



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>74650</u>	Contact Name and Telephone:
Name of Operator: <u>RIM OPERATING INC</u>	Name: <u>Liz Ortiz</u>
Address: <u>5 INVERNESS DRIVE EAST</u>	Phone: <u>(303) 799-9828</u> Fax: <u>(303) 799-4259</u>
City: <u>ENGLEWOOD</u> State: <u>CO</u> Zip: <u>80112</u>	Email: <u>lortiz@rimop.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: Liz Ortiz

Title: Operations Technician Date: 2/9/2018 Email: lortiz@rimop.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: 1 Approved: 1 Modified: 0 Deleted: 0

Total 1 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 12/2017				
1	083-06416-00	BOBCAT BOBCAT 13-13	ISMV	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>
401541346	Form 07 SUBMITTED
401541347	Imported Data

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)