

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: 09/17/2019 Document Number: 402179860

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 [X] No [ ]

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 319860 Location Type: Production Facilities Name: SMITH-62S64W Number: 20NWNW County: ADAMS Qtr Qtr: NWNW Section: 20 Township: 2S Range: 64W Meridian: 6 Latitude: 39.868112 Longitude: -104.581391

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: Flowline Type: Peripheral Piping Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.868502 Longitude: -104.581271 PDOP: Measurement Date: 09/09/2019 Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 375307 Location Type: Well Site [ ] No Location ID Name: HALVERSON Number: 20-13 County: ADAMS Qtr Qtr: SWSW Section: 20 Township: 2S Range: 64W Meridian: 6 Latitude: 39.857200 Longitude: -104.581070

Flowline Start Point Riser

Latitude: 39.857196 Longitude: -104.581068 PDOP: Measurement Date: 09/09/2019 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: 07/01/2012  
 Maximum Anticipated Operating Pressure (PSI): 20 Testing PSI: 34  
 Test Date: 09/12/2019

**FLOWLINE FACILITY INFORMATION**

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

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

Latitude: 39.868502 Longitude: -104.581271 PDOP: \_\_\_\_\_ Measurement Date: 09/09/2019  
 Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 375307 Location Type: \_\_\_\_\_ Well Site  No Location ID  
 Name: HALVERSON Number: 20-13  
 County: ADAMS  
 Qtr Qtr: SWSW Section: 20 Township: 2S Range: 64W Meridian: 6  
 Latitude: 39.857200 Longitude: -104.581070

**Flowline Start Point Riser**

Latitude: 39.857196 Longitude -104.581068 PDOP: \_\_\_\_\_ Measurement Date: 09/09/2019  
 Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Multiphase Pipe Material: HDPE Max Outer Diameter:(Inches) 3.500  
 Bedding Material: Native Materials Date Construction Completed: 07/01/2012  
 Maximum Anticipated Operating Pressure (PSI): 40 Testing PSI: 94  
 Test Date: 09/09/2019

**OPERATOR COMMENTS AND SUBMITTAL**

Comments

Initial flowline registration and pressure test for the Halverson 20-13. The end point of this flowline is the lease separator at the Smith 20-4 wellsite. The Halverson 20-11 well is tied into this flowline on it's routing to the separator. All wells on this lease are currently SI as a result of the Anadarko Third Creek Gathering System shut down. Prospects for returning the lease back to production is unknown at this time. The location ID number of 319860 for the Smith 20-4 well has been used for the Smith/Halverson 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: 09/17/2019 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**

<b>Att Doc Num</b>	<b>Name</b>
402179870	PRESSURE TEST
402179871	PRESSURE TEST
402179872	AERIAL PHOTO

Total Attach: 3 Files