

State of Colorado
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

Receive Date:

09/10/2018

Document Number:

401739776

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: 10634 Contact Person: Kelly Vasquez
Company Name: P O & G OPERATING LLC Phone: (713) 589-8192
Address: 5847 SAN FELIPE SUITE 3200 Email: kelly_vasquez@pogresources.com
City: HOUSTON State: TX Zip: 77057
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 ☒ No ☐

OFF LOCATION FLOWLINE**FLOWLINE ENDPOINT LOCATION IDENTIFICATION**

Location ID: 321935 Location Type: Well Site
Name: TALLMAN-616S45W Number: 35NENE
County: CHEYENNE
Qtr Qtr: NENE Section: 35 Township: 16S Range: 45W Meridian: 6
Latitude: 38.626909 Longitude: -102.422075

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 457305 Flowline Type: Production Line Action Type: Registration

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

Latitude: 38.626500 Longitude: -102.422760 PDOP: Measurement Date: 08/21/2018
Equipment at End Point Riser: Tank

Flowline Start Point Location Identification

Location ID: 321935 Location Type: Well Site ☐ No Location ID
Name: TALLMAN-616S45W Number: 35NENE
County: CHEYENNE
Qtr Qtr: NENE Section: 35 Township: 16S Range: 45W Meridian: 6
Latitude: 38.626909 Longitude: -102.422075

Flowline Start Point Riser

Latitude: 38.626800 Longitude: -102.423000 PDOP: Measurement Date: 08/23/2018
Equipment at Start Point Riser: Separator

Flowline Description and Testing

Type of Fluid Transferred: Crude Oil Pipe Material: Carbon Steel Max Outer Diameter:(Inches) _____
Bedding Material: _____ Date Construction Completed: 09/02/1996
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL

Comments

Lines have been flushed and capped .

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

Signed: _____ Date: 09/10/2018 Email: kelly_vasquez@pogresources.com

Print Name: Kelly Vasquez Title: Regulatory Associate

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: 9/14/2018

Attachment Check List**Att Doc Num****Name**

401739776

Form44 Submitted

Total Attach: 1 Files