



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>10774</u>	Contact Name and Telephone:
Name of Operator: <u>SUMMIT OIL & GAS LLC</u>	Name: <u>Benjamin Pittsley</u>
Address: <u>PO BOX 983038</u>	Phone: <u>(603) 219-5011</u> Fax: <u>()</u>
City: <u>PARK CITY</u> State: <u>UT</u> Zip: <u>84098</u>	Email: <u>BP@S-Companies.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: Benjamin Pittsley

Title: Partner Date: 4/15/2022 Email: BP@S-Companies.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: 02/2022				
1	123-50202-00	CASTOR 7-59 12-1-1	NBRR	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

Att Doc Num	Name

Total Attach: 0 Files

General Comments

User Group

Comment

Comment Date

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)