

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

Form Approved  
OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

**NAME:** Renegade Oil & Gas Company LLC

**ADDRESS:** 6155 S Main St Ste 210  
Aurora, CO 80046

**FACILITY:** ROUGHNECK UNIT

**LOCATION:** NEAR RECTOR LEADER RD  
BYERS, CO 80103

**ATTN:** Edward Ingve, Pres

COG840008	001-A
<b>PERMIT NUMBER</b>	<b>DISCHARGE NUMBER</b>
<b>MONITORING PERIOD</b>	
MM/DD/YYYY	MM/DD/YYYY
09/01/2014	09/30/2014



**DMR Mailing ZIP CODE:** 80046

MINOR

Discharge to Cottonwood Creek  
External Outfall

No Discharge 

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****	*****		*****					
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	6.5 MINIMUM	*****	9 MAXIMUM	SU		Monthly	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	*****	*****	*****	*****						
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	30 30DA AVG	45 DAILY MX	mg/L		Monthly	GRAB
Arsenic, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****						
00978 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Selenium, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****						
00981 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Beryllium, total recoverable [as Be]	SAMPLE MEASUREMENT	*****	*****	*****	*****						
00998 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Nickel, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****						
01074 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Zinc, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****						
01094 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB

<b>NAME/TITLE PRINCIPAL EXECUTIVE OFFICER</b>   <b>TYPED OR PRINTED</b>	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 <b>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	<b>TELEPHONE</b>		<b>DATE</b>
			AREA Code	NUMBER	MM/DD/YYYY
			303	680-4725	10/09/2014

**COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)**

Oil and grease - see D.24, pg 14.

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External Outfall

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Cadmium, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****						
01113 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Lead, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****						
01114 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Copper, total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****						
01119 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Arsenic, potentially dissolved	SAMPLE MEASUREMENT	*****	*****	*****	*****						
01309 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Oil and grease	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****					
03582 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	10 INST MAX	mg/L		Contingent	GRAB
Chromium, trivalent total recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****						
04262 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Toluene	SAMPLE MEASUREMENT	*****	*****	*****	*****						
34010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB

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		<b>AREA Code</b>		<b>NUMBER</b>	<b>MM/DD/YYYY</b>
		<b>AREA Code</b>		<b>NUMBER</b>	<b>MM/DD/YYYY</b>

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09/01/2014	09/30/2014



**DMR Mailing ZIP CODE:** 80046

MINOR

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External Outfall

**No Discharge** 

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Benzene	SAMPLE MEASUREMENT	*****	*****	*****	*****						
34030 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Ethylbenzene	SAMPLE MEASUREMENT	*****	*****	*****	*****						
37371 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT				*****	*****	*****	*****			
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	5 30DA AVG	Req. Mon. DAILY MX	gal/min	*****	*****	*****	*****		Monthly	CONTIN
Solids, total dissolved	SAMPLE MEASUREMENT	*****	*****	*****	*****						
70295 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	mg/L		Monthly	GRAB
Chromium, hexavalent tot recoverable	SAMPLE MEASUREMENT	*****	*****	*****	*****						
78247 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Xylene [mix of m+o+p]	SAMPLE MEASUREMENT	*****	*****	*****	*****						
81551 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	ug/L		Monthly	GRAB
Oil and grease visual	SAMPLE MEASUREMENT	*****			*****	*****	*****	*****			
84066 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. INST MAX	Y=1;N=0	*****	*****	*****	*****		Monthly	VISUAL

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			303 680-4725	10/09/2014
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09/01/2014	09/30/2014

**DMR Mailing ZIP CODE:** 80046


MINOR

Discharge to Cottonwood Creek

External Outfall

**No Discharge** ☒

PARAMETER	QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			

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<b>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>			303 630 4725	10/09/2014
<b>TYPED OR PRINTED</b>				<b>AREA Code</b>

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Oil and grease - see D.24, pg 14.

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07/01/2014	09/30/2014

DMR Mailing ZIP CODE: 80046

MINOR

Quarterly Monitoring for 001A  
External OutfallNo Discharge ☒

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Radium 226 + radium 228, total	SAMPLE MEASUREMENT	*****	*****	*****	*****	*****					
11503 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	*****	Req. Mon. DAILY MX	pCi/L		Quarterly	GRAB
Priority Pollutant Results	SAMPLE MEASUREMENT	*****	*****	*****	*****						
51577 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. 30DA AVG	Req. Mon. DAILY MX	Y=1;N=0		Quarterly	GRAB

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J.B. Conrad CFO		303 680 4725		10/09/2014
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Quarterly monitoring - see D.15, pg 13.



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COG840008	001W-W
<b>PERMIT NUMBER</b>	<b>DISCHARGE NUMBER</b>
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07/01/2014	09/30/2014

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MINOR

Acute WET Testing for 001A

External Outfall

**No Discharge** 

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
LC50 Static Renewal 48Hr Acute Ceriodaphnia dubia	<b>SAMPLE MEASUREMENT</b>	*****	*****	*****		*****	*****				
TAM3B 10 Effluent Gross	<b>PERMIT REQUIREMENT</b>	*****	*****	*****	Req. Mon. MN VALUE	*****	*****	%		Quarterly	GRAB
LC50 Statre 96Hr Acute Pimephales	<b>SAMPLE MEASUREMENT</b>	*****	*****	*****		*****	*****				
TAN6C 10 Effluent Gross	<b>PERMIT REQUIREMENT</b>	*****	*****	*****	Req. Mon. MN VALUE	*****	*****	%		Quarterly	GRAB

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			363 630 4725	10/09/2014
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See I.C.2 for details of test procedure. Report LC50 - statistical point estimate which is lethal to 50% of test organisms and attach acute toxicity test report form to DMR.