



## Form 3A - Financial Assurance

### Summary Information Overview

Form Name: **Form 3A - Financial Assurance**  
Document Number: **403912074**  
Date Submitted: **11/15/2024**  
Date Approved: **12/17/2024**

### Operator Information

Operator Number: **10671**  
Operator Name: **EDGE ENERGY II LLC**  
Operator Address: **600 12TH STREET SUITE 115 ATTN: ERIK LARSEN**  
Operator City: **GOLDEN**  
Operator State: **CO**  
Operator Zip: **80401**  
First Name: **Erik**  
Last Name: **Larsen**  
Contact Phone: **(303) 547-0792**  
Contact Email: **elarsen@edgeenergy1.com**  
Subsidiary Operators: **None**

### Summary

Financial Assurance Option: **3**  
Financial Assurance Plan Amount \$: **\$2,030,000.00**  
Contribution Amount %: **5%**  
Contribution Amount \$: **\$101,500.00**  
Active Financial Assurance \$: **\$125,000.00**  
Adjusted Financial Assurance Amount \$: **\$201,500.00**  
Form 3A - Balance \$: **\$0.00**

### Rule 702 - Plugging, Abandonment, and Reclamation

Total Financial Assurance Required: **\$2,030,000.00**  
Contribution Amount \$: **\$101,500.00**  
Active Financial Assurance \$: **\$100,000.00**  
Adjusted Financial Assurance Amount \$: **\$201,500.00**

Form 3A - Rule 702 Balance \$: **\$0.00**

## Rule 703 - Other Oil and Gas Facilities & Operations

Total Financial Assurance Required: **\$0.00**  
Contribution Amount \$: **\$0.00**  
Active Financial Assurance \$: **\$0.00**  
Adjusted Financial Assurance Amount \$: **\$0.00**  
Form 3A - Rule 703 Balance \$: **\$0.00**

---

703 (E&P Waste Facilities) - Total Financial Assurance Required: **\$0.00**  
Contribution Amount \$: **\$0.00**  
Active Financial Assurance \$: **\$0.00**  
Adjusted Financial Assurance Amount \$: **\$0.00**  
Form 3A - Rule 703 Waste Facilities Balance \$: **\$0.00**

---

703 (Remediation Projects) - Total Financial Assurance Required: **\$0.00**  
Contribution Amount \$: **\$0.00**  
Active Financial Assurance \$: **\$0.00**  
Adjusted Financial Assurance Amount \$: **\$0.00**  
Form 3A - Rule 703 Remediation Projects Balance \$: **\$0.00**

---

703 (Seismic Operations) - Total Financial Assurance Required: **\$0.00**  
Contribution Amount \$: **\$0.00**  
Active Financial Assurance \$: **\$0.00**  
Adjusted Financial Assurance Amount \$: **\$0.00**  
Form 3A - Rule 703 Seismic Operations Balance \$: **\$0.00**

---

703 (Gas Facilities) - Financial Assurance Selection: **Blanket**  
703 (Gas Facilities) - Total Financial Assurance Required: **\$0.00**  
Contribution Amount \$: **\$0.00**  
Active Financial Assurance \$: **\$0.00**  
Adjusted Financial Assurance Amount \$: **\$0.00**  
Form 3A - Rule 703 Gas Facilities Balance \$: **\$0.00**

---

703 (Produced Water Transfer Systems) - Total Financial Assurance Required: **\$0.00**  
Contribution Amount \$: **\$0.00**  
Active Financial Assurance \$: **\$0.00**  
Adjusted Financial Assurance Amount \$: **\$0.00**  
Form 3A - Rule 703 Produced Water Transfer Systems Balance \$: **\$0.00**

---

703 (Commercial Disposal Facilities) - Total Financial Assurance Required: **\$0.00**  
Contribution Amount \$: **\$0.00**  
Active Financial Assurance \$: **\$0.00**  
Adjusted Financial Assurance Amount \$: **\$0.00**  
Form 3A - Rule 703 Gas Facilities Balance \$: **\$0.00**

## Rule 704 - Surface Owner Protection Bonds

Financial Assurance Selection: **Blanket**  
 Total Financial Assurance Required: **\$0.00**  
 Contribution Amount \$: **\$0.00**  
 Active Financial Assurance \$: **\$25,000.00**  
 Adjusted Financial Assurance Amount \$: **\$0.00**  
 Form 3A - Rule 704 Balance \$: **\$0.00**  
 Exempt from Rule 704:

## Instrument Allocation Summary

Instrument Summary:

**Operator to mail the following instruments to ECMC office:**

Instrument	Type	Operator	Provider	Amount
B015658	SURETY BOND	10671 - EDGE ENERGY II LLC	US SPECIALTY INSURANCE COMPANY	\$201,500.00

## Signature and Certification

I hereby certify all statements made on this form are, to the best of my knowledge at the time of submittal, true, correct, and complete.

Operator Comments:

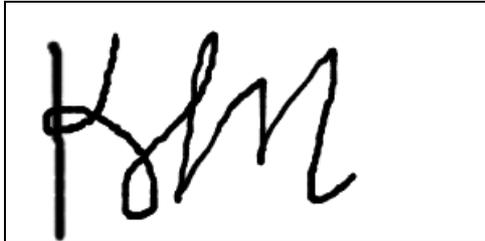
Name: **Kelsi Welch**

Title: **Permitting & Compliance**

Email: **Kelsi.welch@iptwell.com**

Phone: **(303) 257-0107**

Signature:



## Associated Documents

403996051 - FORM 3A SUBMITTED

## General Comments

User Group	Comment	Comment Date
Financial Assurance	SKS spoke to Eric Larsen, he will have Kelsy, his regulatory person call me. They can have the \$201,500 bond reissued for \$101,500 to be compliant or for 7/1/2025 due date they would only need the \$100K bond increased to \$101,500.	11/12/2024
Financial Assurance	Kelsi Welch/IPT Well Solutions handles bonding for Eric. We agreed to apply the full \$201,500 ne bond to current FA Total obligations and for next years contribution the will have the existing \$100K bond increased to \$101,500 to fulfill that new years contribution requirement.	11/15/2024

User Group	Comment	Comment Date
	<p>Rule 704 on approved Form 3 doc#403767883 reflects \$0.00; however, investigating SUA's for all wells resulted in 3 wells (123-18924, 123-33796, and 123-33802) that require SUAs submitted to Financial ECMC, or a new Form 3 will be required to capture the Surface Protection to ensure proper Financial Assurance to meet Rule 704. If Operator is claiming exemption from Rule 704 - Documentation establishing exemption criteria has been met should be provided to ECMC within 30 days of Form 3A submission.</p>	12/17/2024

1120 Lincoln Street, Suite 801, Denver, CO 80203 P 303.894.2100 [www.colorado.gov/cogcc](http://www.colorado.gov/cogcc)  
 Jared S. Polis, Governor | Julie Murphy, Director | Scott Cuthbertson, Deputy Director Operations

