

State of Colorado Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date: 07/30/2019

Document Number: 402124805

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: 51130 Contact Person: Michael Nicol
Company Name: LOCIN OIL CORPORATION Phone: (281) 362-8600
Address: 2445 TECHNOLOGY FOREST BD #710 Email: mnicol@locinoil.com
City: THE WOODLANDS State: TX Zip: 77381
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: 315209 Location Type: Well Site
Name: FORK UNIT-62S102W Number: 11NWSW
County: RIO BLANCO
Qtr Qtr: NWSW Section: 11 Township: 2S Range: 102W Meridian: 6
Latitude: 39.885919 Longitude: -108.817002

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 466873 Flowline Type: Production Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.886467 Longitude: -108.817133 PDOP: 2.0 Measurement Date: 07/16/2019
Equipment at End Point Riser: Custody Transfer Point

Flowline Start Point Location Identification

Location ID: 315597 Location Type: Well Site [] No Location ID
Name: FORK UNIT FEDERAL-62S102W Number: 10NESE
County: RIO BLANCO
Qtr Qtr: NESE Section: 10 Township: 2S Range: 102W Meridian: 6
Latitude: 39.886259 Longitude: -108.822152

Flowline Start Point Riser

Latitude: 39.886367 Longitude: -108.821167 PDOP: 2.0 Measurement Date: 07/16/2019
Equipment at Start Point Riser: Meter

Flowline Description and Testing

Type of Fluid Transferred: Natural Gas Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 4.000
Bedding Material: Unknown Date Construction Completed: 08/21/1981
Maximum Anticipated Operating Pressure (PSI): 500 Testing PSI: _____
Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL

Comments Line installed by prior operator and drawings unavailable. Line location and size based upon best efforts. No attempt was made to excavate line and verify.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.
Signed: _____ Date: 07/30/2019 Email: mnicol@locinoil.com
Print Name: Michael Nicol Title: 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: 8/20/2019

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402124805	Form44 Submitted
402125923	FLOWLINE LAYOUT DRAWING
402127924	OFF-LOCATION FLOWLINE GEODATABASE SHP

Total Attach: 3 Files