



**OPERATOR'S MONTHLY REPORT OF OPERATIONS**

**OPERATOR INFORMATION**

OGCC Operator Number: <u>10639</u>	Contact Name and Telephone:
Name of Operator: <u>CPX PICEANCE HOLDINGS LLC</u>	Name: <u>Derek Krcil</u>
Address: <u>880 WOLVERINE CT</u>	Phone: <u>(720) 256-1385</u> Fax: <u>( )</u>
City: <u>CASTLE ROCK</u> State: <u>CO</u> Zip: <u>80108</u>	Email: <u>dkrcil@progressivepcs.net</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: Derek Krcil

Title: Production Analyst Date: 2/7/2017 Email: dkrcil@progressivepcs.net

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: 10 Approved: 10 Modified: 1 Deleted: 0

Total 10 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 12/2016				
1	045-16947-00	TPR 1	MNCS	TA
2	045-16947-00	TPR 1	NBRR	TA
3	045-16947-00	TPR 1	WMFK	PR
4	045-16947-00	TPR 1	COZZ	TA
5	045-16947-00	TPR 1	CRCRN	TA
6	045-22155-00	TPR 112-16	WMFK	PR
7	045-22153-00	TPR 176-25	WMFK	WO
8	045-22153-00	TPR 176-25	NBRR	WO
9	045-22153-00	TPR 176-25	MNCS	WO
10	045-16949-00	TPR 132-36	N-COM	TA

Total 1 Modified

No	API #	Well Name	Formation Code	Well Status
Report Month: 12/2016				
10	045-16949-00	TPR 132-36	N-COM	TA

Total 0 Deleted

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

## Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401204092	Form 07 SUBMITTED
401204095	Imported Data
401204097	Imported Data
401205162	ERROR REPORT

Total Attach: 4 Files

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)