

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:

401919838

Date Received:

01/28/2019

FIR RESOLUTION FORM

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 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>Ingvie, 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>
<u>Gomez, Jason</u>		<u>jason.gomez@state.co.us</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 688400440
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: 319715

Location Name: FERGUSON-62S62W Number: 25NWSE County: ADAMS
Qtrqr: NWSE Sec: 25 Twp: 2S Range: 62W Meridian: 6
Latitude: 39.845900 Longitude: -104.270660

FACILITY - API Number: 05-001-00 Facility ID: 201079

Facility Name: FERGUSON Number: 1-25
Qtrqr: NWSE Sec: 25 Twp: 2S Range: 62W Meridian: 6
Latitude: 39.845900 Longitude: -104.270660

CORRECTIVE ACTIONS:

1 CA# 119627

Corrective Action: Comply with Rule 603.f .

Date: 11/19/2018

Response: CA COMPLETED

Date of Completion: 10/25/2018

Operator Comment: ca completed

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

2 CA# 119628

Corrective Action: Comply with Rule 603.f .

Date: 11/01/2018

Response: CA COMPLETED

Date of Completion: 10/25/2018

Operator
Comment: ca completed

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: ca completeed

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: 1/28/2019 11:08:25 AM

ATTACHMENT LIST

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

Document Number **Description**

401919838	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files