



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

| | |
|---|---|
| OGCC Operator Number: <u>10467</u> | Contact Name and Telephone: |
| Name of Operator: <u>TABULA RASA ENERGY LLC</u> | Name: <u>Lauren Meeks</u> |
| Address: <u>12012 WICKCHESTER LANE #660</u> | Phone: <u>(281) 6688480</u> Fax: <u>(281) 5318481</u> |
| City: <u>HOUSTON</u> State: <u>TX</u> Zip: <u>77079</u> | Email: <u>lmeeks@tabularasa.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: Lauren Meeks

Title: Sr. Accountant Date: 10/17/2016 Email: lmeeks@tabularasa.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: 12 Approved: 12 Modified: 1 Deleted: 0

Total 12 Approved

| No | API # | Well Name | Formation Code | Well Status |
|-----------------------|--------------|----------------|----------------|-------------|
| Report Month: 08/2016 | | | | |
| 1 | 055-06142-00 | HARRY WILLIS 1 | DKTA | PR |
| 2 | 055-06142-00 | HARRY WILLIS 1 | ENRD | TA |
| 3 | 055-06143-00 | HARRY WILLIS 2 | PRRE | PR |
| 4 | 055-06144-01 | HARRY WILLIS 3 | N-COM | TA |
| 5 | 055-06287-00 | HARRY WILLIS 4 | DKTA | PR |
| 6 | 055-06225-00 | HARRY-WILLIS 7 | PRRE | PA |
| 7 | 055-06285-00 | CADDELL 1 | DKTA | PR |
| 8 | 055-06312-00 | CADDELL 2 | ENRD | PR |
| 9 | 055-06319-00 | CADDELL 3 | ENRD | PR |
| 10 | 055-06209-00 | WHITE ET AL 1 | DKTA | PR |
| 11 | 055-06301-00 | COUGAR 1A | DKTA | PR |
| 12 | 055-06302-00 | ANDREATTA 2 | DKTA | PR |

Total 1 Modified

| No | API # | Well Name | Formation Code | Well Status |
|-----------------------|--------------|----------------|----------------|-------------|
| Report Month: 08/2016 | | | | |
| 4 | 055-06144-01 | HARRY WILLIS 3 | N-COM | TA |

Total 0 Deleted

| No | API # | Well Name | Formation Code | Well Status |
|-----------------|-------|-----------|----------------|-------------|
| Report Month: / | | | | |
| | - | - | | |

Attachment Check List

Att Doc Num **Name**

| | |
|-----------|-------------------|
| 401131532 | Form 07 SUBMITTED |
|-----------|-------------------|

Total Attach: 1 Files

General Comments

User Group **Comment** **Comment Date**

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Total: 0 comment(s)