FORM 4	4
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL OMB 3235-Number: 0287 Estimated average burden hours per response... 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Respo	onses)										
1. Name and Addres Martin Shannon	2. Issuer Na Symbol Main Stree				C	I	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) 1300 POST OAK	3. Date of Ea (Month/Day/ 01/15/2013	Year)	nsac	ction		-  t	Officer (give title Other (specify below) below)     VP, Chief Accounting Officer				
HOUSTON, TX		4. If Amendi Filed(Month/E	· · ·	e Oi	riginal		A	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State) (Zip)	Table I -	Non-De	riva	tive Secu	rities	Acqui	ired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Execut	eemed tion Date, if h/Day/Year)	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
Common Stock	01/15/2013			P <u>(1)</u>	V	23.438	А	\$ 32	5,023.438	D	
Common Stock	01/23/2013			P <u>(1)</u>	v	54.842	А	\$ 31.91	5,078.28	D	
Common Stock	02/15/2013			P <mark>(1)</mark>	v	23.83	А	\$ 31.62	5,102.11	D	
Common Stock	03/15/2013			P <u>(1)</u>	v	22.261	A	\$ 34.38	5,124.371	D	

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

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	( <i>e.g.</i> , puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exe	rcisable	7. Tit	tle and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	Number		and Expirati	nd Expiration Date Amoun		unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day/Year)		Underlying		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	)	Derivative			Securities		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative					Securities				(Instr. 3 and			Owned	Security:	(Instr. 4)
	Security				Acquired				4)			U	Direct (D)		
					(A) or							Reported	or Indirect		
					Disposed							Transaction(s)	(I)		
					of (D)							(Instr. 4)	(Instr. 4)		
					(Instr. 3,										
					4, and 5)										
											Amount				
								Date	Evolution		or				
							Exercisable	Expiration Date	Title	Number					
							E	Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

### **Reporting Owners**

Bon onting Orun on Nome ( Addusse	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Martin Shannon 1300 POST OAK BLVD., STE. 800 HOUSTON, TX 77056			VP, Chief Accounting Officer						

# Signatures

/s/ Jason B. Beauvais as Attorney-in-Fact for Shannon Martin

# **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).
- (1) The reporting person acquired these shares under a dividend reinvestment plan, pursuant to a dividend reinvestment transaction exempt from Section 16 under Rule 16a-11.

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.