FORM 4

1	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

OWB APPRO	JVAL
OMB	3235
Number:	028
Estimated aver	age
burden hours p	er
response	0.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 Re	sponses)											
1. Name and Add Appling Micha	Symbol			Ficker or Tra	e	Is J	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 1300 POST OAK BLVD., STE. 800			3. Date of (Month/D 04/15/20	ay/Year)		nsaction			Officer (give title low)		specify below)	
HOUSTON, T		4. If Ame Filed(Mon			e Original		Ap	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-Derivative Securities Acquired, Disposed of, or Benefic										Beneficially	Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	any		3. Transact Code (Instr. 8		4. Securities Acquired (<i>A</i> or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following	Ownership of Form: Be	 Nature of Indirect Beneficial Ownership 	
				Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock	04/15/2013			P <u>(1)</u>	v	22.465	A	\$ 30.1778	57,481.9427	D		
Common Stock	04/15/2013			P <u>(1)</u>	v	272.6541	А	\$ 30.1778	57,754.5968	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

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 Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n Nı	umber	r	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	of			(Month/Day	/Year)	Unde	erlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	De	erivati	ive			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Se	curitie	es			(Inst	: 3 and		Owned	Security:	(Instr. 4)
	Security				A	cquire	d			4)			Following	Direct (D)	
					`) or							*	or Indirect	
						ispose	ed						Transaction(s)		
						(D)							(Instr. 4)	(Instr. 4)	
					`	ıstr. 3	1								
					4,	and 5)								
											Amount				
								Date	Evaination		or				
								Exercisable	Expiration Date	Title	Number				
								Exercisable	Date		of				
				Code V	(A	A) (E))				Shares				

Reporting Owners

Penerting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Appling Michael JR 1300 POST OAK BLVD. STE. 800 HOUSTON, TX 77056	Х						

Signatures

/s/ Jason B. Beauvais as Attorney-in-Fact for Michael Appling	04/24/2013
-Signature of Reporting Person	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).
- (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.