



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>61250</u>	Contact Name and Telephone:
Name of Operator: <u>MULL DRILLING COMPANY INC</u>	Name: <u>Risa Carter</u>
Address: <u>1700 N WATERFRONT PKWY B#1200</u>	Phone: <u>(316) 264-6366</u> Fax: <u>(316) 264-6440</u>
City: <u>WICHITA</u> State: <u>KS</u> Zip: <u>67206-6637</u>	Email: <u>rcarter@mulldrilling.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: Risa Carter

Title: Prod Tech Date: 5/9/2020 Email: rcarter@mulldrilling.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: 02/2020				
1	061-06869-00	TSA UNIT #1-14	MRRW	SI
2	061-06869-00	TSA UNIT #1-14	MSSP	PR
3	061-06869-00	TSA UNIT #1-14	LNSNG	PR
4	061-06869-00	TSA UNIT #1-14	MRTN	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

<u>Att Doc Num</u>	<u>Name</u>
402394104	Imported Data
402394105	Imported Data

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)