

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: 08/09/2018

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Domestic Tap

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: 96850 Contact Person: Jeff Kirtland
Company Name: TEP ROCKY MOUNTAIN LLC Phone: (970) 263-2736
Address: PO BOX 370 Email: jkirtland@terraep.com
City: PARACHUTE State: CO Zip: 81635
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 [ ]

DOMESTIC TAP

DOMESTIC TAP ASSOCIATED WELL LOCATION IDENTIFICATION

Location ID: 323780 Location Type: Well Site
Name: PFOST-67S95W Number: 3NESW
County: GARFIELD
Qtr Qtr: NESW Section: 3 Township: 7S Range: 95W Meridian: 6
Latitude: 39.465009 Longitude: -107.986693

DOMESTIC TAP FACILITY INFORMATION

Flowline Facility ID: 456899 Flowline Facility Type: Domestic Action Type: Registration

DOMESTIC TAP REGISTRATION

Installation or Date of Discovery: 08/19/2000

Flowline Start Point Riser

Latitude: 39.465130 Longitude: -107.986290 PDOP: 2.7 Measurement Date: 11/18/2015

Tap Source: Flowline

Street Address of Point of Delivery

Address: N/A

City: N/A State: CO Zip: N/A

Latitude: 39.465700 Longitude: -107.984760 PDOP: 4.4 Measurement Date: 11/18/2015

DOMESTIC TAP FACILITY INFORMATION

Flowline Facility ID: 456900 Flowline Facility Type: Domestic Action Type: Registration

**DOMESTIC TAP REGISTRATION**

03/25/2000

Installation or Date of Discovery: \_\_\_\_\_

**Flowline Start Point Riser**Latitude: 39.464810 Longitude -107.986250 PDOP: 2.6 Measurement Date: 11/18/2015

Tap Source: \_\_\_\_\_ Flowline \_\_\_\_\_

**Street Address of Point of Delivery**Address: N/ACity: N/A State: CO Zip: N/ALatitude: 39.463440 Longitude: -107.984330 PDOP: 4.4 Measurement Date: 11/18/2015**OPERATOR COMMENTS AND SUBMITTAL**

Comments

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

Signed: \_\_\_\_\_ Date: 08/09/2018 Email: jkirtland@terraep.comPrint Name: Jeff Kirtland Title: Regulatory Lead

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: 8/28/2018**Attachment Check List****Att Doc Num****Name**

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Total Attach: 0 Files