



## Form 3B

### Summary Information Overview

Form Name: **Form 3B - Federal Financial Assurance Wells**  
Document Number: **403113818**  
Date Submitted: **8/1/2022**

#### Operator Information

- Operator Number: **10734**
- Operator Name: **HIGH RIVER RESOURCES OPERATING LLC**
- Operator Address: **3838 OAK LAWN AVE SUITE 710**
- Operator City: **DALLAS**
- Operator State: **TX**
- Operator Zip: **75219**
- First Name: **AMY**
- Last Name: **ARCHULETA**
- Contact Phone: **505-320-6917**
- Contact Email: **aarchuleta@highriverllc.com**

#### Federal Financial Assurance

- Total imported wells: **11**
- Federal Financial Assurance Certification:
- Number of Wells with Federal Financial Assurance: **8**
- Total Amount of Federal Financial Assurance: **\$21,052.56**

#### Signature and Certification

- Operator Comments:
- Name: **AMY ARCHULETA**
- Title: **REGULATORY SUPERVISOR**
- Email: **aarchuleta@highriverllc.com**
- Phone: **505-320-6917**
- Signature:

