



**OPERATOR'S MONTHLY REPORT OF OPERATIONS**

**OPERATOR INFORMATION**

OGCC Operator Number: <u>10797</u>	Contact Name and Telephone:
Name of Operator: <u>DESERT EAGLE OPERATING LLC</u>	Name: <u>Wesley Marshall</u>
Address: <u>17101 PRESTON RD SUITE 105</u>	Phone: <u>(214) 886-5098</u> Fax: <u>( )</u>
City: <u>DALLAS</u> State: <u>TX</u> Zip: <u>75248</u>	Email: <u>wmarshall@prohelium.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: cathy Bulf

Title: Manaager Date: 8/18/2023 Email: cathybulf@gmail.com

By checking this box, operator is requesting an updated Delinquent Report, AFTER the Form 7 has been processed

Operator Comments:

Revised to correctly state gas vnted, no gas used

**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: 06/2023				
1	071-09920-00	RED ROCKS 1-13	LYNS	PR
2	071-09919-00	RED ROCKS 35-15	LYNS	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

<u>Att Doc Num</u>	<u>Name</u>
403501494	Imported Data
403501498	Imported Data

Total Attach: 2 Files

## General Comments

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

Total: 0 comment(s)