

**FORM
INSP**

Rev
X/20

**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:

04/12/2021

Submitted Date:

04/25/2021

Document Number:

688310407

FIELD INSPECTION FORM

Loc ID 322157 Inspector Name: Sherman, Susan On-Site Inspection 2A Doc Num: _____

Status Summary:

- THIS IS A FOLLOW UP INSPECTION
- FOLLOW UP INSPECTION REQUIRED
- NO FOLLOW UP INSPECTION REQUIRED

Operator Information:

OGCC Operator Number: 74165
Name of Operator: RENEGADE OIL & GAS COMPANY LLC
Address: 6155 S MAIN STREET #225
City: AURORA State: CO Zip: 80016

Findings:

- 12 Number of Comments
- 0 Number of Corrective Actions
- Corrective Action Response Requested

ANY CORRECTIVE ACTION(S) FROM PREVIOUS INSPECTIONS THAT HAVE NOT BEEN ADDRESSED ARE STILL APPLICABLE

Contact Information:

Contact Name	Phone	Email	Comment
Ingve, Ed	303-829-2354	ed@renegadeoilandgas.com	All Inspections
Condill, JB	303-680-4725	jbcrog@aol.com	All Inspections
Espinosa, Bill	(303) 829-4982	billespinosa30@yahoo.com	All Inspections

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
209380	WELL	PR	09/01/2018	OW	039-06284	WHITEHEAD 8-15	PR

General Comment:

[Routine Inspection](#)

Location

Overall Good:

Signs/Marker:

Type	TANK LABELS/PLACARDS		
Comment:			
Corrective Action:		Date:	
Type	BATTERY		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Emergency Contact Number:

Comment:

Corrective Action:

Date:

Overall Good:

Spills:

Type	Area	Volume		

In Containment: No

Comment:

Multiple Spills and Releases?

Fencing/:

Type	IGNITOR/COMBUSTOR		
Comment:			
Corrective Action:		Date:	
Type	SEPARATOR		
Comment:			
Corrective Action:		Date:	
Type	WELLHEAD		
Comment:			
Corrective Action:		Date:	

Equipment:

Type	#	corrective date
Type: Flow Line	#	
Comment:	gas sales line riser next to treater	
Corrective Action:		Date:
Type: Pump Jack	# 1	
Comment:		
Corrective Action:		Date:
Type: Gas Meter Run	# 0	

Comment:			
Corrective Action:			Date:
Type: Prime Mover	# 1		
Comment:	electric		
Corrective Action:			Date:
Type: Emission Control Device	# 1		
Comment:	on		
Corrective Action:			Date:
Type: Vertical Heater Treater	# 1		
Comment:			
Corrective Action:			Date:
Type: Bird Protectors	# 3		
Comment:			
Corrective Action:			Date:
Type: Deadman # & Marked	# 4		
Comment:			
Corrective Action:			Date:
Type: Bradenhead	# 1		
Comment:			
Corrective Action:			Date:

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	200 BBLs	Open Top		,
Comment:	netted				
Corrective Action:					Date:

Paint

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Comment:	same earth berms as crude oil tank			
Corrective Action:				Date:

Contents	#	Capacity	Type	Tank ID	SE GPS
CRUDE OIL	1	400 BBLs	STEEL AST		,
Comment:					
Corrective Action:					Date:

Paint

Condition	
Other (Content)	
Other (Capacity)	
Other (Type)	

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Earth	Adequate			
Comment:				
Corrective Action:				Date:

Wells Served By Facilities Above

AirsID

API Number
039-06284

API Number	AirsID
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Venting:

Yes/No	NO		
Comment:			
Corrective Action:		Date:	

Flaring:

Type	
Comment:	
Corrective Action:	Date:

Location Construction

Location ID: 209380 CDP: _____

Comment: _____

Corrective Action: _____

Date: _____

Form 2A COAs:

Comment: Doc #402176809 04 (--VENT_FLARE) -00 Attachment count: 3 APPROVED 5/19/2020 Form: (04)402176809 5/19/2020 This approval is good for one year and new application must be made before October 1, 2020. Compliance with CDPHE requirements shall be documented at that time.

Corrective Action: _____

Date: _____

Wildlife BMPs:

Comment: _____

Corrective Action: _____

Date: _____

Comment: _____

Corrective Action: _____

Date: _____

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:

Inspected Facilities

Facility ID: 209380 Type: WELL API Number: 039-06284 Status: PR Insp. Status: PR

Producing Well

Comment: [pr 2/1/2021 production reported to COGCC database](#)

Corrective Action:

Date:

Reclamation - Storm Water - Pit

Storm Water:

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

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

Attached Documents

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

Document Num	Description	URL
688310408	Renegade Whitehead 8-15	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5413543