



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: 10814	Contact Name and Telephone:
Name of Operator: MDS ENERGY DEVELOPMENT LLC	Name: Kelsi Welch
Address: 409 BUTLER RD SUITE A	Phone: (303) 257-0107 Fax: ()
City: KITTANNING State: PA Zip: 16201	Email: kelsi.welch@iptwell.com

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: Kelsi Welch

Title: Permitting & Compliance Date: 10/20/2023 Email: kelsi.welch@iptwell.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: 12 Approved: 12 Modified: 12 Deleted: 0

Total 12 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 07/2022				
7	123-50752-00	CASTOR 7-59 10-3-8	N-COM	DG
Report Month: 07/2023				
1	123-50750-00	CASTOR 7-59 10-3-1	N-COM	DG
4	123-50751-00	CASTOR 7-59 10-3-5	N-COM	DG
10	123-50755-00	CASTOR 7-59 10-3-12	N-COM1	DG
Report Month: 08/2023				
2	123-50750-00	CASTOR 7-59 10-3-1	N-COM	WO
5	123-50751-00	CASTOR 7-59 10-3-5	N-COM	WO
8	123-50752-00	CASTOR 7-59 10-3-8	N-COM	DG
11	123-50755-00	CASTOR 7-59 10-3-12	N-COM1	DG
Report Month: 09/2023				
3	123-50750-00	CASTOR 7-59 10-3-1	N-COM	SI
6	123-50751-00	CASTOR 7-59 10-3-5	N-COM	SI
9	123-50752-00	CASTOR 7-59 10-3-8	N-COM	SI
12	123-50755-00	CASTOR 7-59 10-3-12	N-COM1	SI

Total 12 Modified

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Total 0 Deleted

No	API #	Well Name	Formation Code	Well Status
Report Month: /				
	-	-		

Attachment List

Att Doc Num

Name

403567241	Form 07 SUBMITTED
403567248	Imported Data
403567252	Imported Data

Total Attach: 3 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)