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Mitchell E Form 4 August 17,												
FORM	Λ4		GEGU					NOLO			APPROVAL	
UNITED STATES SEC						AND EX 1, D.C. 2			OMMISSION	OMB Number:	3235-0287	
Check t if no lor subject Section Form 4 Form 5 obligati may cor <i>See</i> Inst	nger to 16. or Filed pu ons stinue.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP O SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 Section 17(a) of the Public Utility Holding Company Act of 1935 or Sect 30(h) of the Investment Company Act of 1940								Expires: January 31 2005 Estimated average burden hours per response 0.5		
1(b).												
(Print or Type	Responses)											
1. Name and Address of Reporting Person [*] Mitchell E Keith						d Ticker o		-	5. Relationship of Reporting Person(s) to Issuer			
(Last)						Fransaction	-	-,	(Check all applicable)			
((Month/Day/Year) 08/13/2009					Director 10% Owner X Officer (give title Other (specify below) below) Senior VP and COO Enogex LLC			
				mendment, Date Original /onth/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
(City)	(State)	(Zip)	77.1	1. T. N		Destad	C	•	Person	6 D		
1.Title of Security (Instr. 3)	× ,	nsaction Date 2A. Deemed			actic	4. Securi on(A) or Di (Instr. 3,	ties A spose 4 and (A)	cquired d of (D)	Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	08/13/2000				v	Amount		Price \$	(Instr. 3 and 4) 5,368	D		
-\$.01 Par Value per share	08/13/2009			М		3,100	A	\$ 23.575	3,308	D		
Common Stock -\$.01 Par Value per share	08/13/2009			S		3,100	D	\$ 31.222	2,268	D		
Common Stock									9,371.653 <u>(1)</u>	Ι	Retirement Savings	

-\$.01 Par Value per share

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	e Expiration I	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 23.575	08/13/2009		М	3,100	(2)	01/21/2014	Com Stk	3,100	\$ 0

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Mitchell E Keith P.O. BOX 321 OKLAHOMA CITY, OK 73101			Senior VP and COO Enogex LLC					

Signatures

Carla D. 08/17/2009 Brockman

<u>**</u>Signature of Reporting Person Data

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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The information herein is based on a Retirement Savings Plan Statement dated August 13, 2009. The Retirement Savings Plan Statement indicated the number of units in the Common Stock Fund of the Retirement Savings Plan credited to the participant's account at August

- (1) 13, 2009 and includes shares credited during 2009 that were exempt from reporting pursuant to Rule 16A-3(f)(1)(i)(B). The number of shares of common stock owned at August 13, 2009 was determined by dividing the dollar value of such units by the closing sale price of the common stock on August 13, 2009.
- (2) The option vested in three equal annual installments beginning on January 27, 2005.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.