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| Check this box if no longer subject to Section 16. SECURITIES SECURITIES Number: Number: Expires: January 3 200 Estimated average burden hours per | | | | | | | | 3235-0287 January 31, 2005 verage | | |
|--|--|---|---|-----|-----------------|---|---|---|---|--|
| (Print or Type Res 1. Name and Add Evans Elizabe | Symbol | Symbol Constellation Energy Partners LLC | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| (Last) (First) (Middle) 3. Date of Ea (Month/Day 1801 MAIN, SUITE 1300 03/01/201 | | | y/Year) $\frac{1}{2}$ Offi | | | | · · · · · · · · · · · · · · · · · · · | give title 10% Owner below) See Remarks | | |
| (Street) 4. If Amend Filed(Month/ HOUSTON, TX 77002 | | | th/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 | | | |
| | (State) (Zi | n) — | | | | | Person | | _ | |
| (City) 1.Title of Security (Instr. 3) | (State) (21 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any | n Date, if Transactior(A) or Disposed of Code (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or | | cquired d of | | 6. 7. Natu Ownership Indirec Form: Direct Benefic (D) or Owners | 7. Nature of Indirect | | |
| Common units representing Class B LLC interests | 03/01/2013 | | F | 389 | D | \$ 1.82 | 20,546 | 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

 (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. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Unde Secur | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|---------------------------------------|---|---------------------|--------------------|---------------|--|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Addre | ess | Relationships | | | | | | | |
|---|------------|---------------|-------------|-------|--|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | | |
| Evans Elizabeth A 1801 MAIN, SUITE 1300 HOUSTON, TX 77002 | | | See Remarks | | | | | | |
| Signatures | | | | | | | | | |
| /s/ Elizabeth A. Evans | 03/04/2013 | | | | | | | | |
| ** Signature of | 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).

Remarks:

Reporting Person

VP of Land, General Counsel and Corporate Secretary

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.