



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>10797</u>	Contact Name and Telephone:
Name of Operator: <u>DESERT EAGLE OPERATING LLC</u>	Name: <u>Wesley Marshall</u>
Address: <u>17101 PRESTON RD SUITE 105</u>	Phone: <u>(214) 886-5098</u> Fax: <u>()</u>
City: <u>DALLAS</u> State: <u>TX</u> Zip: <u>75248</u>	Email: <u>wmarshall@prohelium.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: Cathy Bulf

Title: Manager Date: 12/19/2023 Email: cathybulf@gmail.com

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

Operator Comments:

This revision is to correct incorrect calculations. These are helium wells. No gas is vented, flared, or used on location. No water is produced.

Monthly Report of Operations

Submitted Items Summary Totals:

Submitted: 5 Approved: 5 Modified: 3 Deleted: 0

Total 5 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 10/2023				
1	071-09920-00	RED ROCKS 1-13	LYNS	PR
2	071-09919-00	RED ROCKS 35-15	LYNS	PR
3	071-09930-00	RED ROCKS 35-08	N-COM	PR
4	071-09928-00	RED ROCKS 1-14	N-COM	PR
5	071-09931-00	RED ROCKS 1-16	N-COM	PR

Total 3 Modified

No	API #	Well Name	Formation Code	Well Status
Report Month: 10/2023				
3	071-09930-00	RED ROCKS 35-08	N-COM	PR
4	071-09928-00	RED ROCKS 1-14	N-COM	PR
5	071-09931-00	RED ROCKS 1-16	N-COM	PR

Total 0 Deleted

No	API #	Well Name	Formation Code	Well Status
Report Month: /				
	-	-		

Attachment List

<u>Att Doc Num</u>	<u>Name</u>
403630882	Form 07 SUBMITTED
403630887	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)