

State of Colorado
Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:
404533562
Receive Date:
02/05/2026
Report taken by:
KRIS NEIDEL

Site Investigation and Remediation Workplan (Initial Form)

This form shall be submitted to the Director for approval prior to the initiation of site investigation and remediation activities. However, this shall not preclude the Operator from taking immediate action to protect public health or safety, the environment, wildlife, or livestock.

This Form 27 describes site conditions as currently understood by the Operator; approval of this Form 27 by ECMC is based on the site conditions accurately described herein; any changes in site conditions identified during or subsequent to the performance of the approved workplan may necessitate additional investigation or remediation which shall be described on a supplemental Form 27. This Form 27 is intended to provide basic information regarding the proposed site investigation and remediation actions, but the workplan may be more fully described in attached documentation.

Closure request is not available for an Initial Site Investigation and Remediation Workplan.

OPERATOR INFORMATION

Name of Operator: <u>RENEGADE OIL & GAS COMPANY LLC</u>	Operator No: <u>74165</u>	Phone Numbers Phone: <u>(303) 680-4725</u> Mobile: <u>(303) 829-2354</u>
Address: <u>6155 S MAIN STREET #225</u>		
City: <u>AURORA</u>	State: <u>CO</u>	Zip: <u>80016</u>
Contact Person: <u>Edward Ingve</u>	Email: <u>ed@renegadeoilandgas.com</u>	

PROJECT, PURPOSE & SITE INFORMATION

PROJECT INFORMATION

Remediation Project #: 44449 Initial Form 27 Document #: 404533562

PURPOSE INFORMATION

- Rule 913.c.(1): Pit or Cuttings Trench closure.
- Rule 913.c.(2): Buried or partially buried vessel closure, which will be by removal.
- Rule 913.c.(3): Remediation of Spill and Releases pursuant to Rule 912.
- Rule 913.c.(4): Land treatment of Oily Waste pursuant to Rule 905.e.
- Rule 913.c.(5): Closure of Centralized E&P Waste Management Facilities pursuant to Rule 907.h.
- Rule 913.c.(6): Remediation of impacted Groundwater pursuant to Rule 915.e.(3).D, and the contaminant concentrations in Table 915-1.
- Rule 913.c.(7): Investigation and remediation of natural gas in soil or Groundwater.
- Rule 913.c.(8): When requested by the Director due to any potential risk to soil, Groundwater, or surface water.
- Rule 913.c.(9): Decommissioning of Oil and Gas Facilities.
- Rule 913.g: Changes of Operator.
- Rule 915.b: Request to leave elevated inorganics in situ.
- Other: _____

SITE INFORMATION

Yes Multiple Facilities

Facility Type: <u>PIT</u>	Facility ID: <u>100599</u>	API #: _____	County Name: <u>MOFFAT</u>
Facility Name: <u>INEXCO-STATE 1</u>	Latitude: <u>40.993818</u>	Longitude: <u>-108.294297</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SWSE</u>	Sec: <u>16</u>	Twp: <u>12N</u>	Range: <u>97W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>
Facility Type: <u>WELL</u>	Facility ID: _____	API #: <u>081-06150</u>	County Name: <u>MOFFAT</u>
Facility Name: <u>INEXCO-STATE 1</u>	Latitude: <u>40.994819</u>	Longitude: <u>-108.294800</u>	
** correct Lat/Long if needed: Latitude: _____		Longitude: _____	
QtrQtr: <u>SWSE</u>	Sec: <u>16</u>	Twp: <u>12N</u>	Range: <u>97W</u> Meridian: <u>6</u> Sensitive Area? <u>Yes</u>

SITE CONDITIONS

General soil type - USCS Classifications ML _____

Most Sensitive Adjacent Land Use Non-crop land,
oil and ags
facilities _____

Is domestic water well within 1/4 mile? No _____

Is surface water within 1/4 mile? Yes _____

Is groundwater less than 20 feet below ground surface? Yes _____

Other Potential Receptors within 1/4 mile

5590' from nearest water well, 1124' from nearest surface water, within Greater Sage Grouse Priority Habitat Management Area

SITE INVESTIGATION PLAN

TYPE OF WASTE:

- | | | |
|--|--|--|
| <input type="checkbox"/> E&P Waste | <input checked="" type="checkbox"/> Other E&P Waste | <input type="checkbox"/> Non-E&P Waste |
| <input type="checkbox"/> Produced Water | <input type="checkbox"/> Workover Fluids | _____ |
| <input type="checkbox"/> Oil | <input type="checkbox"/> Tank Bottoms | |
| <input type="checkbox"/> Condensate | <input type="checkbox"/> Pigging Waste | |
| <input type="checkbox"/> Drilling Fluids | <input type="checkbox"/> Rig Wash | |
| <input type="checkbox"/> Drill Cuttings | <input type="checkbox"/> Spent Filters | |
| | <input checked="" type="checkbox"/> Pit Bottoms | |
| | <input type="checkbox"/> Other (as described by EPA) | _____ |

DESCRIPTION OF IMPACT

Impacted?	Impacted Media	Extent of Impact	How Determined
UNDETERMINED	SOILS	TBD	soil analysis
UNDETERMINED	SURFACE WATER	TBD	visual inspection
UNDETERMINED	VEGETATION	TBD	visual inspection

INITIAL ACTION SUMMARY

Description of initial action or emergency response measures take to abate, investigate, and/or remediate impacts associated with E&P Waste.

