

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:

403035843

Date Received:

05/03/2022

FIR RESOLUTION FORM

Overall Status:

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 #225
City: AURORA State: CO Zip: 80016

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

Additional Operator Contact:

Contact Name	Phone	Email
<u>Bill Espinosa</u>	<u>303-829-4982</u>	<u>billespinosa30@yahoo.com</u>
<u>JB Condill</u>	<u>303-680-4750</u>	<u>jbcrog@aol.com</u>
<u>Edward Ingve</u>	<u>303-829-2354</u>	<u>ed@renegadeoilandgas.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 697503759
Inspection Date: 02/25/2022 FIR Submit Date: 03/03/2022 FIR Status: _____

Inspected Operator Information:

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

LOCATION - Location ID: 320644

Location Name: LOWRY STATE-65S65W Number: 25SWSW County: _____
Qtrqr: SWS Sec: 25 Twp: 5S Range: 65W Meridian: 6
W
Latitude: 39.582195 Longitude: -104.620890

FACILITY - API Number: 05-005-00 Facility ID: 320644

Facility Name: LOWRY STATE-65S65W Number: 25SWSW
Qtrqr: SWS Sec: 25 Twp: 5S Range: 65W Meridian: 6
W
Latitude: 39.582195 Longitude: -104.620890

CORRECTIVE ACTIONS:

1 CA# 159948

Corrective Action: Comply with Rule 1002.f. to stabilize the stormwater repair work off location and the equipment removal area by performing additional seeding. Refer to Photo 1.

Date: 05/01/2022

Response: CA COMPLETED Date of Completion: 04/27/2022

Areas which needed to be stabilized have been re-contoured and seeded. The lack of moisture this spring may

Operator Comment: make reclamation a challenge.

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Area identified needing stabilization has been recontoured and seeded. Now at the mercy of spring moisture.

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: Manager/Owner

Date: 5/3/2022 9:21:58 AM

ATTACHMENT LIST

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

Document Number **Description**

<u>Document Number</u>	<u>Description</u>

Total Attach: 0 Files