



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>10626</u>	Contact Name and Telephone:
Name of Operator: <u>DOVER ATWOOD CORPORATION</u>	Name: <u>John Levensgood</u>
Address: <u>1875 HARSH AVENUE SE</u>	Phone: <u>(330) 323-1930</u> Fax: <u>()</u>
City: <u>MASSILLON</u> State: <u>OH</u> Zip: <u>44646</u>	Email: <u>nomail@gmail.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: John Levensgood
 Title: President Date: 8/30/2018 Email: nomail@gmail.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: 5 Approved: 5 Modified: 0 Deleted: 0

Total 5 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 01/2018				
1	009-06412-00	GRIFFITH E 1	TOPK	PR
Report Month: 02/2018				
2	009-06412-00	GRIFFITH E 1	TOPK	PR
Report Month: 03/2018				
3	009-06412-00	GRIFFITH E 1	TOPK	PR
Report Month: 04/2018				
4	009-06412-00	GRIFFITH E 1	TOPK	PR
Report Month: 05/2018				
5	009-06412-00	GRIFFITH E 1	TOPK	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

Att Doc Num

Name

2402434

FORM 7 MONTHLY REPORT OF OPERATIONS SUBMITTED

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)