



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>10684</u>	Contact Name and Telephone:
Name of Operator: <u>EPIC ENERGY LLC</u>	Name: <u>Marisa Harriman</u>
Address: <u>7415 EAST MAIN STREET</u>	Phone: <u>(503) 9511671</u> Fax: <u>()</u>
City: <u>FARMINGTON</u> State: <u>NM</u> Zip: <u>87402</u>	Email: <u>marisa@walsheng.net</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: Marisa Harriman
Title: Accounting Date: 9/9/2019 Email: marisa@walsheng.net

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: 8 Approved: 8 Modified: 0 Deleted: 0

Total 8 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 05/2019				
1	067-08220-00	BONDAD 33-9 #34A DAKOTA	DKTA	PR
2	067-07984-00	UTE#45	PCCF	PR
3	067-08220-00	BONDAD 33-9 #34A MV	MVRD	PR
4	067-05404-00	BONDAD 33-9 #34	MVRD	PR
5	067-08196-00	BONDAD 33-9 #11A	MVRD	PR
6	067-09851-00	IGNACIO 33-7 #12A	MVRD	PR
7	067-05624-00	MCCULLOCH #2	MVRD	si
8	067-05619-00	MCCULLOCH #3	MVRD	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

<u>Att Doc Num</u>	<u>Name</u>
402170483	Form 07 SUBMITTED
402170484	Imported Data

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)