



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>31250</u>	Contact Name and Telephone:
Name of Operator: <u>FRITZ & DIGMAN INC</u>	Name: <u>CARMEL GUTIERREZ</u>
Address: <u>PO BOX 70024</u>	Phone: <u>(505) 387-6176</u> Fax: <u>(505) 327-6177</u>
City: <u>ALBUQUERQUE</u> State: <u>NM</u> Zip: <u>87197-0024</u>	Email: <u>NOMAIL@GMAIL.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: CARMEL GUTIERREZ
 Title: AGENT Date: 9/8/2016 Email: NOMAIL@GMAIL.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: 3 Approved: 3 Modified: 0 Deleted: 0

Total 3 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 11/2015				
1	067-06141-00	DAKOTA FEE 1	DKTA	PR
Report Month: 04/2016				
2	067-06141-00	DAKOTA FEE 1	DKTA	SI
Report Month: 05/2016				
3	067-06141-00	DAKOTA FEE 1	DKTA	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

2452662

FORM 7 MONTHLY REPORT OF OPERATIONS SUBMITTED

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Total: 0 comment(s)