A visual inspection will be performed, looking for signs of stained soil or other signs of contamination, as well as impacts to surface water or vegetation.

PROPOSED SAMPLING PLAN

Proposed Soil Sampling

Will soil samples be collected as part of this investigation? (Number, type (grab/composite), analyses, and locations of samples):

Please see the attachment for proposed sampling locations.

Proposed Groundwater Sampling

Will groundwater samples be collected as part of this investigation? (Number, analyses, and locations of samples):

This box was left blank by operator, populated by ecmc staff to allow for approval of form.

Proposed Surface Water Sampling

Will surface water samples be collected as part of this investigation? (Number, analyses, and locations of samples):

This box was left blank by operator, populated by ecmc staff to allow for approval of form.

Additional Investigative Actions

Additional alternative investigative actions described in attached Site Investigation Plan (summary):

This box was left blank by operator, populated by ecmc staff to allow for approval of form.

SITE INVESTIGATION REPORT

SAMPLE SUMMARY

Soil

NA / ND

Number of soil samples collected 0

_____ Highest concentration of TPH (mg/kg) _____

Number of soil samples exceeding 915-1 _____

_____ Highest concentration of SAR _____

Was the areal and vertical extent of soil contamination delineated? _____

BTEX > 915-1 _____

Approximate areal extent (square feet) _____

Vertical Extent > 915-1 (in feet) _____

Groundwater

Number of groundwater samples collected _____ 0

Highest concentration of Benzene (µg/l) _____

Was extent of groundwater contaminated delineated? No _____

Highest concentration of Toluene (µg/l) _____

Depth to groundwater (below ground surface, in feet) _____

Highest concentration of Ethylbenzene (µg/l) _____

Number of groundwater monitoring wells installed _____

Highest concentration of Xylene (µg/l) _____

Number of groundwater samples exceeding 915-1 _____

Highest concentration of Methane (mg/l) _____

Surface Water

_____ 0 Number of surface water samples collected

_____ Number of surface water samples exceeding 915-1

If surface water is impacted, other agency notification may be required.

OTHER INVESTIGATION INFORMATION

Were impacts to adjacent property or offsite impacts identified?

Were background samples collected as part of this site investigation?

Was investigation derived waste (IDW) generated as part of this investigation?

Volume of solid waste (cubic yards) _____

Volume of liquid waste (barrels) _____

Is further site investigation required?

REMEDIAL ACTION PLAN

SOURCE REMOVAL SUMMARY

Describe how source is to be removed.

If any contamination is discovered over the course of the closure of the Inexco State #1, hauling off of the contaminates to an approved facility is anticipated.

REMEDATION SUMMARY

Describe how remediation of existing impacts to soil and groundwater is to be accomplished (i.e. summarize remedial action plan). Provide a brief narrative description including: technical justification, schedule for implementation, estimated time to attain NFA status, plus plans and specifications for the selected remedial action technology.

TBD, if necessary

Soil Remediation Summary

In Situ

Ex Situ

_____ Bioremediation (or enhanced bioremediation)

_____ Excavate and offsite disposal

_____ Chemical oxidation

_____ If Yes: Estimated Volume (Cubic Yards) _____

_____ Air sparge / Soil vapor extraction

_____ Name of Licensed Disposal Facility or ECMC Facility ID # _____

_____ Natural Attenuation

_____ Excavate and onsite remediation

_____ Other _____

_____ Land Treatment

_____ Bioremediation (or enhanced bioremediation)

_____ Chemical oxidation

_____ Other _____

Groundwater Remediation Summary

_____ Bioremediation (or enhanced bioremediation)

_____ Chemical oxidation

_____ Air sparge / Soil vapor extraction

_____ Natural Attenuation

_____ Other _____

GROUNDWATER MONITORING

If groundwater has been impacted, describe proposed monitoring plan, including # of wells or sample points, monitoring schedule, analytical methods, points of compliance. Attach a groundwater monitoring location diagram.

REMEDIATION PROGRESS UPDATE

PERIODIC REPORTING

Approved Reporting Schedule:

Quarterly Semi-Annually Annually Other

Request Alternative Reporting Schedule:

Semi-Annually Annually Other

Rule 913.e:

After initial approval of a Form 27, the Operator will provide quarterly update reports in a Supplemental Form 27 to document progress of site investigation and remediation, unless an alternative reporting schedule has been requested by the Operator and approved by the Director. The Director may request a more frequent reporting schedule based on site-specific conditions.

Report Type: Groundwater Monitoring Land Treatment Progress Report O&M Report
 Other _____

Adequacy of Operator's General Liability Insurance and Financial Assurance

Describe the adequacy of the Operator's general liability insurance and Financial Assurance to fully address the anticipated costs of Remediation, including the estimated remaining cost for this project (below).

