

State of Colorado
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

Receive Date:

09/04/2019

Document Number:

402166217

Off-Location Flowline

The Flowline Report, Form 44, shall be submitted to register, report realignment, report removal from service, or report abandonment of Off-Location Flowlines, Produced Water Transfer Systems, Domestic Taps, or Crude Oil Transfer Lines as required by the 1100 Series Rules. The Form shall also be submitted to report Grade 1 Gas Leaks from Flowlines per Rule 1104.k.

Operator Information

OGCC Operator Number: 74165 Contact Person: Edward Ingve
Company Name: RENEGADE OIL & GAS COMPANY LLC Phone: (303) 829-2354
Address: 6155 S MAIN STREET #210 Email: ed@renegadeoilandgas.com
City: AURORA State: CO Zip: 80016
Is the Operator a Tier One member of the Utility Notification Center of Colorado (UNCC) that participates in Colorado's One Call notification system? Yes ☒ No ☐

OFF LOCATION FLOWLINE**FLOWLINE ENDPOINT LOCATION IDENTIFICATION**

Location ID: 320641 Location Type: Production Facilities
Name: CHAMPLIN 126 AMOCO B-65S62W Number: 5SWSE
County: ARAPAHOE
Qtr Qtr: SWSE Section: 5 Township: 5S Range: 62W Meridian: 6
Latitude: 39.638726 Longitude: -104.348762

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION**Flowline End Point Riser**

Latitude: 39.637803 Longitude: -104.348435 PDOP: Measurement Date: 08/13/2018
Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 320641 Location Type: Well Site ☐ No Location ID
Name: CHAMPLIN 126 AMOCO B-65S62W Number: 5SWSE
County: ARAPAHOE
Qtr Qtr: SWSE Section: 5 Township: 5S Range: 62W Meridian: 6
Latitude: 39.638726 Longitude: -104.348762

Flowline Start Point Riser

Latitude: 39.638791 Longitude: -104.348760 PDOP: Measurement Date: 08/13/2018
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.500
Bedding Material: Native Materials Date Construction Completed: 05/01/1972
Maximum Anticipated Operating Pressure (PSI): 20 Testing PSI: 80
Test Date: 08/13/2018

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: _____ Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION**Flowline End Point Riser**

Latitude: 39.637803 Longitude: -104.348435 PDOP: _____ Measurement Date: 08/13/2018
Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 320696 Location Type: _____ Well Site ☐ No Location ID
Name: CHAMPLIN 126 AMOCO B-65S62W Number: 5SWNW
County: ARAPAHOE
Qtr Qtr: SWNW Section: 5 Township: 5S Range: 62W Meridian: 6
Latitude: 39.645826 Longitude: -104.357903

Flowline Start Point Riser

Latitude: 39.646087 Longitude: -104.357782 PDOP: _____ Measurement Date: 08/13/2018
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.500
Bedding Material: Native Materials Date Construction Completed: 01/15/1973
Maximum Anticipated Operating Pressure (PSI): 20 Testing PSI: 53
Test Date: 08/13/2018

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: _____ Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION**Flowline End Point Riser**

Latitude: 39.637803 Longitude: -104.348435 PDOP: _____ Measurement Date: 08/13/2018
Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 320688 Location Type: _____ Well Site ☐ No Location ID
Name: CHAMPLIN 126 AMOCO B-65S62W Number: 5NENE
County: ARAPAHOE
Qtr Qtr: NENE Section: 5 Township: 5S Range: 62W Meridian: 6
Latitude: 39.649516 Longitude: -104.343732

Flowline Start Point Riser

Latitude: 39.649615 Longitude -104.343657 PDOP: Measurement Date: 08/13/2018

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.500
Bedding Material: Native Materials Date Construction Completed: 09/15/1972
Maximum Anticipated Operating Pressure (PSI): 20 Testing PSI: 83
Test Date: 08/13/2018

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.637803 Longitude: -104.348435 PDOP: Measurement Date: 08/13/2018

Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 320690 Location Type: Well Site ☐ No Location ID

Name: CHAMPLIN 126 AMOCO B-65S62W Number: 5SWSW

County: ARAPAHOE

Qtr Qtr: SWSW Section: 5 Township: 5S Range: 62W Meridian: 6

Latitude: 39.638656 Longitude: -104.358122

Flowline Start Point Riser

Latitude: 39.638723 Longitude -104.358028 PDOP: Measurement Date: 08/13/2018

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.500
Bedding Material: Native Materials Date Construction Completed: 10/15/1972
Maximum Anticipated Operating Pressure (PSI): 20 Testing PSI: 86
Test Date: 08/13/2018

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.637803 Longitude: -104.348435 PDOP: Measurement Date: 08/13/2018

Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 320645 Location Type: Well Site ☐ No Location ID

Name: CHAMPLIN 126 AMOCO B-65S62W Number: 5NESE

County: ARAPAHOE

Qtr Qtr: NESE Section: 5 Township: 5S Range: 62W Meridian: 6
Latitude: 39.642306 Longitude: -104.343962

Flowline Start Point Riser

Latitude: 39.642361 Longitude -104.343834 PDOP: Measurement Date: 08/13/2018
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.500
Bedding Material: Native Materials Date Construction Completed: 06/15/1972
Maximum Anticipated Operating Pressure (PSI): 20 Testing PSI: 81
Test Date: 08/13/2018

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.637803 Longitude: -104.348435 PDOP: Measurement Date: 08/13/2018
Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 320693 Location Type: Well Site ☐ No Location ID
Name: CHAMPLIN 126 AMOCO B-65S62W Number: 5NENW
County: ARAPAHOE
Qtr Qtr: NENW Section: 5 Township: 5S Range: 62W Meridian: 6
Latitude: 39.649476 Longitude: -104.353102

Flowline Start Point Riser

Latitude: 39.649568 Longitude -104.353051 PDOP: Measurement Date: 08/13/2018
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.500
Bedding Material: Native Materials Date Construction Completed: 11/01/1972
Maximum Anticipated Operating Pressure (PSI): 20 Testing PSI: 34
Test Date: 09/04/2019

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.637803 Longitude: -104.348435 PDOP: Measurement Date: 08/13/2018
Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 320685 Location Type: Well Site ☐ No Location ID
Name: CHAMPLIN 126 AMOCO B-65S62W Number: 5SWNE
County: ARAPAHOE
Qtr Qtr: SWNE Section: 5 Township: 5S Range: 62W Meridian: 6
Latitude: 39.645866 Longitude: -104.348532

Flowline Start Point Riser

Latitude: 39.646048 Longitude -104.348427 PDOP: Measurement Date: 08/13/2018
:

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.500
Bedding Material: Native Materials Date Construction Completed: 08/01/1972
Maximum Anticipated Operating Pressure (PSI): 20 Testing PSI: 80
Test Date: 08/13/2018

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.637803 Longitude: -104.348435 PDOP: Measurement Date: 08/13/2018

Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 320695 Location Type: Well Site ☐ No Location ID
Name: CHAMPLIN 126 AMOCO B-65S62W Number: 5NESW
County: ARAPAHOE
Qtr Qtr: NESW Section: 5 Township: 5S Range: 62W Meridian: 6
Latitude: 39.642316 Longitude: -104.353322

Flowline Start Point Riser

Latitude: 39.642408 Longitude -104.353205 PDOP: Measurement Date: 08/13/2018
:

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.500
Bedding Material: Native Materials Date Construction Completed: 01/15/1973
Maximum Anticipated Operating Pressure (PSI): 20 Testing PSI: 58
Test Date: 08/13/2018

OPERATOR COMMENTS AND SUBMITTAL

Comments Initial flowline registration and pressure test for the Champlin 126 Amoco B#1, B#2, B#3, B#4, B#5, B#6, B#7 and B#8. Some of the wells are currently producing and some wells are shut in due to the Anadarko Third Creek Gathering System being shut down. Prospects for gas sales are unknown at this time.
No facility/location ID number has been issued for the Champlin 126 Amoco B tank battery.

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

Signed: _____ Date: 09/04/2019 Email: ed@renegadeoilandgas.com

Print Name: Edward Ingve Title: Manager/Owner

Based on the information provided herein, this Flowline Report complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402166221	PRESSURE TEST
402166228	PRESSURE TEST
402166235	PRESSURE TEST
402166244	PRESSURE TEST
402166249	PRESSURE TEST
402166261	PRESSURE TEST
402166262	PRESSURE TEST
402166265	PRESSURE TEST
402166272	AERIAL PHOTO
402166273	AERIAL PHOTO

Total Attach: 10 Files