



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>100264</u>	Contact Name and Telephone:
Name of Operator: <u>XTO ENERGY INC</u>	Name: <u>Allison Jackson</u>
Address: <u>210 PARK AVENUE STE 2240</u>	Phone: <u>(281) 801-2772</u> Fax: <u>()</u>
City: <u>OKLAHOMA CITY</u> State: <u>OK</u> Zip: <u>73102</u>	Email: <u>allison.jackson@exxomobil.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: Allison Jackson

Title: Production Coordinator Date: 1/18/2023 Email: allison.jackson@exxomobil.com

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

Operator Comments:

09-102022 CO PURG FORM 7

Monthly Report of Operations

Submitted Items Summary Totals:

Submitted: 2 In Process: 2 Modified: 0 Deleted: 0

Total 2 In Process

No	API #	Well Name	Formation Code	Well Status
Report Month: 09/2022				
1	071-09126-00	APACHE CANYON 06-09V	VRMJ	PA
Report Month: 10/2022				
2	071-09126-00	APACHE CANYON 06-09V	VRMJ	PA

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 List

Att Doc Num

Name

403293791

Imported Data

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)