

State of Colorado
Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:

03/04/2019

Document Number:

401860042

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: 10299 Contact Person: Jake Flora
Company Name: KUENZLER & FLORA RESERVE COMPANY Phone: (720) 988-5375
Address: 3310 W AQUEDUCT AVE Email: jakeflora@kfrcorp.com
City: LITTLETON State: CO Zip: 80123
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: 431251 Location Type: Well Site
Name: Shady Lady Number: 1
County: CHEYENNE
Qtr Qtr: SENE Section: 36 Township: 12s Range: 46w Meridian: 6
Latitude: 38.964500 Longitude: -102.502320

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 463126 Flowline Type: Production Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 38.964500 Longitude: -102.502320 PDOP: 1.8 Measurement Date: 05/30/2013
Equipment at End Point Riser: Well

Flowline Start Point Location Identification

Location ID: 381217 Location Type: Well Site [] No Location ID
Name: RED LADY Number: 1-36
County: CHEYENNE
Qtr Qtr: NENE Section: 36 Township: 12S Range: 46W Meridian: 6
Latitude: 38.966760 Longitude: -102.504630

Flowline Start Point Riser

Latitude: 38.966860 Longitude: -102.504844 PDOP: 1.8 Measurement Date: 12/03/2018
Equipment at Start Point Riser: Separator

Flowline Description and Testing

Type of Fluid Transferred: Produced Water Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.000
 Bedding Material: Native Materials Date Construction Completed: 07/15/2013
 Maximum Anticipated Operating Pressure (PSI): 50 Testing PSI: 150
 Test Date: 04/04/2018

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: 03/04/2019 Email: jakeflora@kfrcorp.com

Print Name: Jake Flora Title: Petroleum Engineer

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: 3/8/2019

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401860042	Form44 Submitted
401958265	PRESSURE TEST
401958311	FLOWLINE LAYOUT DRAWING

Total Attach: 3 Files