



**OPERATOR'S MONTHLY REPORT OF OPERATIONS**

**OPERATOR INFORMATION**

OGCC Operator Number: <u>10508</u>	Contact Name and Telephone:
Name of Operator: <u>SELECT ENERGY SERVICES LLC</u>	Name: <u>Halie Butler</u>
Address: <u>PO BOX 1715</u>	Phone: <u>(281) 4673153</u> Fax: <u>(405) 9452899</u>
City: <u>GAINESVILLE</u> State: <u>TX</u> Zip: <u>76241</u>	Email: <u>hbutler@selectenergyservices.com</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: Halie Butler  
Title: Environmental Coordinator Date: 11/20/2015 Email: hbutler@selectenergyservices.

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: 1 In Process: 1 Modified: 0 Deleted: 0

Total 1 In Process

No	API #	Well Name	Formation Code	Well Status
Report Month: 10/2015				
1	123-39484-00	WEITZEL 1	DJINJ	SI

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: /				
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## Attachment Check List

**Att Doc Num**      **Name**

400940637	Monthly Report Of Operations
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Total Attach: 1 Files

### General Comments

**User Group**      **Comment**      **Comment Date**

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Total: 0 comment(s)