



Form 7 - Monthly Report of Operation

Summary Information Overview

Form Name: **Form 7 - Monthly Report of Operation**
Document Number: **404493330**
Date Submitted: **1/5/2026**
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Operator Information

Operator Number: 10518
Operator Name: CONFLUENCE DJ LLC
Operator Address: 5847 SAN FELIPE ST STE 940 ATTN: CURTIS EMERSON
Operator City: HOUSTON
Operator State: TX
Operator Zip: 77057
First Name: DONNA
Last Name: AGRELLA
Contact Phone: (720) 881-3554
Contact Email: dagrella@trinitymgt.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: DONNA AGRELLA
Title: Accountant

Email: dagrella@trinitymgt.com

Phone: (720) 881-3554

Signature:

Donna Agrella

Associated Documents

404493333 - FORM 7 IMPORTED WELL STATUS PRODUCTION

404493334 - FORM 7 IMPORTED PRODUCED WATER

404493339 - FORM 7 SUBMITTED

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

