



**OPERATOR'S MONTHLY REPORT OF OPERATIONS**

**OPERATOR INFORMATION**

|  |   |
|--|---|
| OGCC Operator Number: <u>10203</u>                       | Contact Name and Telephone:                 |
| Name of Operator: <u>BLACK RAVEN ENERGY INC</u>          | Name: <u>Brenda Ramirez</u>                 |
| Address: <u>165 S UNION BLVD SUITE 410</u>               | Phone: <u>(210) 4515545</u> Fax: <u>( )</u> |
| City: <u>LAKEWOOD</u> State: <u>CO</u> Zip: <u>80228</u> | Email: <u>bramirez@enerjexresources.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: Brenda Ramirez  
Title: Accountant Date: 9/4/2016 Email: bramirez@enerjexresources.co

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: 7 In Process: 7 Modified: 0 Deleted: 0

Total 7 In Process

| No                    | API #        | Well Name         | Formation Code | Well Status |
|-----------------------|--------------|-------------------|----------------|-------------|
| Report Month: 04/2016 |              |                   |                |             |
| 1                     | 087-05378-00 | AJU HOUGH A 2     | DSND           | PR          |
| 2                     | 087-05433-00 | AJU GEYER B1      | DSND           | PR          |
| 3                     | 087-05377-00 | AJU HOUGH B 4     | DSND           | PR          |
| 4                     | 087-05280-00 | AJU JOHNSON-GLN 1 | JSND           | SI          |
| 5                     | 087-05396-00 | AJU HOUGH B 2     | DSND           | SI          |
| 6                     | 087-05391-00 | AJU HOUGH B 6     | DSND           | SI          |
| 7                     | 087-08168-00 | HOUGH 157-7-H1    | DSND           | 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**

401103854

Imported Data

Total Attach: 1 Files

### General Comments

**User Group**

**Comment**

**Comment Date**

Total: 0 comment(s)