCO PHILLIPS COMPANY		100	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.							
Name of Previous Operator		Signature <input type="checkbox"/> Authorized Employee of previous operator <input type="checkbox"/> Authorized agent of previous operator (see instruction G)					
Name (print)		Date					
Title		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.							
DAWN RICHARDSON		Signature 					
SR. REGULATORY TECH		<input checked="" type="checkbox"/> Authorized Employee of current operator <input type="checkbox"/> Authorized agent of current operator (see instruction G)					
DRICHARDSON1@SDRGE.COM		08/01/2010					
E-mail Address (optional)		(405)429-6170					
		Date Phone with area code					