



**OPERATOR'S MONTHLY REPORT OF OPERATIONS**

**OPERATOR INFORMATION**

OGCC Operator Number: <u>10384</u>	Contact Name and Telephone:
Name of Operator: <u>GENESIS GAS &amp; OIL COLORADO LLC</u>	Name: <u>Katie Hynes</u>
Address: <u>1660 LINCOLN ST STE 2100</u>	Phone: <u>(720) 8813508</u> Fax: <u>(720) 8813462</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80246</u>	Email: <u>khynes@trinitymgt.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: Katie Hynes  
Title: Landman Date: 3/27/2017 Email: khynes@trinitymgt.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: 2 Approved: 2 Modified: 2 Deleted: 0

Total 2 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 03/2012				
1	103-10462-00	CRU 14-15C-IN100	CMEO	PR
2	103-10561-00	CRU 4401D A23 1N100	WMFK	PR

Total 2 Modified

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1	103-10462-00	CRU 14-15C-IN100	CMEO	PR
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Total 0 Deleted

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

## Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401244073	Form 07 SUBMITTED
401244076	Imported Data
401251015	ERROR REPORT

Total Attach: 3 Files

### General Comments

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

Total: 0 comment(s)