

State of Colorado Oil and Gas Conservation Commission

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



OGCC RECEPTION Receive Date: 09/23/2022 Document Number: 403176469

Off-Location Flowline

The Flowline Report, Form 44, shall be submitted to register, report realignment, report removal from service, provide pre-abandonment notices, or report abandonment of Off-Location Flowlines, Flowline Systems, Produced Water Transfer Systems, or Crude Oil Transfer Lines or Systems as required by the 1100 Series Rules. The Form 44 shall also be submitted to register, report realignment, or report abandonment of Domestic Taps, and to report Grade 1 Gas Leaks from Flowlines per Rules 610 and 906.

Operator Information

OGCC Operator Number: 74165 Contact Person: JB Condill Company Name: RENEGADE OIL & GAS COMPANY LLC Phone: (303) 680-4725 Address: 6155 S MAIN STREET #225 Email: jbcrog@aol.com City: AURORA State: CO Zip: 80016 Is the Operator a Tier One member of the Utility Notification Center of Colorado (CO811) that participates in Colorado's One Call notification system? Yes [X] No [ ]

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 469633 Location Type: Production Facilities Name: MORRIS-66S63W Number: 14SESE County: ELBERT Qtr Qtr: NENE Section: 24 Township: 6S Range: 63W Meridian: 6 Latitude: 39.520456 Longitude: -104.402852

Description of Corrosion Protection

There is no corrosion protection at this time.

Description of Integrity Management Program

An annual pressure test to the maximum anticipated operating pressure. Pressure to the MOP for 30 minutes. Pressure loss not to exceed 10%.

Description of the construction method used for public by-ways, road crossings, sensitive wildlife habitats, sensitive areas, and natural and manmade watercourses (i.e., open trench, bored and cased, or bored only), if applicable.

N/A.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 469781 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 322152 Location Type: Well Site [ ] Name: MORRIS-66S63W Number: 24NWSW

County: ELBERT

No Location ID

Qtr Qtr: NWSW Section: 24 Township: 6S Range: 63W Meridian: 6

Latitude: 39.511407 Longitude: -104.401563

Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Multiphase Pipe Material: HDPE Max Outer Diameter:(Inches) 2.375

Bedding Material: Native Materials Date Construction Completed: 07/01/2014

Maximum Anticipated Operating Pressure (PSI): 30 Testing PSI: 108

Test Date: 07/02/2018

**OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification**

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

**Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:**

\_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 469791 Flowline Type: Peripheral Piping Action Type: \_\_\_\_\_

**OFF LOCATION FLOWLINE REGISTRATION**

Equipment at End Point Riser: Heater Treater

**Flowline Start Point Location Identification**

Location ID: 322152 Location Type: Well Site

Name: MORRIS-66S63W Number: 24NWSW

County: ELBERT No Location ID

Qtr Qtr: NWSW Section: 24 Township: 6S Range: 63W Meridian: 6

Latitude: 39.511407 Longitude: -104.401563

Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Natural Gas Pipe Material: HDPE Max Outer Diameter:(Inches) 1.310

Bedding Material: Native Materials Date Construction Completed: 07/01/2014

Maximum Anticipated Operating Pressure (PSI): 20 Testing PSI: 31

Test Date: 07/02/2018

**OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification**

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

**Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:**

\_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 469798 Flowline Type: Wellhead Line Action Type: \_\_\_\_\_

**OFF LOCATION FLOWLINE REGISTRATION**

Equipment at End Point Riser: Heater Treater

**Flowline Start Point Location Identification**

Location ID: 322154 Location Type: Well Site

Name: MORRIS-66S63W Number: 14SESE

County: ELBERT No Location ID

Qtr Qtr: SESE Section: 14 Township: 6S Range: 63W Meridian: 6

Latitude: 39.522307 Longitude: -104.406273

Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.500

Bedding Material: Native Materials Date Construction Completed: 12/01/1977

Maximum Anticipated Operating Pressure (PSI): 30 Testing PSI: 71

Test Date: 07/02/2018

**OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification**

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

**Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:**

\_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 469787 Flowline Type: Wellhead Line Action Type: \_\_\_\_\_

**OFF LOCATION FLOWLINE REGISTRATION**

Equipment at End Point Riser: Heater Treater

**Flowline Start Point Location Identification**

Location ID: 322151 Location Type: Well Site

Name: MORRIS-66S63W Number: 24NWNW

County: ELBERT No Location ID

Qtr Qtr: NWNW Section: 24 Township: 6S Range: 63W Meridian: 6

Latitude: 39.518467 Longitude: -104.401683

Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Multiphase Pipe Material: Steel/HDPE Max Outer Diameter:(Inches) 2.500

Bedding Material: Native Materials Date Construction Completed: 10/01/1977

Maximum Anticipated Operating Pressure (PSI): 25 Testing PSI: 71

Test Date: 07/02/2018

**OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification**

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

**Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:**

\_\_\_\_\_

**OPERATOR COMMENTS AND SUBMITTAL**

Comments

\_\_\_\_\_

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

Signed: \_\_\_\_\_ Date: 09/23/2022 Email: jbcrog@aol.com

Print Name: JB Condill Title: VP-Land

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: \_\_\_\_\_

## Conditions of Approval

**COA Type**

**Description**

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### Attachment Check List

**Att Doc Num**

**Name**

403176477	OFF-LOCATION FLOWLINE GIS SHP
403176478	OFF-LOCATION FLOWLINE GIS SHP
403176479	OFF-LOCATION FLOWLINE GIS SHP
403176480	OFF-LOCATION FLOWLINE GIS SHP

Total Attach: 4 Files

### General Comments

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)