If this information has been provided on a Form 27 within the last 12 months, provide the Document Number of that form.

Operator anticipates the remaining cost for this project to be: \$ _____

WASTE DISPOSAL INFORMATION

Was E&P waste generated as part of this remediation? _____

Describe beneficial use, if any, of E&P Waste derived from this remediation project:

Volume of E&P Waste (solid) in cubic yards _____

E&P waste (solid) description _____

ECMC Disposal Facility ID #, if applicable: _____

Non-ECMC Disposal Facility: _____

Volume of E&P Waste (liquid) in barrels _____

E&P waste (liquid) description _____

ECMC Disposal Facility ID #, if applicable: _____

Non-ECMC Disposal Facility: _____

RECLAMATION PLAN

RECLAMATION PLANNING

Describe reclamation plan. Discuss existing and new grade recontouring; method and testing of compaction alleviation; and reseeding program, including location of new seed, seed mix and noxious weed prevention. Attach diagram or drawing.

After P&A and soil sampling, the well pad will be recontoured to match the surrounding terrain and reseeded with native grasses, shrubs and forbs, per surface owner's approval.

Is the described reclamation complete? No _____

Does the reclamation described herein constitute interim or final reclamation of the Oil and Gas Location?

Interim Final

Did the Surface Owner provide the seed mix? _____

If YES, does the seed mix comply with local soil conservation district recommendations? _____

Did the local soil conservation district provide the seed mix? _____

SITE RECLAMATION DATES

Proposed date of commencement of Reclamation. 03/01/2026

Proposed date of completion of Reclamation. 11/01/2026

IMPLEMENTATION SCHEDULE

Per Rule 913.d.(2): Any change from the approved implementation schedule will be requested at least 14 days in advance, and the Operator may not make the change without the Director's approval.

PRIOR DATES

Date of Surface Owner notification/consultation, if required. _____

Actual Spill or Release date, or date of discovery. _____

SITE INVESTIGATION DATES

Date of Initial Actions described in Site Investigation Plan (start date). 02/23/2026

Proposed site investigation commencement. _____

Proposed completion of site investigation. _____

REMEDIAL ACTION DATES

Proposed start date of Remediation. 07/20/2026

Proposed date of completion of Remediation. 11/01/2026

Per Rule 913.d.(2): Any change from the approved implementation schedule will be requested at least 14 days in advance, and the Operator may not make the change without the Director's approval.

Change from approved implementation schedule per Rule 913.d.(2).

Basis for change in implementation schedule:

OPERATOR COMMENT

Form 27 is being filed to cover the P&A of the Inexco State #1 well and decommissioning of the associated production facility and produced water pit. ECMC Enterprise Marginal Well Plugging funds have been granted to assist in covering the cost of the plugging, reclaiming and remediating of the location.
 Due to the Inexco State #1 well being located in the Greater Sage Grouse Priority Habitat Management Area well plugging operations are targeted to be done prior to the grouse lekking season starting March 1st with the reclamation and remediating work completed after July 15th.

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

Signed: Edward Ingve _____

Title: Manager/Owner _____

Submit Date: 02/05/2026 _____

Email: ed@renegadeoilandgas.com _____

Based on the information provided herein, this Application for Site Investigation and Remediation Workplan complies with ECMC Rules and applicable orders and is hereby approved.

ECMC Approved: KRIS NEIDEL _____

Date: 03/13/2026 _____

Remediation Project Number: 44449 _____

COA Type**Description**

	Per Rule 911.b. If a spill is discovered during closure activities, a Form 19 spill report shall be filed. (Per 912.b.(1)E, including >10cuyd of contaminated soil.)
	This well has reported selling gas. No flowline is identified in the attached documents. Soil samples shall be collected where the flow line is cut/caped.
	The proposed sample locations are appropriate. The number of soil samples shall be determined in the field through observation. The sampling shall identify if any remaining impact, if impacts are detected all impact shall be delineated and reported on a Form 27.
3 COAs	

ATTACHMENT LIST

Upon approval, the approved Form 27 and all listed attachments will be indexed to the Remediation Project file. Only the approved Form 27 will also be indexed to the related Facilities.

Att Doc Num**Name**

404533562	INVESTIGATION/REMEDATION WORKPLAN (INITIAL)
404533853	SITE INVESTIGATION PLAN
404580083	FORM 27-INITIAL-SUBMITTED

Total Attach: 3 Files

General Comments**User Group****Comment****Comment Date**

Environmental	Proposed sample locations are approved, however if impacts are suspected at other locations, confirmation samples shall be taken at those locations.	03/13/2026
Environmental	The Pit base sample shall be collected of native soil below the pit bottom. If pit is backfilled, close attention is required to determine soil sample is collected of native soil. Field notes shall be included in supplemental report.	03/13/2026
Environmental	The sample at the wellhead shall be below the Cut/Cap, sample shall be analyzed for Table 915-1. If impact is observed more than one sample may be required.	03/13/2026
Environmental	Pit lat/long updated per the map included in this document.	03/13/2026

Total: 4 comment(s)