



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: 100264	Contact Name and Telephone:
Name of Operator: XTO ENERGY INC	Name: AUBREY TOWNSEND
Address: 600 E EXCHANGE AVE	Phone: (817) 3785366 Fax: ()
City: FORTH WORTH State: TX Zip: 76164	Email: AUBREY_TOWNSEND@XTOENERGY.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: AUBREY TOWNSEND

Title: PRODUCTION ANALYST Date: 4/12/2018 Email: AUBREY_TOWNSEND@XTO

By checking this box, operator is requesting an updated Delinquent Report, AFTER the Form 7 has been processed ☐

Operator Comments:

0118 CO XOM RNPU 197 15A PPA

Monthly Report of Operations

Submitted Items Summary Totals:

Submitted: 3 In Process: 3 Modified: 0 Deleted: 0

Total 3 In Process

No	API #	Well Name	Formation Code	Well Status
Report Month: 01/2018				
1	103-12269-00	RNPU 197 15A1	COZZ	PR
2	103-12269-00	RNPU 197 15A1	CRCRN	PR
3	103-12269-00	RNPU 197 15A1	WFCM	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

401605412

Imported Data

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)