



## OPERATOR'S MONTHLY REPORT OF OPERATIONS

## OPERATOR INFORMATION

ECMC Operator Number: 10774	Contact Name and Telephone:
Name of Operator: SUMMIT OIL & GAS LLC	Name: Brent Dullack
Address: PO BOX 983038	Phone: (303) 653-4407 Fax: ( )
City: PARK CITY State: UT Zip: 84098	Email: bd@s-companies.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 Dullack

Title: Operations Manager Date: 9/14/2024 Email: bd@s-companies.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 In Process: 3 Modified: 0 Deleted: 0

Total 3 In Process

No	API #	Well Name	Formation Code	Well Status
Report Month: 07/2024				
1	123-50202-00	CASTOR 7-59 #12-1-1	NBRR	PR
2	123-50201-00	CASTOR 7-59 #12-1-3	NBRR	PR
3	123-50205-00	CASTOR 7-59 #12-1-5	NBRR	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**

403921213	Imported Data
403921214	Imported Data

Total Attach: 2 Files

**General Comments**

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)