

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:
09/04/2019
Document Number:
402165497

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: 10699 Contact Person: Pat Dolezal
Company Name: OWN RESOURCES OPERATING LLC Phone: (970) 332-3585
Address: 36695 US-385 Email: pat.dolezal@ownresources.com
City: WRAY State: CO Zip: 80758
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: 303031 Location Type: Production Facilities
Name: HARRY L. JOHNSON-62S46W Number: 15NESW
County: YUMA
Qtr Qtr: NESW Section: 15 Township: 2S Range: 46W Meridian: 6
Latitude: 39.881540 Longitude: -102.514240

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 467223 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.881457 Longitude: -102.514222 PDOP: _____ Measurement Date: 07/16/2019
Equipment at End Point Riser: Meter

Flowline Start Point Location Identification

Location ID: 311261 Location Type: _____ Well Site No Location ID
Name: Johnson Prescott Number: 13-15 2S46W
County: YUMA
Qtr Qtr: NWSW Section: 15 Township: 2S Range: 46W Meridian: 6
Latitude: 39.881530 Longitude: -102.517500

Flowline Start Point Riser

Latitude: 39.881546 Longitude: -102.517527 PDOP: _____ Measurement Date: 07/16/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Natural Gas Pipe Material: HDPE Max Outer Diameter:(Inches) 2.000
Bedding Material: _____ Date Construction Completed: 08/28/2010
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: 72
Test Date: 12/18/2018

OPERATOR COMMENTS AND SUBMITTAL

Comments

| |
|--|
| Off location flowline Johnson-Prescott 13-15 API 125-11655 |
|--|

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.
Signed: _____ Date: 09/04/2019 Email: pat.dolezal@ownresources.com

Print Name: Pat Dolezal 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: 9/4/2019

Attachment Check List

| <u>Att Doc Num</u> | <u>Name</u> |
|---------------------------|--------------------|
| 402165497 | Form44 Submitted |

Total Attach: 1 Files