

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:
401831879

Date Received:
11/08/2018

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

3 of 3 CAs from the FIR responded to on this Form

3 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@ahoo.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 688400457

Inspection Date: 10/18/2018

FIR Submit Date: 10/18/2018

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: 319728

Location Name: UPRR-HABEL-62S62W Number: 35NWNW County: ADAMS

Qtrqr: NWN Sec: 35 Twp: 2S Range: 62W Meridian: 6
W

Latitude: 39.838530 Longitude: -104.298560

FACILITY - API Number: 05-001- -00 Facility ID: 201151

Facility Name: UPRR-HABEL Number: 1-35

Qtrqr: NWN Sec: 35 Twp: 2S Range: 62W Meridian: 6
W

Latitude: 39.838530 Longitude: -104.298560

CORRECTIVE ACTIONS:

1 CA# 119632

Corrective Action: Comply with Rule 603.f .

Date: 09/15/2017

Response: CA COMPLETED

Date of Completion: 10/29/2018

Operator
Comment: CA completed

COGCC Decision: _____

COGCC
Representative:

2 CA# 119633

Corrective Action: Properly treat or dispose of oily waste in accordance with 907.e

Date: 09/15/2017

Response: CA COMPLETED

Date of Completion: 10/29/2018

Operator
Comment:

CA completed

COGCC Decision: _____

COGCC
Representative:

3 CA# 119634

Corrective Action: Location is within a designated setback location, bullplug or cap all loadlines per Rule 604.c.(2)O.

Date: 09/15/2017

Response: CA COMPLETED

Date of Completion: 10/29/2018

Operator
Comment:

CA completed

COGCC Decision: _____

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: 11/8/2018 9:53:11 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>
------------------------	--------------------

--	--

Total Attach: 0 Files