



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>10369</u>	Contact Name and Telephone:
Name of Operator: <u>NATURAL RESOURCE GROUP INC</u>	Name: <u>TRACY CANNING</u>
Address: <u>1789 W LITTLETON BLVD</u>	Phone: <u>(303) 7975417</u> Fax: <u>()</u>
City: <u>LITTLETON</u> State: <u>CO</u> Zip: <u>80120</u>	Email: <u>tcanning@diversifiedresourcesinc.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: TRACY CANNING
Title: ADMIN Date: 11/12/2015 Email: tcanning@diversifiedresourcesi

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

Operator Comments:

Form 7 Natural Resource Group Garcia Mar 2015

Monthly Report of Operations

Submitted Items Summary Totals:

Submitted: 9 Approved: 9 Modified: 0 Deleted: 0

Total 9 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 03/2015				
1	071-07232-00	GARCIA #34-14	APSP	SI
2	071-07232-00	GARCIA #34-14	TMPS	SI
3	071-07234-00	GARCIA #3-5	APSP	SI
4	071-07234-00	GARCIA #3-5	TMPS	SI
5	071-07235-00	GARCIA #4-12	NB-TM	SI
6	071-09451-00	MIRAH #1	NBRR	SI
7	071-09451-00	MIRAH #1	NB-TM	SI
8	071-09451-00	MIRAH #1	TMPS	SI
9	071-09644-00	WINDY POINT #1	NB-TM	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: /				
	-	-		

Attachment Check List

Att Doc Num

Name

400935629	Form 07 SUBMITTED
400935630	Monthly Report Of Operations

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

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

Total: 0 comment(s)