



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: 4/7/2017 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: 2 In Process: 2 Modified: 0 Deleted: 0

Total 2 In Process

No	API #	Well Name	Formation Code	Well Status
Report Month: 11/2016				
1	045-22155-00	TPR 112-16	NBRR	WO
Report Month: 12/2016				
2	045-22155-00	TPR 112-16	MNCS	WO

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

401253947

Imported Data

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)