



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>10669</u>	Contact Name and Telephone:
Name of Operator: <u>NICKEL ROAD OPERATING LLC</u>	Name: <u>JENNIFER LIND</u>
Address: <u>600 17TH STREET #610S</u>	Phone: <u>(303) 406-1117</u> Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u>	Email: <u>JENNIFER.LIND@NICKELROADOPERATING.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: JENNIFER LIND
Title: REG & ENV MANAGER Date: 10/15/2018 Email: JENNIFER.LIND@NICKELRO

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

Operator Comments:

ORIGINAL SUBMITTAL FOR AUGUST, 2018

Monthly Report of Operations

Submitted Items Summary Totals:

Submitted: 4 Approved: 4 Modified: 4 Deleted: 0

Total 4 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 08/2018				
1	123-46430-00	NOBLE 5X-HC-05-03-68	N-COM	WO
2	123-46424-00	NOBLE 5X-HNB-05-03-68	N-COM	PA
3	123-46421-00	NOBLE 5X-HNC-05-03-68	N-COM	WO
4	123-46424-01	NOBLE ST 5X-HNB-05-03-68	N-COM	WO

Total 4 Modified

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Total 0 Deleted

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

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401796106	Form 07 SUBMITTED
401796109	Imported Data
401796112	Imported Data

Total Attach: 3 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)