

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:

07/02/2019

Document Number:

402088056

## 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 ☒ No ☐

**OFF LOCATION FLOWLINE****FLOWLINE ENDPOINT LOCATION IDENTIFICATION**

Location ID: 425647 Location Type: Production Facilities  
Name: BOWER TANK BATTERY Number: \_\_\_\_\_  
County: WELD  
Qtr Qtr: SESW Section: 10 Township: 6N Range: 67W Meridian: 6  
Latitude: 40.494450 Longitude: -104.881710

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 465766 Flowline Type: Wellhead Line Action Type: Registration

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

Latitude: 40.494751 Longitude: -104.882062 PDOP: \_\_\_\_\_ Measurement Date: 06/07/2018  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 302717 Location Type: Well Site ☐ No Location ID  
Name: Bower Number: 10-23  
County: WELD  
Qtr Qtr: NESW Section: 10 Township: 6N Range: 67W Meridian: 6  
Latitude: 40.499740 Longitude: -104.881840

**Flowline Start Point Riser**

Latitude: 40.499743 Longitude: -104.881883 PDOP: \_\_\_\_\_ Measurement Date: 06/07/2018  
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: 12/27/2011  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 465767 Flowline Type: Wellhead Line Action Type: Registration

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

Latitude: 40.494749 Longitude: -104.882059 PDOP: \_\_\_\_\_ Measurement Date: 06/07/2018  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 302718 Location Type: Well Site ☐ No Location ID  
Name: Bower Number: 10-24  
County: WELD  
Qtr Qtr: SESW Section: 10 Township: 6N Range: 67W Meridian: 6  
Latitude: 40.496020 Longitude: -104.881870

**Flowline Start Point Riser**

Latitude: 40.496040 Longitude: -104.881854 PDOP: \_\_\_\_\_ Measurement Date: 06/07/2018  
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: 01/04/2012  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 465768 Flowline Type: Wellhead Line Action Type: Registration

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

Latitude: 40.494738 Longitude: -104.882092 PDOP: \_\_\_\_\_ Measurement Date: 06/07/2018  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 302719 Location Type: Well Site ☐ No Location ID  
Name: Bower Number: 10-53  
County: WELD  
Qtr Qtr: SESW Section: 10 Township: 6N Range: 67W Meridian: 6  
Latitude: 40.497870 Longitude: -104.883660

**Flowline Start Point Riser**

Latitude: 40.497877 Longitude -104.883714 PDOP:          Measurement Date: 06/07/2018

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: 12/31/2011

Maximum Anticipated Operating Pressure (PSI):                      Testing PSI:                     

Test Date:                     

**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: 07/02/2019 Email: rkendrick@gwogco.com

Print Name: Renee Kendrick Title: Senior 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: 7/3/2019

**Attachment Check List**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
402088056	Form44 Submitted

Total Attach: 1 Files