

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

10/19/2018

Document Number:

401803446

## OPERATOR'S MONTHLY REPORT OF OPERATIONS

## OPERATOR INFORMATION

OGCC Operator Number: <u>10694</u>	Contact Name and Telephone:
Name of Operator: <u>PROVIDENCE OPERATING LLC</u>	Name: <u>JANNA LLOYD</u>
Address: <u>16400 DALLAS PARKWAY SUITE 400</u>	Phone: <u>(303) 5001160</u> Fax: <u>(303) 7706885</u>
City: <u>DALLAS</u> State: <u>TX</u> Zip: <u>75428</u>	Email: <u>janna@flyingbearresources.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: JANNA LLOYD

Title: ANALYST Date: 10/19/2018 Email: janna@flyingbearresources.co

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: 10 Approved: 10 Modified: 6 Deleted: 0

Total 10 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 07/2018				
1	001-09470-00	KALLSEN 1-10	JSND	PR
2	001-07072-00	KALLSEN-14-10X	JSND	PR
3	001-09318-00	STATE 11-16 (DSAND)	DSND	PR
4	001-09318-00	STATE 11-16 (JSAND)	JSND	PR
5	001-09480-00	STATE 22-16	JSND	PR
Report Month: 08/2018				
6	001-09470-00	KALLSEN 1-10	JSND	PR
7	001-07072-00	KALLSEN-14-10X	JSND	PR
8	001-09318-00	STATE 11-16 (DSAND)	DSND	PR
9	001-09318-00	STATE 11-16 (JSAND)	JSND	PR
10	001-09480-00	STATE 22-16	JSND	PR

Total 6 Modified

No	API #	Well Name	Formation Code	Well Status
Report Month: 07/2018				
3	001-09318-00	STATE 11-16 (DSAND)	DSND	PR
4	001-09318-00	STATE 11-16 (JSAND)	JSND	PR
5	001-09480-00	STATE 22-16	JSND	PR
Report Month: 08/2018				
8	001-09318-00	STATE 11-16 (DSAND)	DSND	PR
9	001-09318-00	STATE 11-16 (JSAND)	JSND	PR
10	001-09480-00	STATE 22-16	JSND	PR

Total 0 Deleted

No	API #	Well Name	Formation Code	Well Status
Report Month: /				
	- -			

## Attachment Check List

**Att Doc Num**

**Name**

401803446	Form 07 SUBMITTED
401803447	Imported Data
401803453	ERROR REPORT

Total Attach: 3 Files

## General Comments

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)