

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: 05/16/2023 Document Number: 403404599

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: 322161 Location Type: Production Facilities Name: WHITEHEAD-66S63W Number: 12NENE County: ELBERT Qtr Qtr: NENE Section: 12 Township: 6S Range: 63W Meridian: 6 Latitude: 39.547597 Longitude: -104.388563

Description of Corrosion Protection

There is no corrosion protection at this time as the lines are out of service. Should the lines return to service, corrosion protection will be evaluated at that time.

Description of Integrity Management Program

Should the lines return to service, 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: 474304 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 322166 Location Type: Well Site []

Name: WHITEHEAD-66S63W

Number: 12SWNE

County: ELBERT

No Location ID

Qtr Qtr: SWNE

Section: 12

Township: 6S

Range: 63W

Meridian: 6

Latitude: 39.543987

Longitude: -104.392123

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 3.500

Bedding Material: Native Materials Date Construction Completed: 01/15/1981

Maximum Anticipated Operating Pressure (PSI): 20 Testing PSI: 54

Test Date: 10/04/2019

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: 474303

Flowline Type: Peripheral Piping

Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 322166

Location Type: Well Site



Name: WHITEHEAD-66S63W

Number: 12SWNE

County: ELBERT

No Location ID

Qtr Qtr: SWNE

Section: 12

Township: 6S

Range: 63W

Meridian: 6

Latitude: 39.543987

Longitude: -104.392123

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: 01/15/1981

Maximum Anticipated Operating Pressure (PSI): 15 Testing PSI: 19

Test Date: 10/09/2019

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: 05/16/2023 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

403404606	OFF-LOCATION FLOWLINE GIS SHP
403404607	OFF-LOCATION FLOWLINE GIS SHP

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval

Total: 0 comment(s)