

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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Document Number:
401219027
Date Received:
02/26/2017

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

1 CA Completed
0 Factual Review Request

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
Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
Espinosa, Bill	(303) 829-4982	billespinosa30@yahoo.com
Condill, J.B.	(303) 680-4725	jbcrog@aol.com
Ingve, Ed	(303) 680-4725	ed@renegadeoilandgas.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 673714152
Inspection Date: 10/13/2016 FIR Submit Date: 10/14/2016 FIR Status: _____

Inspected Operator Information:

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

LOCATION - Location ID: 322148

Location Name: WHITEHEAD-66S62W Number: 4SWSW County: ELBERT
Qtrqr: SWS Sec: 4 Twp: 6S Range: 62W Meridian: 6
Latitude: 39.551340 Longitude: -104.345060

FACILITY - API Number: 05-039- -00 Facility ID: 209356

Facility Name: WHITEHEAD Number: 4-13
Qtrqr: SWS Sec: 4 Twp: 6S Range: 62W Meridian: 6
Latitude: 39.551340 Longitude: -104.345060

CORRECTIVE ACTIONS:

1 CA# 53489

Corrective Action: Remove or remediated stained soil at wellhead. Fix leak. Date: 10/28/2016
Response: CA COMPLETED Date of Completion: 10/27/2016

Stained soil around wellhead as a result of a stuffing box leak. Area cleaned up and passed follow up inspection by Susan Sherman of the COGCC on 01/17/2017.

Operator _____
Comment: _____

COGCC Decision: _____

COGCC
Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: FIR Resolution form being filed for administrative purposes only. Susan Sherman of the COGCC has subsequently inspected and approved corrective action requirements for this well on 1/17/2017.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Edward Ingve _____ Signed: _____

Title: Owner/Manager _____ Date: 2/26/2017 12:10:20 PM _____

ATTACHMENT LIST

View Attachments in Imaged Documents on COGCC website (<http://ogccweblink.state.co.us/>) - Search by Document Number.

<u>Document Number</u>	<u>Description</u>
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Total Attach: 0 Files