



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFO

OGCC Operator Number: <u>5</u>	Contact Name and Telephone:
Name of Operator: <u>COLORADO OIL & GAS CONSERVATION COMMISSION</u>	Name: <u>ENRIQUE RIVERA</u>
Address: <u>1120 LINCOLN ST SUITE 801</u>	Phone: <u>(303) 8942100</u> Fax: <u>(303) 8942109</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80203</u>	Email: <u>E.RIVERA@STATE.CO.US</u>

OPERATOR COMMENTS AND SUBMITTAL

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: ENRIQUE RIVERA

Title: PROD SPECIALIST Date: 6/10/2015 Email: E.RIVERA@STATE.CO.US

By checking this box, operator is requesting an updated Delinquent Report, AFTER the Form 7 has been processed

Operator Comments:

Monthly Report of Operations

Submitted Items Summary Totals:

Submitted: 5 Approved: 5 Modified: 0 Deleted: 0

Total 5 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 09/2008				
1	123-25464-00	RYANN STATE C 21-27 CD	CODL	PR
Report Month: 10/2008				
2	123-25464-00	RYANN STATE C 21-27 CD	CODL	PR
Report Month: 11/2008				
3	123-25464-00	RYANN STATE C 21-27 CD	CODL	PR
Report Month: 12/2008				
4	123-25464-00	RYANN STATE C 21-27 CD	CODL	PR
Report Month: 01/2009				
5	123-25464-00	RYANN STATE C 21-27 CD	CODL	PR

Total 0 Modified

No	API #	Well Name	Formation Code	Well Status
Report Month: /				
	-	-		

Total 0 Deleted

No	API #	Well Name	Formation Code	Well Status
Report Month: /				
	-	-		

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
400851902	MONTHLY REPORT OF OPERATIONS
400851906	ERROR REPORT
400851912	DELINQUENT REPORT

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)