



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>3990</u>	Contact Name and Telephone:
Name of Operator: <u>ARGONEX COMPANY LLC</u>	Name: <u>Lawrence Hartnett</u>
Address: <u>PO BOX 810</u>	Phone: <u>(936) 5901179</u> Fax: <u>()</u>
City: <u>SEDALIA</u> State: <u>CO</u> Zip: <u>80135</u>	Email: <u>ularry@attglobal.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: Lawrence Hartnett

Title: Consultant Date: 6/13/2021 Email: ularry@attglobal.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 In Process: 2 Modified: 0 Deleted: 0

Total 2 In Process

No	API #	Well Name	Formation Code	Well Status
Report Month: 04/2021				
1	001-08472-00	CHAMPLIN (HER) 1-1	DSND	PR
2	001-08723-00	CHAMPLIN (HER) 2-8	DSND	PR

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 List

Att Doc Num

Name

402716673

Imported Data

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)