#### Edgar Filing: Rutherford John R - Form 4

| Rutherford<br>Form 4  |  |  |   |  |  |  |  |  |                          |  |
|---|--|--|---|--|--|--|--|--|--------------------------|--|
| October 05  | ЛЛ   |  |   |  |  |  |  |  | PPROVAL                  |  |
|   | UNITED   | STATES   |   | RITIES A ashington                         |  |  | E COMMISSION   | N OMB<br>Number:   | 3235-0287                |  |
| Check t<br>if no lo<br>subject<br>Section<br>Form 4<br>Form 5<br>obligati<br>may co<br><i>See</i> Inst                        | Section<br>Public U                                  | NGES IN<br>SECUI<br>16(a) of tl<br>Jtility Hol<br>nvestmen | Estimated<br>burden hou<br>response                               | urs per                                    |  |  |  |  |                          |  |
| l(b).   | Deemongee)   |  |   |  |  |  |  |  |                          |  |
| <ul> <li>(Print or Type Responses)</li> <li>1. Name and Address of Reporting Person <u>*</u><br/>Rutherford John R</li> </ul> |  |  | Symbol<br>PLAIN   | er Name <b>an</b><br>IS ALL A<br>INE LP [] | MERIC  | -  | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable)                            |  |                          |  |
| (Last) (First) (Middle)<br>333 CLAY STREET, SUITE 1600  |  |  | 3. Date of Earliest Transaction<br>(Month/Day/Year)<br>10/01/2010 |  |  |  | Director 10% Owner<br>X_ Officer (give title Other (specify<br>below) below)<br>Executive Vice President |  |                          |  |
| HOUSTO  | 4. If Amendment, Date Original Filed(Month/Day/Year) |  |   |  | <ul> <li>6. Individual or Joint/Group Filing(Check<br/>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul> |  |  |  |                          |  |
| (City)  | (State)  | (Zip)  | Tak   | la I Non                                   | Doministing  | Samuitian  | Person   | of on Donoficio  | lly Owned                |  |
| 1.Title of<br>Security<br>(Instr. 3)  | 2. Transaction Date<br>(Month/Day/Year)              | -  | ed<br>Date, if  | 3.<br>Transactio<br>Code<br>(Instr. 8)     | 4. Securit<br>onAcquired<br>Disposed<br>(Instr. 3,<br>Amount   | ties<br>(A) or<br>of (D)                               | Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4)       | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I)<br>(Instr. 4) | 7. Nature of<br>Indirect |  |
| Reminder: Ro  | eport on a separate line                             | for each cl  | ass of sec  | eurities bene                              | Perso<br>inforr<br>requi   | ons who re<br>nation con<br>red to resp<br>ays a curre | or indirectly.<br>spond to the colle<br>tained in this form<br>ond unless the for<br>ntly valid OMB co   | are not<br>rm  | SEC 1474<br>(9-02)       |  |

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

| 1. Title of | 2.          | 3. Transaction Date | 3A. Deemed         | 4.        | 5. Number of | 6. Date Exercisable and | 7. Title and Amount of |
|-------------|-------------|---------------------|--------------------|-----------|--------------|-------------------------|------------------------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transacti | orDerivative | Expiration Date         | Underlying Securities  |
| Security    | or Exercise |                     | any                | Code      | Securities   | (Month/Day/Year)        | (Instr. 3 and 4)       |

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| (Instr. 3)                  | Price of<br>Derivative<br>Security |            | (Month/Day/Year) | (Instr. 8 | ĺ | Acquired (A) or<br>Disposed of (D)<br>(Instr. 3, 4, and<br>5) |     |                     |                    |                 | (]                               |
|-----------------------------|------------------------------------|------------|------------------|-----------|---|---|-----|---------------------|--------------------|-----------------|----------------------------------|
|                             |                                    |            |                  | Code      | V | (A)   | (D) | Date<br>Exercisable | Expiration<br>Date | Title           | Amount or<br>Number of<br>Shares |
| Phantom<br>Units <u>(1)</u> | (2)                                | 10/01/2010 |                  | А         |   | 100,000   |     | (3)                 | (4)                | Common<br>Units | 100,000                          |

# **Reporting Owners**

| Reporting Owner Name / Address  |          |           | Relationships            |       |  |  |
|---|----------|-----------|--------------------------|-------|--|--|
|   | Director | 10% Owner | Officer                  | Other |  |  |
| Rutherford John R<br>333 CLAY STREET, SUITE 1600<br>HOUSTON, TX 77002 |          |           | Executive Vice President |       |  |  |
| Signatures  |          |           |                          |       |  |  |

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/s/ John R. Rutherford 10/01/2010 \*\*Signature of Date Reporting Person

# **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) Grant of phantom units under Long-Term Incentive Plan (includes associated distribution equivalent rights (payable in cash)).
- (2) 1-for-1 Common Units for Phantom Units granted under long-term incentive plan.
- Phantom Units vest in equal 1/4 increments upon achievement of annualized distributions of \$3.90, \$4.05 and \$4.20 per unit and (3) continued employment through November 2012, May 2013, May 2014 and May 2015, respectively.

(4) Any phantom units that have not vested as of the May 2016 distribution date will be forfeited.

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.