



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: 10456	Contact Name and Telephone:
Name of Operator: CAERUS PICEANCE LLC	Name: Cheryl Gallagher
Address: 600 17TH STREET #1600N	Phone: (720) 880-6337 Fax: (303) 565-4606
City: DENVER State: CO Zip: 80202	Email: cgallagher@caerusoilandgas.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: Cheryl Gallagher

Title: Sr Operations Tech Date: 12/3/2015 Email: cgallagher@caerusoilandgas.c

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: 03/2015				
1	045-13234-00	UNOCAL-ENCANA #23A-4D	WFCM	PR
2	045-22624-00	PUCKETT #43B-2	WMFK	DG

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

400947431

Monthly Report Of Operations

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Total: 0 comment(s)