

FORM INSP
Rev 05/11

**State of Colorado
Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Inspection Date:
02/22/2016
Document Number:
671106396
Overall Inspection:
ACTION REQUIRED

FIELD INSPECTION FORM

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection	<input type="checkbox"/>
	201440	319810	MONTOYA, JOHN	2A Doc Num:	

Operator Information:

OGCC Operator Number: 74165
Name of Operator: RENEGADE OIL & GAS COMPANY LLC
Address: 6155 S MAIN STREET #210
City: AURORA State: CO Zip: 80016

- THIS IS A FOLLOW UP INSPECTION
- FOLLOW UP INSPECTION REQUIRED
- NO FOLLOW UP INSPECTION REQUIRED
- INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED

Contact Information:

Contact Name	Phone	Email	Comment
Ingve, Ed	303-829-2354	ed@renegadeoilandgas.com	All Inspections

Compliance Summary:

QtrQtr: SESE Sec: 36 Twp: 1S Range: 63W

Insp. Date	Doc Num	Insp. Type	Insp Status	Satisfactory /Action Required	PA P/F/I	Pas/Fail (P/F)	Violation (Y/N)
09/02/2011	200325033	PR	PR	SATISFACTORY	I		No
12/08/2005	200081624	PR	PR	ACTION REQUIRED		Fail	No
03/21/1997	500131570	PR	PR			Fail	Yes

Inspector Comment:

Related Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
102029	PIT		09/23/1999		-	STATE 36-16	<input type="checkbox"/>
102030	PIT		09/23/1999		-	STATE 36-16	<input type="checkbox"/>
113203	PIT	CL	09/23/1999		-	STATE 36-16	CL <input type="checkbox"/>
113673	PIT		09/23/1999		-	STATE OF COLORADO 36-16	<input type="checkbox"/>
201440	WELL	PR	12/30/1984	GW	001-06843	STATE 36-16	PR <input checked="" type="checkbox"/>

Equipment:

Location Inventory

Special Purpose Pits: _____	Drilling Pits: _____	Wells: _____	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Mortors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Lease Road:				
Type	Satisfactory/Action Required	comment	Corrective Action	Date

Signs/Marker:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
BATTERY	SATISFACTORY			

Emergency Contact Number (S/AR): SATISFACTORY Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WEEDS	SATISFACTORY	WEEDS AROUND LOCATION	CONTROL WEEDS	03/21/2016

Spills:				
Type	Area	Volume	Corrective action	CA Date
Crude Oil	WELLHEAD	<= 1 bbl	2" VALVES ON WELLHEAD LEAKING REPAIR OR REPLACE	03/21/2016
Crude Oil	Separator	<= 1 bbl	FIX ALL LEAKING FITTING INSIDE SEP HOUSE INCLUDING VIC CLAMPS	03/07/2016

Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Action Required	Comment	Corrective Action	CA Date
WELLHEAD	SATISFACTORY	1 1/2 " PIPE FENCESE CORNERN39.54842 W-104.22722		

Equipment:				
Type: Gas Meter Run	# 3	Satisfactory/Action Required:	SATISFACTORY	
Comment	3 METER RUNS ON LOCATION SE CORNER N39.54841 W-104.22687			
Corrective Action				Date:
Type: Bird Protectors	# 1	Satisfactory/Action Required:	SATISFACTORY	
Comment				
Corrective Action				Date:
Type: Horizontal Heated Separator	# 1	Satisfactory/Action Required:	SATISFACTORY	
Comment	SE CORNER N39.54841 W-104.22687			
Corrective Action				Date:

Type: Pig Station	# 1	Satisfactory/Action Required: SATISFACTORY
Comment	SE CORNER N39.54841 W-104.22687	
Corrective Action		Date:

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
CRUDE OIL	1	300 BBLs	STEEL AST	39.548350,-104.225920
S/AR	SATISFACTORY		Comment:	
Corrective Action:		Corrective Date:		

Paint

Condition	Adequate
Other (Content)	_____
Other (Capacity)	_____
Other (Type)	_____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate	Walls Insufficient	Base Insufficient	Inadequate
Corrective Action	REPAIR BERMS			Corrective Date 03/14/2016
Comment	RODENT HOLES IN BERMS			

Facilities: New Tank Tank ID: _____

Contents	#	Capacity	Type	SE GPS
PRODUCED WATER	1	<100 BBLs	FIBERGLASS AST	39.548370,-104.226700
S/AR	SATISFACTORY		Comment: 80 BBLs CAPACITY WATER TANK	
Corrective Action:		Corrective Date:		

Paint

Condition	Adequate
Other (Content)	_____
Other (Capacity)	_____
Other (Type)	_____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Inadequate	Walls Insufficient	Base Insufficient	Inadequate
Corrective Action	REPAIR BERMS			Corrective Date 03/21/2016
Comment	BERMS WILL NOT HOLD CAPACITY OF WATER TANK			

Venting:

Yes/No	NO
Comment	

Flaring:

Type		Satisfactory/Action Required
Comment:		

Corrective Action: _____	Correct Action Date: _____
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Predrill

Location ID: 201440

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/AR: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/AR: _____ **Comment:** _____

CA: _____ **Date:** _____

Comment: _____

Staking:**On Site Inspection (305):**Surface Owner Contact Information:

Name: _____ Address: _____

Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____

Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: <u>201440</u>	Type: <u>WELL</u>	API Number: <u>001-06843</u>	Status: <u>PR</u>	Insp. Status: <u>PR</u>
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Producing Well

Comment: PR

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____

Comment: _____

Corrective Action: _____ Date: _____

Reportable: _____ GPS: Lat _____ Long _____
Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well: _____ Lat _____ Long _____
DWR Receipt Num: _____ Owner Name: _____ GPS: _____

Field Parameters: _____
Sample Location: _____

Emission Control Burner (ECB): _____
Comment: _____
Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit

Interim Reclamation:
Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____
Land Use: _____
Comment: _____

1003a. Waste and Debris removed? Pass
CM _____
CA _____ CA Date _____

Unused or unneeded equipment onsite? Pass
CM _____
CA _____ CA Date _____

Pit, cellars, rat holes and other bores closed? Pass
CM _____
CA _____ CA Date _____

Guy line anchors marked? Pass
CM _____
CA _____ CA Date _____

1003b. Area no longer in use? _____ Production areas stabilized? Pass

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? Pass Subsidence over on drill pit? Pass

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____
Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland
Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland
Top soil replaced _____ Recontoured _____ 80% Revegetation _____

Inspector Name: MONTOYA, JOHN

1003 f. Weeds Noxious weeds? _____

Comment: _____

Overall Interim Reclamation _____

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment: _____

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation _____ Well Release on Active Location Multi-Well Location

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Gravel	Pass	Gravel	Pass			

S/A/V: SATISFACTOR Corrective Date: _____

Y _____

Comment: _____

CA: _____

Pits: NO SURFACE INDICATION OF PIT

COGCC Comments

Comment	User	Date
INTERMITTER CONTROLLER ON WELLHEAD	montoyaj	02/22/2016

Attached Documents

You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
671106397	WELL SIGN	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3790424
671106398	2" VALVES LEAKING ON WELLHEAD	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3790425
671106399	FITTINGS AND VIC CLAMPS LEAKING	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3790426
671106400	CONTROL WEEDS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3790427
671106401	WEEDS ON LOCATION	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3790428

671106402	WATER PROD TANK BERMS NEED REPAIRED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3790429
671106403	HOLES IN BERM AND WEEDS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3790430
671106404	HOLES IN BERM REPAIR BERMS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=3790431