

**FORM
07**Rev
08/15**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

03/21/2016

Document Number:

2212174**OPERATOR'S MONTHLY REPORT OF OPERATIONS****OPERATOR INFORMATION**OGCC Operator Number: 10605Name of Operator: APEX OIL VENTURES INCAddress: 8823 S. REDWOOD ROAD #D-1City: WEST JORDAN State: UT Zip: 84088

Contact Name and Telephone:

Name: JAN CALLISTERPhone: (801) 487-4721 Fax: ()Email: NOMAIL@GMAIL.COM**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: JAN CALLISTERTitle: PRESIDENTDate: 3/15/2016Email: NOMAIL@GMAIL.COMBy 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: 6Approved: 6Modified: 1Deleted: 0

Total 6 Approved

| No | API # | Well Name | Formation Code | Well Status |
|-----------------------|--------------|-----------------------------|----------------|-------------|
| Report Month: 01/2016 | | | | |
| 1 | 103-05379-00 | P.R.-TRIGOOD-GOV'T 8 | MNCS | SI |
| 2 | 103-05400-00 | P.R.-TRIGOOD-GOV'T(0365) 10 | MNCS | PR |
| 3 | 103-06007-00 | P.R.-TRIGOOD-GOV'T 7 | MNCS | SI |
| 4 | 103-07182-00 | GILLAM-TRIGOOD- GOV'T 14 | MNCS | PR |
| 5 | 103-07327-00 | GILLAM-TRIGOOD-GOV'T 16 | MNCS | SI |
| 6 | 103-07095-00 | PONKA-CAMPBELL-GOV'T 6 | MNCS | PR |

Total 1 Modified

| No | API # | Well Name | Formation Code | Well Status |
|-----------------------|--------------|------------------------|----------------|-------------|
| Report Month: 01/2016 | | | | |
| 6 | 103-07095-00 | PONKA-CAMPBELL-GOV'T 6 | MNCS | PR |

Total 0 Deleted

| No | API # | Well Name | Formation Code | Well Status |
|-----------------|-------|-----------|----------------|-------------|
| Report Month: / | | | | |
| | - | - | | |

Attachment Check List

Att Doc Num

Name

| | |
|-----------|---|
| 2212174 | FORM 7 MONTHLY REPORT OF OPERATIONS SUBMITTED |
| 401020780 | ERROR REPORT |

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

| | | |
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Total: 0 comment(s)