

State of Colorado  
Oil and Gas Conservation Commission

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



Document Number:

401808936

Date Received:

10/25/2018

## FIR RESOLUTION FORM

### 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
<u>Condill, J.B.</u>	<u>(303) 680-4725</u>	<u>jbcrog@aol.com</u>
<u>Ingve, Ed</u>	<u>(303) 680-4725</u>	<u>ed@renegadeoilandgas.com</u>
<u>Espinosa, Bill</u>	<u>(303) 829-4982</u>	<u>billespinosa30@yahoo.com</u>

### COGCC INSPECTION SUMMARY:

FIR Document Number: 688302463  
Inspection Date: 09/12/2018 FIR Submit Date: 10/02/2018 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: 320383

Location Name: COLORADO STATE C-62S64W Number: 16NWSE County: ADAMS  
Qtrqtr: NWSE Sec: 16 Twp: 2S Range: 64W Meridian: 6  
Latitude: 39.874770 Longitude: -104.552890

### FACILITY - API Number: 05-001-00 Facility ID: 203604

Facility Name: COLORADO STATE C Number: 4  
Qtrqtr: NWSE Sec: 16 Twp: 2S Range: 64W Meridian: 6  
Latitude: 39.874770 Longitude: -104.552890

### CORRECTIVE ACTIONS:

1 ☒ CA# 119213

Corrective Action: Non E&P Waste not properly stored, handled, transported, treated, or disposed per Rule 907A.

Date: 10/05/2018

Response: CA COMPLETED

Date of Completion: 10/19/2018

CA completed

Operator \_\_\_\_\_  
Comment: \_\_\_\_\_

COGCC Decision: Approved via an AMI

COGCC  
Representative: \_\_\_\_\_

OPERATOR COMMENT AND SUBMITTAL

Comment: CA completed

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

Print Name: Bill Espinosa Signed: \_\_\_\_\_

Title: Field supervisor Date: 10/25/2018 6:42:28 AM

**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>
401808936	FIR RESOLUTION SUBMITTED
401808941	ST c4

Total Attach: 2 Files