

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:

03/08/2019

Document Number:

401954954

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: 10373 Contact Person: Joseph Vargo
Company Name: NGL WATER SOLUTIONS DJ LLC Phone: (303) 815-1010
Address: 3773 CHERRY CRK NORTH DR #1000 Email: joseph.vargo@nglep.com
City: DENVER State: CO Zip: 80209
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: 159607 Location Type: Well Site
Name: NGL Number: C5A & C5B
County: WELD
Qtr Qtr: NESW Section: 29 Township: 2N Range: 64W Meridian: 6
Latitude: 40.107446 Longitude: -104.575499

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.107446 Longitude: -104.575499 PDOP: Measurement Date: 10/22/2018
Equipment at End Point Riser: Well

Flowline Start Point Location Identification

Location ID: 440092 Location Type: Produced Water Transfer System [ ] No Location ID
Name: NGL MAJOR FACILITY Number: C5
County: WELD
Qtr Qtr: SWSW Section: 29 Township: 2N Range: 64W Meridian: 6
Latitude: 40.105521 Longitude: -104.581750

Flowline Start Point Riser

Latitude: 40.105397 Longitude: -104.580916 PDOP: Measurement Date: 10/18/2018
Equipment at Start Point Riser: Tank

**Flowline Description and Testing**

Type of Fluid Transferred: Produced Water Pipe Material: Fiberglass Max Outer Diameter:(Inches) 6.000  
Bedding Material: Sand Date Construction Completed: 11/26/2015  
Maximum Anticipated Operating Pressure (PSI): 1800 Testing PSI: 1800  
Test Date: 10/17/2018

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: \_\_\_\_\_ Flowline Type: Wellhead Line Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.107455 Longitude: -104.575515 PDOP: \_\_\_\_\_ Measurement Date: 07/24/2018  
Equipment at End Point Riser: Well

**Flowline Start Point Location Identification**

Location ID: 440092 Location Type: Produced Water Transfer System  No Location ID  
Name: NGL MAJOR FACILITY Number: C5  
County: WELD  
Qtr Qtr: SWSW Section: 29 Township: 2N Range: 64W Meridian: 6  
Latitude: 40.105521 Longitude: -104.581750

**Flowline Start Point Riser**

Latitude: 40.105170 Longitude -104.580493 PDOP: \_\_\_\_\_ Measurement Date: 07/24/2018  
Equipment at Start Point Riser: Tank

**Flowline Description and Testing**

Type of Fluid Transferred: Produced Water Pipe Material: Fiberglass Max Outer Diameter:(Inches) 6.000  
Bedding Material: Sand Date Construction Completed: 04/24/2015  
Maximum Anticipated Operating Pressure (PSI): 1800 Testing PSI: 2000  
Test Date: 07/24/2018

**OPERATOR COMMENTS AND SUBMITTAL**

Comments 

Hopefully i corrected the coordinates. Apologies.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.  
Signed: \_\_\_\_\_ Date: 03/08/2019 Email: joseph.vargo@nglep.com  
Print Name: Joseph Vargo Title: Regulatory Manager

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: \_\_\_\_\_

**Attachment Check List**

| <b>Att Doc Num</b> | <b>Name</b>      |
|--------------------|------------------|
| 401954954          | Form44 Submitted |
| 401954956          | PRESSURE TEST    |
| 401954957          | PRESSURE TEST    |
| 401954958          | PRESSURE TEST    |

Total Attach: 4 Files