

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:

05/31/2019

Document Number:

402057802

## 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: 96850 Contact Person: Vicki Schoeber  
Company Name: TEP ROCKY MOUNTAIN LLC Phone: (970) 263-2721  
Address: PO BOX 370 Email: vschoeber@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 ☒ No ☐

## OFF LOCATION FLOWLINE

## FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 323886 Location Type: Production Facilities  
Name: CLOUGH-66S94W Number: 20SESE  
County: GARFIELD  
Qtr Qtr: SESE Section: 20 Township: 6S Range: 94W Meridian: 6  
Latitude: 39.505829 Longitude: -107.904860

## FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 464816 Flowline Type: Wellhead Line Action Type: Registration

## OFF LOCATION FLOWLINE REGISTRATION

## Flowline End Point Riser

Latitude: 39.505734 Longitude: -107.904796 PDOP: Measurement Date: 09/07/2018  
Equipment at End Point Riser: Separator

## Flowline Start Point Location Identification

Location ID: 335335 Location Type: Well Site ☐ No Location ID  
Name: CLOUGH-66S94W Number: 20SESE  
County: GARFIELD  
Qtr Qtr: SESE Section: 20 Township: 6S Range: 94W Meridian: 6  
Latitude: 39.504089 Longitude: -107.903810

## Flowline Start Point Riser

Latitude: 39.504306 Longitude: -107.903746 PDOP: Measurement Date: 09/07/2018  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000  
Bedding Material: Native Materials Date Construction Completed: 02/03/2004  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 464817 Flowline Type: Wellhead Line Action Type: Registration

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

Latitude: 39.505771 Longitude: -107.904806 PDOP: \_\_\_\_\_ Measurement Date: 09/07/2018  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 335335 Location Type: Well Site ☐ No Location ID  
Name: CLOUGH-66S94W Number: 20SESE  
County: GARFIELD  
Qtr Qtr: SESE Section: 20 Township: 6S Range: 94W Meridian: 6  
Latitude: 39.504089 Longitude: -107.903810

**Flowline Start Point Riser**

Latitude: 39.504314 Longitude: -107.903693 PDOP: \_\_\_\_\_ Measurement Date: 09/07/2018  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000  
Bedding Material: Native Materials Date Construction Completed: 12/30/1999  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OPERATOR COMMENTS AND SUBMITTAL**

Comments

This registration is for 2 wellhead lines from the RMV 213-20 pad to the separators on the RMV 3-20 pad.  
(OF\_RMV3-20PF - 9059 System ID)  
OF\_RMV213-20\_RWF544-20 - 90197 Flowline ID  
OF\_RMV213-20\_RMV213-30 - 90239 Flowline ID

The construction completion dates are estimated based on limited information currently available.

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

Signed: \_\_\_\_\_ Date: 05/31/2019 Email: vschoeber@terraep.com

Print Name: Vicki Schoeber Title: Regulatory Specialist

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: 6/3/2019

## **Attachment Check List**

**Att Doc Num****Name**

402057802	Form44 Submitted
402057825	LAYOUT DRAWING-ACTUAL
402057826	OFF-LOCATION FLOWLINE GEODATABASE GDB

Total Attach: 3 Files