



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: 26155	Contact Name and Telephone:
Name of Operator: EAGLE OPERATING INC	Name: PENELOPE RASMUSSEN
Address: P O BOX 853	Phone: (701) 385-4244 Fax: (701) 837-4820
City: KENMARE State: ND Zip: 58746	Email: peneloper@restel.com

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: PENELOPE RASMUSSEN

Title: SECRETARY Date: 11/16/2015 Email: peneloper@restel.com

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: 2 In Process: 2 Modified: 0 Deleted: 0

Total 2 In Process

No	API #	Well Name	Formation Code	Well Status
Report Month: 09/2015				
1	103-09135-00	EMERALD C 275	MNCS	PR
2	103-10261-00	E-M EMERALD C 1HZ	MNCS	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

Att Doc Num

Name

400937496

Monthly Report Of Operations

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Total: 0 comment(s)