

State of Colorado  
Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:

03/12/2019

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401969073

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: 10110 Contact Person: Renee Kendrick  
Company Name: GREAT WESTERN OPERATING COMPANY LLC Phone: (720) 595-2114  
Address: 1001 17TH STREET #2000 Email: rkendrick@gwogco.com  
City: DENVER State: CO Zip: 80202  
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: 320488 Location Type: Production Facilities  
Name: EQUINOX-61S67W Number: 9NESE  
County: ADAMS  
Qtr Qtr: NESE Section: 9 Township: 1S Range: 67W Meridian: 6  
Latitude: 39.977639 Longitude: -104.887083

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 459659 Flowline Type: Wellhead Line Action Type: Abandonment

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.977282 Longitude: -104.887070 PDOP: Measurement Date: 06/04/2017  
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 320492 Location Type: Well Site [ ] No Location ID  
Name: EQUINOX-61S67W Number: 9SWSE  
County: ADAMS  
Qtr Qtr: SWSE Section: 9 Township: 1S Range: 67W Meridian: 6  
Latitude: 39.973508 Longitude: -104.889203

Flowline Start Point Riser

Latitude: 39.973514 Longitude: -104.889217 PDOP: Measurement Date: 05/18/2017  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: \_\_\_\_\_ Pipe Material: \_\_\_\_\_ Max Outer Diameter:(Inches) \_\_\_\_\_  
Bedding Material: \_\_\_\_\_ Date Construction Completed: 05/16/2003  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OFF LOCATION FLOWLINE ABANDONMENT**

Date: 12/20/2018

**Description of Abandonment**

Pipe was disconnected from the wellhead and the separator; both ends were plugged below ground. Flowline was flushed with 25bbbls fresh water prior to plugging. Line was verified free of hydro carbons with LEL monitor. Line was cut off 4' below surface. Line was filled with 4775 lbs of slurry and capped on both ends. Area was backfilled on both ends.

The line was abandoned in place not removed from service.

**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: 03/12/2019 Email: rkendrick@gwogco.com

Print Name: Renee Kendrick Title: Sr Regulatory Analyst

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: 3/12/2019

**Attachment Check List**

<b>Att Doc Num</b>	<b>Name</b>
401969073	Form44 Submitted

Total Attach: 1 Files