



**OPERATOR'S MONTHLY REPORT OF OPERATIONS**

**OPERATOR INFORMATION**

OGCC Operator Number: <u>10598</u>	Contact Name and Telephone:
Name of Operator: <u>SANDRIDGE EXPLORATION &amp; PRODUCTION LLC</u>	Name: <u>Lauren Best</u>
Address: <u>123 ROBERT S KERR AVE</u>	Phone: <u>(405) 326-9142</u> Fax: <u>( )</u>
City: <u>OKLAHOMA CITY</u> State: <u>OK</u> Zip: <u>73102</u>	Email: <u>lbest@sdrge.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: Lauren Best

Title: PR Accting Supervisor Date: 3/29/2019 Email: lbest@sdrge.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 In Process: 1 Modified: 0 Deleted: 0

Total 1 In Process

No	API #	Well Name	Formation Code	Well Status
Report Month: 10/2018				
1	057-06466-00	JUDY 1-30 1-30	DK-LK	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

**Att Doc Num**      **Name**

401988972	Imported Data
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Total Attach: 1 Files

### General Comments

**User Group**      **Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)