

State of Colorado
Oil and Gas Conservation Commission

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INACTIVE WELL NOTICE

Rule 434.c. Plugging Inactive Wells. If an Inactive Well is not plugged, returned to production, or designated as Out of Service within 6 months of becoming inactive, the Operator will file a Form 5B, Inactive Well Notice and provide Single Well Financial Assurance if required by the Operator's Financial Assurance Plan.

OPERATOR AND CONTACT INFORMATION

OGCC Operator Number: 74165	Contact Name and Telephone:
Name of Operator: RENEGADE OIL & GAS COMPANY LLC	Name: Edward Ingve
Address: 6155 S MAIN STREET #225	Phone: (303) 829-2354
City: AURORA State: CO Zip: 80016	Email: ed@renegadeoilandgas.com

WELL INFORMATION

API Number: 001-07245-00	County: ADAMS
Well Name: WALTERS	Well Number: 1-2
Location: QTRQTR SWSE	Sec: 2 Twp: 2S Rng: 61W Meridian: 6

INACTIVE WELL NOTICE

- ☒ An oil or gas Well that has been shut-in and has not produced for a period of 12 consecutive months
- ☐ An oil or gas Well that has been temporarily abandoned for a period of 6 consecutive months
- ☐ A Class II UIC Well which has not been utilized for a period of 12 consecutive months
- ☐ A Suspended Operations Well with no activity other than monthly Bradenhead monitoring for more than 24 consecutive months
- ☐ A Waiting on Completion Well with no activity other than monthly Bradenhead monitoring for more than 24 consecutive months

Provide the reason why this Well is Inactive.

Well has been shut in due to the loss of gas sales as a result of the Western Gas Resources Third Creek Gas Gathering System shut down in 6/2018. Renegade is considering utilizing abandon inactive Western Gas Resources Third Creek high pressure assets in an attempt to reconstitute a mini gas gathering system to aggregate legacy producing wells to justify a new gas sales connection either with Western Gas Resources or DCP. To date Western Gas has not cooperated in either claiming the rights to the inactive pipeline or relinquishing any claim to the pipe.

Operator's current Financial Assurance Option: _____

Commission Order Number for the Operator's most recently approved Financial Assurance Plan: _____

Document Number of the Operator's most recently approved Financial Assurance Plan (Form 3): _____

Does the Operator's current Financial Assurance Plan require additional or different Financial Assurance for this Well? N/A

OPERATOR COMMENT AND SUBMITTAL

I hereby certify all statements made on this form are, to the best of my knowledge at the time of submittal, true, correct, and complete.

Renegade has been unsuccessfully attempting to work with Western Gas Resources for a creative solution for gas sales for this and other previous commercial well. A data center is also a possible option for the Walters #1-2 gas production if aggravated with other legacy wells once new rules are adopted in Adams County.

Print Name: Edward Ingve

Email: ed@renegadeoilandgas.com

Title: Manager/Owner

Date: _____