



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>10464</u>	Contact Name and Telephone:
Name of Operator: <u>CATAMOUNT ENERGY PARTNERS LLC</u>	Name: <u>Connie Mitchell</u>
Address: <u>1801 BROADWAY #1000</u>	Phone: <u>(303) 726-0662</u> Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>cmitchell@prof-data.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: Connie Mitchell

Title: Agent Date: 4/21/2016 Email: cmitchell@prof-data.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: 8 In Process: 8 Modified: 0 Deleted: 0

Total 8 In Process

No	API #	Well Name	Formation Code	Well Status
Report Month: 11/2015				
1	067-06494-00	ANIMAS #1	MVRD	PR
2	067-05598-00	BONDAD 33-10 #13	MVRD	PR
3	067-05570-00	BONDAD 33-10 #15	MVRD	PR
4	067-09902-00	CAMPBELL 33-7-4 #1H	FRLDC	PR
5	067-09903-00	CAMPBELL 33-7-4 #2H	FRLDC	PR
6	067-09918-00	CARPENTER #32-06-03 #1S	FRLDC	PR
7	067-09914-00	CARPENTER #32-06-03 #2	FRLDC	PR
8	067-09922-00	ELSA #34-06-19 #1	FRLDC	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

401033813	Form 07 SUBMITTED
401033819	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)