



**OPERATOR'S MONTHLY REPORT OF OPERATIONS**

**OPERATOR INFORMATION**

OGCC Operator Number: <u>10110</u>	Contact Name and Telephone:
Name of Operator: <u>GREAT WESTERN OPERATING COMPANY LLC</u>	Name: <u>Andrea Simenson</u>
Address: <u>1001 17TH STREET #2000</u>	Phone: <u>(720) 595-2251</u> Fax: <u>(866) 742-1784</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>asimenson@gwp.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: Andrea Simenson  
 Title: Production Accountant Date: 7/14/2020 Email: asimenson@gwp.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: 3 In Process: 3 Modified: 0 Deleted: 0

Total 3 In Process

No	API #	Well Name	Formation Code	Well Status
Report Month: 02/2020				
1	001-09512-00	NAUMAN 1-14	JSND	TA
Report Month: 03/2020				
2	001-09512-00	NAUMAN 1-14	JSND	TA
Report Month: 04/2020				
3	001-09512-00	NAUMAN 1-14	JSND	TA

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**

402442658	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)