



**OPERATOR'S MONTHLY REPORT OF OPERATIONS**

**OPERATOR INFORMATION**

OGCC Operator Number: <u>10213</u>	Contact Name and Telephone:
Name of Operator: <u>DJ RESOURCES INC</u>	Name: <u>Connie Mitchell</u>
Address: <u>1600 BROADWAY #1960</u>	Phone: <u>(303) 726-0662</u> Fax: <u>( )</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>cmitchell@prof-data.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: Connie Mitchell

Title: Agent Date: 9/14/2017 Email: cmitchell@prof-data.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: 4 In Process: 4 Modified: 0 Deleted: 0

Total 4 In Process

No	API #	Well Name	Formation Code	Well Status
Report Month: 07/2017				
1	123-35397-00	BLACK HOLLOW #8-67-16 3H	NBRR	PR
2	123-33808-00	OWL CREEK #8-64-30 1H	NBRR	PR
3	123-33796-00	OWL CREEK #8-64-6 1H	NBRR	PR
4	069-06436-00	RAWHIDE FLATS #10-68-16 1H	NBRR	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**

401402733

Imported Data

Total Attach: 1 Files

### General Comments

**User Group**

**Comment**

**Comment Date**

Stamp Upon  
Approval

Total: 0 comment(s)