

FORM
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Rev
08/15

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

06/07/2017

Document Number:

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OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>10602</u>	Contact Name and Telephone:
Name of Operator: <u>MCCLANE ENERGY INC</u>	Name: <u>Gene McClane</u>
Address: <u>1412 103 RD AVE</u>	Phone: <u>(303) 877-9919</u> Fax: <u>()</u>
City: <u>NORTHGLENN</u> State: <u>CO</u> Zip: <u>80260</u>	Email: <u>genemcclane@hotmail.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: Linda Pavelka

Title: Agent Date: 6/7/2017 Email: lindapavelkalp@Gmail.com

By checking this box, operator is requesting an updated Delinquent Report, AFTER the Form 7 has been processed ☐

Operator Comments:

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Monthly Report of Operations

Submitted Items Summary Totals:

Submitted: 1 In Process: 1 Modified: 0 Deleted: 0

Total 1 In Process

No	API #	Well Name	Formation Code	Well Status
Report Month: 08/2016				
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Total 0 Modified

No	API #	Well Name	Formation Code	Well Status
Report Month: /				
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Total 0 Deleted

No	API #	Well Name	Formation Code	Well Status
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Attachment Check List

Att Doc Num

Name

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Total Attach: 0 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)