

**FORM  
INSP**Rev  
X/15**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:

06/10/2019

Submitted Date:

06/19/2019

Document Number:

688304839**FIELD INSPECTION FORM**Loc ID 320677 Inspector Name: Sherman, Susan On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 74165Name of Operator: RENEGADE OIL & GAS COMPANY LLCAddress: 6155 S MAIN STREET #210City: AURORA State: CO Zip: 80016**Status Summary:**

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

**Findings:**12 Number of Comments1 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 | <a href="#">All Inspections</a> |
| Condill, JB    | 303-680-4725   | jbcrog@aol.com           | <a href="#">All Inspections</a> |
| Espinosa, Bill | (303) 829-4982 | billespinosa30@yahoo.com | <a href="#">All Inspections</a> |

**Inspected Facilities:**

| Facility ID | Type | Status | Status Date | Well Class | API Num   | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|---------------|-------------|
| 204437      | WELL | PR     | 02/14/1994  | OW         | 005-06522 | STATE 2       | PR          |

**General Comment:**[Annual Bradenhead Test Inspection and Routine Inspection](#)

**Location**Overall Good: ☒

|                      |            |       |  |
|----------------------|------------|-------|--|
| <b>Signs/Marker:</b> |            |       |  |
| Type                 | CONTAINERS |       |  |
| Comment:             |            |       |  |
| Corrective Action:   |            | Date: |  |
| Type                 | WELLHEAD   |       |  |
| Comment:             |            |       |  |
| Corrective Action:   |            | Date: |  |

Emergency Contact Number:

Comment: 303-680-4725

Corrective Action:

Date: \_\_\_\_\_

**Good Housekeeping:**

|                    |                                                                                              |       |            |
|--------------------|----------------------------------------------------------------------------------------------|-------|------------|
| Type               | OTHER                                                                                        |       |            |
| Comment:           | Stained soil at pumping unit's gas engine (see attached photo #3).                           |       |            |
| Corrective Action: | Non E&P Waste not properly stored, handled, transported, treated, or disposed per Rule 907A. | Date: | 06/26/2019 |

Overall Good: ☐

|                |      |        |  |
|----------------|------|--------|--|
| <b>Spills:</b> |      |        |  |
| Type           | Area | Volume |  |

In Containment: No

Comment:

☐ Multiple Spills and Releases?

|                          |                                            |       |                 |
|--------------------------|--------------------------------------------|-------|-----------------|
| <b>Equipment:</b>        |                                            |       | corrective date |
| Type: Deadman # & Marked | # 4                                        |       |                 |
| Comment:                 |                                            |       |                 |
| Corrective Action:       |                                            | Date: |                 |
| Type: Prime Mover        | # 1                                        |       |                 |
| Comment:                 | gas engine                                 |       |                 |
| Corrective Action:       |                                            | Date: |                 |
| Type: Flow Line          | # 1                                        |       |                 |
| Comment:                 | Riser on access road (see attached photo). |       |                 |
| Corrective Action:       |                                            | Date: |                 |
| Type: Pump Jack          | # 1                                        |       |                 |
| Comment:                 |                                            |       |                 |
| Corrective Action:       |                                            | Date: |                 |
| Type: Bradenhead         | # 1                                        |       |                 |
| Comment:                 |                                            |       |                 |
| Corrective Action:       |                                            | Date: |                 |

**Tanks and Berms:**

|                    |   |          |                     |         |        |  |
|--------------------|---|----------|---------------------|---------|--------|--|
| Contents           | # | Capacity | Type                | Tank ID | SE GPS |  |
|                    |   |          | CENTRALIZED BATTERY |         | ,      |  |
| Comment:           |   |          |                     |         |        |  |
| Corrective Action: |   |          |                     |         | Date:  |  |

**Paint**

|                  |  |  |  |  |  |
|------------------|--|--|--|--|--|
| Condition        |  |  |  |  |  |
| Other (Content)  |  |  |  |  |  |
| Other (Capacity) |  |  |  |  |  |
| Other (Type)     |  |  |  |  |  |

**Berms**

|                    |          |                     |                     |             |       |
|--------------------|----------|---------------------|---------------------|-------------|-------|
| Type               | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |       |
|                    |          |                     |                     |             |       |
| Comment:           |          |                     |                     |             |       |
| Corrective Action: |          |                     |                     |             | Date: |

**Venting:**

|                    |  |  |  |       |  |
|--------------------|--|--|--|-------|--|
| Yes/No             |  |  |  |       |  |
| Comment:           |  |  |  |       |  |
| Corrective Action: |  |  |  | Date: |  |

**Flaring:**

|                    |  |  |  |       |
|--------------------|--|--|--|-------|
| Type               |  |  |  |       |
| Comment:           |  |  |  |       |
| Corrective Action: |  |  |  | Date: |

### Location Construction

Location ID: 204437 CDP: \_\_\_\_\_

Comment: \_\_\_\_\_

Corrective Action: \_\_\_\_\_

Date: \_\_\_\_\_

#### Form 2A COAs:

**Comment:** No COAs.

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: 204437 Type: WELL API Number: 005-06522 Status: PR Insp. Status: PR**Producing Well**Comment: PR. Mar 2019 production reported to COGCC database.Corrective Action: Date: **BradenHead**Comment: Annual Bradenhead head test completed. Form 17 is attached.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 |
|------------------|-----------------|-------------------------|-----------------------|---------------|--------------------------|---------|
|                  |                 |                         |                       |               |                          |         |

Comment: [See attached photo of erosion rill forming on location into crop field, needs maintenance.](#)

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                                                                                                                                                                 |
|--------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 688304911    | Renegade State 2                | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4854959">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4854959</a> |
| 688304912    | Renegade State 2 Form 17 page 1 | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4854960">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4854960</a> |
| 688304913    | Renegade State 2 Form 17 page 2 | <a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4854961">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=4854961</a> |