



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>10311</u>	Contact Name and Telephone:
Name of Operator: <u>SRC ENERGY INC</u>	Name: <u>Spring Heald</u>
Address: <u>1675 BROADWAY SUITE 2600</u>	Phone: <u>(720) 616-4300</u> Fax: <u>(720) 616-4301</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>sheald@srcenergy.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: Spring Heald

Title: Sr. Production Accountant Date: 2/7/2018 Email: sheald@srcenergy.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: 3 Approved: 3 Modified: 0 Deleted: 0

Total 3 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 10/2017				
1	123-25576-00	IKENOUYE F 28-33 CN	NB-CD	PR
2	123-34241-00	IKENOUYE F 28-65HN NI	NBRR	PR
Report Month: 11/2017				
3	123-34241-00	IKENOUYE F 28-65HN NI	NBRR	PR

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

<u>Att Doc Num</u>	<u>Name</u>
401539525	Form 07 SUBMITTED
401539528	Imported Data
401542111	DELINQUENT 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)