



## 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**

### 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

SUBMITTED

### 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

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