



**OPERATOR'S MONTHLY REPORT OF OPERATIONS**

**OPERATOR INFORMATION**

OGCC Operator Number: <u>10150</u>	Contact Name and Telephone:
Name of Operator: <u>BLACK HILLS PLATEAU PRODUCTION LLC</u>	Name: <u>Dale Baumgarten</u>
Address: <u>1515 WYNKOOP ST STE 500</u>	Phone: <u>(303) 566-3376</u> Fax: <u>( )</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>dale.ekberg@blackhillcorp.com</u>

**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: Dale Baumgarten  
 Title: Production Analyst Date: 2/8/2016 Email: dale.ekberg@blackhillcorp.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: 6 Approved: 6 Modified: 0 Deleted: 0

Total 6 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 07/2014				
1	077-08192-00	FEDERAL 1-3	CRCRN	PA
3	077-08458-00	SWETLAND 1-5	DKTA	PA
Report Month: 08/2014				
2	077-08192-00	FEDERAL 1-3	CRCRN	PA
4	077-08458-00	SWETLAND 1-5	DKTA	PA
5	045-06774-00	HANCOCK GULCH FEE 10-1	MRSN	PA
Report Month: 09/2014				
6	045-06774-00	HANCOCK GULCH FEE 10-1	MRSN	PA

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 Check List

**Att Doc Num**

**Name**

400985565	Form 07 SUBMITTED
400985569	Monthly Report Of Operations

Total Attach: 2 Files

### General Comments

**User Group**

**Comment**

**Comment Date**

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)