



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

| | |
|---|--------------------------------|
| OGCC Operator Number: 10831 | Contact Name and Telephone: |
| Name of Operator: SPELLBOUND ENERGY LLC | Name: Brent Schneider |
| Address: 511 16TH STREET SUITE 600 | Phone: (303) 407-8632 Fax: () |
| City: DENVER State: CO Zip: 80202 | Email: brent@teocalienergy.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: Brent Schneider

Title: Engineer Date: 2/5/2024 Email: brent@teocalienergy.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: 3 Approved: 3 Modified: 0 Deleted: 0

Total 3 Approved

| No | API # | Well Name | Formation Code | Well Status |
|-----------------------|--------------|--------------------|----------------|-------------|
| Report Month: 12/2023 | | | | |
| 1 | 123-50496-00 | AKBARY #36-3H | CODL | PR |
| 2 | 123-47488-00 | DEPORTER #28-27-2H | CODL | PR |
| 3 | 123-42285-00 | THOMAS EAST 1 | CODL | 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

| | |
|-----------|-------------------|
| 403676936 | Form 07 SUBMITTED |
| 403677041 | Imported Data |
| 403677088 | Imported Data |
| 403677102 | Imported Data |

Total Attach: 4 Files

General Comments

User Group

Comment

Comment Date

| | | |
|--|--|---------------------|
| | | Stamp Upon Approval |
|--|--|---------------------|

Total: 0 comment(s)