



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>10314</u>	Contact Name and Telephone:
Name of Operator: <u>DSCHAAK CONSULTING LLC</u>	Name: <u>Jim Dschaak</u>
Address: <u>410 WOODBURG DR</u>	Phone: <u>(970) 629-9900</u> Fax: <u>()</u>
City: <u>CRAIG</u> State: <u>CO</u> Zip: <u>81625</u>	Email: <u>jldschaak@nctelecom.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: Jim Dschaak
 Title: Pres Date: 10/16/2019 Email: jldschaak@nctelecom.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: 2 Approved: 2 Modified: 2 Deleted: 0

Total 2 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 08/2019				
1	081-07778-00	VOLOSHIN 3-25	NBRR	SI
2	081-07779-00	KOWACH 3-25	NBRR	SI

Total 2 Modified

No	API #	Well Name	Formation Code	Well Status
Report Month: 08/2019				
1	081-07778-00	VOLOSHIN 3-25	NBRR	SI
2	081-07779-00	KOWACH 3-25	NBRR	SI

Total 0 Deleted

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

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402211067	Form 07 SUBMITTED
402211069	Imported Data
402215104	ERROR REPORT

Total Attach: 3 Files

General Comments

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

Total: 0 comment(s)