

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

Document Number:

401727430

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: Kellye Garcia
Company Name: TEP ROCKY MOUNTAIN LLC Phone: (832) 726-1159
Address: PO BOX 370 Email: kgarcia@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: 334597 Location Type: Well Site
Name: MAHAFFEY-66S95W Number: 36NWSW
County: GARFIELD
Qtr Qtr: NWSW Section: 36 Township: 6S Range: 95W Meridian: 6
Latitude: 39.478725 Longitude: -107.952149

DOMESTIC TAP FACILITY INFORMATION

Flowline Facility ID: 456937 Flowline Facility Type: Domestic Action Type: Registration

DOMESTIC TAP REGISTRATION

Installation or Date of Discovery: 02/24/2002

Flowline Start Point Riser

Latitude: 39.478670 Longitude: -107.953310 PDOP: 2.6 Measurement Date: 11/18/2015

Tap Source: Separator

Street Address of Point of Delivery

Address: NA
City: NA State: CO Zip: NA
Latitude: 39.478450 Longitude: -107.955280 PDOP: 2.6 Measurement Date: 11/18/2015

DOMESTIC TAP FACILITY INFORMATION

Flowline Facility ID: 456938 Flowline Facility Type: Domestic Action Type: Registration

**DOMESTIC TAP REGISTRATION**Installation or Date of Discovery: 02/24/2002**Flowline Start Point Riser**Latitude: 39.478670 Longitude -107.953310 PDOP: 2.6 Measurement Date: 11/18/2015  
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Tap Source: \_\_\_\_\_ Separator \_\_\_\_\_

**Street Address of Point of Delivery**Address: NACity: NA State: CO Zip: NALatitude: 39.480660 Longitude: -107.950850 PDOP: 9.1 Measurement Date: 11/18/2015**DOMESTIC TAP FACILITY INFORMATION**Flowline Facility ID: 456939 Flowline Facility Type: Domestic Action Type: Registration**DOMESTIC TAP REGISTRATION**Installation or Date of Discovery: 02/24/2002**Flowline Start Point Riser**Latitude: 39.478670 Longitude -107.953310 PDOP: 2.6 Measurement Date: 11/18/2015  
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Tap Source: \_\_\_\_\_ Separator \_\_\_\_\_

**Street Address of Point of Delivery**Address: NACity: NA State: CO Zip: NALatitude: 39.475770 Longitude: -107.950560 PDOP: 2.7 Measurement Date: 11/18/2015**DOMESTIC TAP FACILITY INFORMATION**Flowline Facility ID: 456940 Flowline Facility Type: Domestic Action Type: Registration**DOMESTIC TAP REGISTRATION**Installation or Date of Discovery: 02/24/2002**Flowline Start Point Riser**Latitude: 39.478670 Longitude -107.953310 PDOP: 2.6 Measurement Date: 11/18/2015  
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Tap Source: \_\_\_\_\_ Separator \_\_\_\_\_

**Street Address of Point of Delivery**Address: NACity: NA State: CO Zip: NALatitude: 39.475580 Longitude: -107.951690 PDOP: 2.4 Measurement Date: 11/18/2015**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: 08/09/2018 Email: kgarcia@terraep.com

Print Name: Kellye Garcia Title: Land & Regulatory Tech

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**

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files