



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: 7/14/2016 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: 5 Approved: 5 Modified: 5 Deleted: 0

Total 5 Approved

No	API #	Well Name	Formation Code	Well Status
Report Month: 01/2016				
1	123-42434-01	FLAHERTY 18-13-12NBH	N-COM	WO
Report Month: 02/2016				
2	123-42434-01	FLAHERTY 18-13-12NBH	N-COM	WO
Report Month: 03/2016				
3	123-42434-01	FLAHERTY 18-13-12NBH	N-COM	WO
Report Month: 04/2016				
4	123-42434-01	FLAHERTY 18-13-12NBH	N-COM	WO
Report Month: 05/2016				
5	123-42434-01	FLAHERTY 18-13-12NBH	N-COM	PR

Total 5 Modified

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Total 0 Deleted

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

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401075941	Form 07 SUBMITTED
401078486	Imported Data
401078487	Imported Data
401078787	ERROR REPORT
401078790	DELINQUENT REPORT

Total Attach: 5 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)