



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: 10668	Contact Name and Telephone:
Name of Operator: CAERUS ENERGY SERVICES LLC	Name: Cheryl Gallagher
Address: 1001 17TH STREET #1600	Phone: (720) 880-6337 Fax: (303) 565-4606
City: DENVER State: CO Zip: 80202	Email: cgallagher@caerusoilandgas.com

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: Cheryl Gallagher

Title: Sr Operations Tech Date: 3/26/2018 Email: cgallagher@caerusoilandgas.c

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: 11 In Process: 11 Modified: 0 Deleted: 0

Total 11 In Process

No	API #	Well Name	Formation Code	Well Status
Report Month: 01/2018				
1	045-11293-00	STORY GULCH UN8506BF26496	WSTCG	IJ
2	045-15495-00	SGU M23 CP01B-27 496	WSTCG	IJ
3	045-15495-00	SGU M23 CP01B-27 496	WSTCA	SI
4	045-21131-00	SG WD08A-19 C19	WSTC	IJ
5	045-21132-00	SG WD11A-19 C19	WSTC	IJ
6	045-21133-00	SG WD16A-19 C19	WSTC	IJ
7	045-21134-00	SG WD03A-30 C19	WSTC	IJ
8	045-21850-00	SG WD09B-30 N30	WSTC	SI
9	045-21853-00	SG WD14A-30 N30	WSTC	SI
10	045-21855-00	SG WD06C-30 N30	WSTC	SI
11	045-21857-00	SG WD01D-30 N30	WSTC	SI

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

401587415

Imported Data

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)