

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:

07/30/2019

Document Number:

402126282

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: 315421 Location Type: Well Site
Name: FORK UNIT FEDERAL-61S101W Number: 19SENE
County: RIO BLANCO
Qtr Qtr: SENE Section: 19 Township: 1S Range: 101W Meridian: 6
Latitude: 39.950978 Longitude: -108.769031

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 466874 Flowline Type: Production Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.950933 Longitude: -108.768817 PDOP: 2.0 Measurement Date: 07/16/2019
Equipment at End Point Riser: Tank

Flowline Start Point Location Identification

Location ID: 315420 Location Type: Well Site [] No Location ID
Name: FORK UNIT-FEDERAL-61S101W Number: 19NESE
County: RIO BLANCO
Qtr Qtr: NESE Section: 19 Township: 1S Range: 101W Meridian: 6
Latitude: 39.945108 Longitude: -108.769131

Flowline Start Point Riser

Latitude: 39.945267 Longitude: -108.769150 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) 1.900
Bedding Material: Above Ground Date Construction Completed: 06/15/1986
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.
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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>
402126282	Form44 Submitted
402127980	OFF-LOCATION FLOWLINE GEODATABASE SHP
402127982	FLOWLINE LAYOUT DRAWING

Total Attach: 3 Files