

State of Colorado
Energy & Carbon Management Commission

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OGCC RECEPTION

Receive Date:

12/19/2023

Document Number:

403630418

OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>55850</u>	Contact Name and Telephone:
Name of Operator: <u>MCLANE TRUST* DIXIE</u>	Name: <u>LYNN COLLIER</u>
Address: <u>P O BOX 420</u>	Phone: <u>(505) 325-1821</u> Fax: <u>()</u>
City: <u>FARMINGTON</u> State: <u>NM</u> Zip: <u>87499-0420</u>	Email: <u>LYNN.COLLIER@DUGANPRODUCTION.CO</u>
	<u>M</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: LYNN COLLIER

Title: PROD ACCNTING SUPERVISOR Date: 12/19/2023 Email: LYNN.COLLIER@DUGANPRO

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: 1 Approved: 1 Modified: 0 Deleted: 0

Total 1 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 10/2023				
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Total 0 Modified

No	API #	Well Name	Formation Code	Well Status
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Total 0 Deleted

No	API #	Well Name	Formation Code	Well Status
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Attachment List

Att Doc Num

Name

403630418

Form 07 SUBMITTED

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)