

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:

06/28/2019

Document Number:

402091177

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: 10330 Contact Person: Jim Chisholm
Company Name: INVESTMENT EQUIPMENT LLC Phone: (405) 642-9437
Address: 412 W PLATTE AVE Email: investmentequipment@gmail.com
City: FT MORGAN State: CO Zip: 80701
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: 317365 Location Type: Production Facilities
Name: STATE-63S50W Number: 22NWNE
County: WASHINGTON
Qtr Qtr: NWNE Section: 22 Township: 3S Range: 50W Meridian: 6
Latitude: 39.782910 Longitude: -102.960770

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 465678 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.780190 Longitude: -102.961230 PDOP: 3.9 Measurement Date: 06/26/2019
Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 402668 Location Type: Well Site No Location ID
Name: FRIEND STATE-63S50W Number: 22SWNE
County: WASHINGTON
Qtr Qtr: SWNE Section: 22 Township: 3S Range: 50W Meridian: 6
Latitude: 39.780750 Longitude: -102.960780

Flowline Start Point Riser

Latitude: 39.783050 Longitude: -102.960750 PDOP: 3.8 Measurement Date: 06/26/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Crude Oil Pipe Material: HDPE Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 06/01/2003
Maximum Anticipated Operating Pressure (PSI): 30 Testing PSI: 60
Test Date: 06/26/2019

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: 06/28/2019 Email: investmentequipment@gmail.com

Print Name: Jim Chisholm Title: Managing Member

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: 7/1/2019

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402091177	Form44 Submitted
402091197	PRESSURE TEST
402091198	FLOWLINE LAYOUT DRAWING

Total Attach: 3 Files