



OPERATOR'S MONTHLY REPORT OF OPERATIONS

OPERATOR INFORMATION

OGCC Operator Number: <u>10518</u>	Contact Name and Telephone:
Name of Operator: <u>EDGE ENERGY LLC</u>	Name: <u>Ben Turner</u>
Address: <u>621 17TH STREET SUITE 1401</u>	Phone: <u>(720) 599-3650</u> Fax: <u>()</u>
City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80293</u>	Email: <u>bturner@edgeenergy1.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: Ben Turner

Title: Engineer Date: 11/18/2016 Email: bturner@edgeenergy1.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: 2 Approved: 2 Modified: 0 Deleted: 0

Total 2 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 09/2016				
1	123-42434-01	FLAHERTY 18-13-12NBH	NBRR	PR
2	123-41513-01	LONG 22-15-6NCH	NBRR	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 Check List

<u>Att Doc Num</u>	<u>Name</u>
401152962	Form 07 SUBMITTED
401152989	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)