



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>30560</u>	Contact Name and Telephone:
Name of Operator: <u>FORTITUDE EXPLORATION CO</u>	Name: <u>GREGORY P. DILLON</u>
Address: <u>P O BOX 5417</u>	Phone: <u>(850) 496-5363</u> Fax: <u>()</u>
City: <u>NAVARRE</u> State: <u>FL</u> Zip: <u>32566</u>	Email: <u>NOMAIL@GMAIL.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: GREGORY P. DILLON
Title: PRESIDENT Date: 5/26/2016 Email: NOMAIL@GMAIL.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: 2 Approved: 2 Modified: 0 Deleted: 0

Total 2 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 03/2016				
1	123-10141-00	U S A 21-6	JSND	PR
Report Month: 04/2016				
2	123-10141-00	U S A 21-6	JSND	PR

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

2212886

OPERATOR'S MONTHLY PRODUCTION REPORT (Form 7)

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Total: 0 comment(s)