

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:

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 [X] 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