



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

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

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				
1	067-06049-00	SPATTER 4	DKTA	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 List

Att Doc Num

Name

403630418

Form 07 SUBMITTED

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

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Stamp Upon Approval

Total: 0 comment(s)