



**OPERATOR'S MONTHLY REPORT OF OPERATIONS**

**OPERATOR INFORMATION**

OGCC Operator Number: <u>10628</u>	Contact Name and Telephone:
Name of Operator: <u>GREENLEAF ENVIRONMENTAL SERVICES LLC</u>	Name: <u>JAKE MCNAIR</u>
Address: <u>PO BOX 99</u>	Phone: <u>(208) 390-2746</u> Fax: <u>( )</u>
City: <u>EASTLAKE</u> State: <u>CO</u> Zip: <u>80614</u>	Email: <u>jakem@greenlfservices.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: JAKE MCNAIR  
 Title: PARTNER Date: 6/5/2018 Email: jakem@greenlfservices.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: 02/2018				
1	077-08255-00	GREENLEAF DILSPOSAL 1	CCRWF	IJ

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>
401663860	Form 07 SUBMITTED
401663866	Imported Data
401663868	Imported Data

Total Attach: 3 Files

### General Comments

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

Total: 0 comment(s)