



**OPERATOR'S MONTHLY REPORT OF OPERATIONS**

**OPERATOR INFORMATION**

OGCC Operator Number: <u>200077</u>	Contact Name and Telephone:
Name of Operator: <u>CHARLES P DUNNING LLC</u>	Name: <u>Jeff Dunning</u>
Address: <u>PO BOX 1365</u>	Phone: <u>(940) 535-4149</u> Fax: <u>( )</u>
City: <u>FORT MORGAN</u> State: <u>CO</u> Zip: <u>80701</u>	Email: <u>dunning@me.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: Jeff Dunning

Title: Office Employee Date: 7/29/2022 Email: dunning@me.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: 04/2022				
1	001-09750-00	IKEY 1	JSND	PR
2	001-06031-00	JOLLY-PLATTS 1	JSND	SI
3	001-06060-00	JOLLY-PLATTS 2	JSND	PR
4	087-07972-00	WAGERS 1-B	DSND	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**

403121040	Imported Data
403121041	Imported Data

Total Attach: 2 Files

## General Comments

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
--	--	------------------------

Total: 0 comment(s)