



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

| | |
|--|---|
| OGCC Operator Number: <u>81490</u> | Contact Name and Telephone: |
| Name of Operator: <u>ST CROIX OPERATING INC</u> | Name: <u>Marlin Sjaarda</u> |
| Address: <u>P O BOX 13799</u> | Phone: <u>(763) 5684236</u> Fax: <u>()</u> |
| City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80201</u> | Email: <u>stcroixop@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: Marlin Sjaarda

Title: Contract CFO Date: 3/14/2020 Email: stcroixop@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: 6 In Process: 6 Modified: 0 Deleted: 0

Total 6 In Process

| No | API # | Well Name | Formation Code | Well Status |
|-----------------------|--------------|----------------------|----------------|-------------|
| Report Month: 01/2020 | | | | |
| 1 | 121-10609-00 | HEIMERMAN 18-2 | JSND | PR |
| 2 | 121-10618-00 | VOLBERDING FARMS 7-1 | JSND | PR |
| 3 | 121-08871-00 | STATE OF COLO. 2-16 | JSND | PR |
| 4 | 121-10990-00 | STATE 11-16 | JSND | IJ |
| 5 | 121-11082-00 | PRONGHORN 1 | JSND | SI |
| 6 | 121-11087-00 | SHOTGUN 1 | JSND | SI |

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**

| | |
|-----------|---------------|
| 402343113 | Imported Data |
|-----------|---------------|

Total Attach: 1 Files

General Comments

User Group **Comment**

Comment Date

| | | |
|--|--|------------------------|
| | | Stamp Upon Approval |
|--|--|------------------------|

Total: 0 comment(s)