



## Form 7 - Monthly Report of Operation

### Summary Information Overview

Form Name: **Form 7 - Monthly Report of Operation**  
Document Number: **404379282**  
Date Submitted: **10/3/2025**  
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### Operator Information

Operator Number: **10764**  
Operator Name: **NUEVIDA RESOURCES LLC**  
Operator Address: **5950 CEDAR SPRINGS RD STE #100 ATTN: DICK PATE**  
Operator City: **DALLAS**  
Operator State: **TX**  
Operator Zip: **75235**  
First Name: **Brittany**  
Last Name: **Kline**  
Contact Phone: **(505) 327-4892**  
Contact Email: **brittany@walsheng.net**

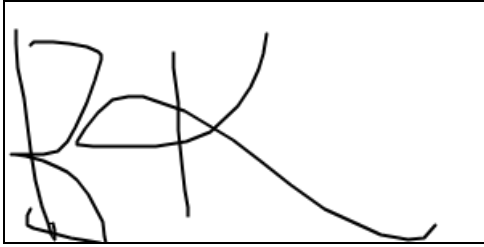
### Monthly Report of Operation

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: **Brittany Kline**  
Title: **Production Reporter**  
Email: **brittany@walsheng.net**  
Phone: **(505) 327-4892**  
Signature:



## Associated Documents

404379285 - FORM 7 IMPORTED WELL STATUS PRODUCTION

404379288 - FORM 7 SUBMITTED

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