



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

ECMC Operator Number: <u>10820</u>	Contact Name and Telephone:
Name of Operator: <u>ROUGHHOUSE OIL & GAS LLC</u>	Name: <u>Ryan Smith</u>
Address: <u>1475 SIOUX TRL</u>	Phone: <u>(970) 396-3747</u> Fax: <u>()</u>
City: <u>ELIZABETH</u> State: <u>CO</u> Zip: <u>80107</u>	Email: <u>roughhouseog@gmail.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: Ryan Smith

Title: Manager Date: 5/9/2024 Email: roughhouseog@gmail.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: 2 Approved: 2 Modified: 0 Deleted: 0

Total 2 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 03/2024				
1	123-08344-00	SCHEIDCOOKSEY1	DSND	PR
2	123-08361-00	SCHEIDCOOKSEY2	DSND	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
403785766	Form 07 SUBMITTED
403785774	Imported Data
403785830	Imported Data
403785833	Imported Data
403785863	Imported Data
403785864	Imported Data

Total Attach: 6 Files

General Comments

User Group	Comment	Comment Date
		Stamp Upon Approval

Total: 0 comment(s)