



Form 7 - Monthly Report of Operation

Summary Information Overview

Form Name: **Form 7 - Monthly Report of Operation**
Document Number: **404137675**
Date Submitted: **3/22/2025**

Operator Information

Operator Number: **25255**
Operator Name: **DUKE GAS COMPANY LLC**
Operator Address: **22500 COUNTY RD 24 ATTN: DIANA CANTRALL**
Operator City: **VERNON**
Operator State: **CO**
Operator Zip: **80755**
First Name: **DIANA**
Last Name: **CANTRALL**
Contact Phone: **(970) 332-5610**
Contact Email: **djcantrall@gmail.com**

Monthly Report of Operation

Well Status & Production Provided:
Produced Water Provided:
Deep Geothermal Provided:

Signature and Certification

I hereby certify all statements made on this form are, to the best of my knowledge at the time of submittal, true, correct, and complete.

Operator Comments:
Name: **DIANA CANTRALL**
Title: **OWNER**
Email: **djcantrall@gmail.com**
Phone: **(970) 332-5610**
Signature:

*Diana
Carroll*

Associated Documents

404137679 - FORM 7 IMPORTED WELL STATUS PRODUCTION

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Jared S. Polis, Governor | Julie Murphy, Director | Scott Cuthbertson, Deputy Director Operations

