P-4

RAILROAD COMMISSION OF TEXAS
Oil and Gas Division
PO Box 12967
Austin TX 78711-2967
www.rrc.texas.gov

Tracking No.: 225502

## CERTIFICATE OF COMPLIANCE AND TRANSPORTATION AUTHORITY

This facsimile P-4 was generated electronically from data submitted to the RRC. A certification of the automated data is available in the RRC's Austin office.

| Field name exactly as shown on proration schedule     SPRABERRY (TREND AREA)  | e 2. Lease name as shown on proration schedule MABEE DDA D11 |   |                               |  |                                   |  |
|---|--|---|-------------------------------|--|-----------------------------------|--|
| Current operator name exactly as shown on P-5 Organization Re COG OPERATING LLC   | port 4   | 4. Operator P-5 no. 166150                              | 5. Oil Lse/Gas ID no<br>54645 | 6. County ANDREWS  | 7. RRC district                   |  |
| 8. Operator address including city, state, and zip code 600 W ILLINOIS AVE MIDLAND, TX 79701  |  | 9. Well no(s) (see in 2906SH  10. Classification        | _                             |  | Effective Date 19/25/2019         |  |
| 12. Purpose of Filing. (Complete section a or b below.) (See instruction as Change of:  a. Change of:  operator  field name from:  lease name from:   | ate gatherer   | gas gatherer  | gas purchaser Docket #:       | gas purch  | aser system code                  |  |
| b. New RRC Number for: Soil lease says gas well other well (specify)  13. Authorized GAS WELL GAS or CASINGHEAD GAS Gatherer  | c  | new completion or re<br>consolidation<br>field transfer | un un sul                     | elass oil to gas itization odivision (oil lease only     | reclass gas to oil                |  |
| 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)  System Code   |  |   |                               |  |                                   |  |
| X ENLINK PERMIAN, LLC(252782)  X CORONADO MIDSTREAM LLC(179361)   |  |   |                               | 0001   | 100.0                             |  |
|   |  |   |                               |  |                                   |  |
| 14. Authorized OIL or CONDENSATE Gatherer(s). (See instruction  | on G).   |   |                               |  |                                   |  |
| ·   | DENSATE Gatherer(s) ditional sheet in same                   |   |                               |  | Percent of<br>Take                |  |
| FRONTIER MIDSTREAM SOLN IV, LLC(287172)   |  |   |                               |  | 100.0                             |  |
|   |  |   |                               |  |                                   |  |
| RRC USE ONLY: Reviewer's initials: RRC Staff Approval date: 09/24/2020  |  |   |                               |  |                                   |  |
| 15. PREVIOUS OPERATOR CERTIFICATION FOR CHANG responsibility for the well(s) designated in this filing, located on the Previous Operator, that designation of the above named operator as   | e subject lease has bee                                      | en transferred in its er                                | ntirety to the above nam      | ned Current Operator. I                                  |                                   |  |
| Name of Previous Operator   |  | Signature   | S 1.                          |  |                                   |  |
| Name (print)  |  | Authorized l  |                               | operator (see  | ent of previous<br>instruction G) |  |
| Title   |  | Date  |                               | Phone with area code                                     |                                   |  |
| 16. CURRENT OPERATOR CERTIFICATION. By signing the acknowledge responsibility for the regulatory compliance of the subtresponsibility for the physical operation, control, and proper plugging Operator until a new certificate designating a new Current Operator. | bject lease including p<br>ng of each well desigr            | olugging of well(s) punated in this filing. I           | ursuant to Rule 14. I fu      | rther acknowledge that                                   | I assume                          |  |
| COG OPERATING LLC   |  | Sue Hannaman  | 1                             |  |                                   |  |
| Name (print) Regulatory Coordinator Title   |  | Signature  X Authorized I of current o                  |                               | Authorized agent of current operator (see instruction G) |                                   |  |
| sue.hannaman@cop.com  |  | 09/15/2020  |                               | (432) 818-1367   |                                   |  |
| E-mail Address (optional)   |  | Date  |                               | Phone with area code                                     |                                   |  |