

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:

10/31/2019

Document Number:

402228537

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: 52530 Contact Person: Ross Warner
Company Name: MAGPIE OPERATING INC Phone: (970) 6696308
Address: 2707 SOUTH COUNTY RD 11 Email: ross.magpieoil@gmail.com
City: LOVELAND State: CO Zip: 80537
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: 451505 Location Type: Production Facilities
Name: Little Beaver Unit Injection Plant Number:
County: WASHINGTON
Qtr Qtr: NWNW Section: 5 Township: 2S Range: 56W Meridian: 6
Latitude: 39.911967 Longitude: -103.686176

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 469017 Flowline Type: Wellhead Line Action Type: Registration

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

Latitude: 39.911967 Longitude: -103.686176 PDOP: 5.0 Measurement Date: 01/01/2013
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 316979 Location Type: Well Site ☐ No Location ID
Name: LITTLE BEAVER UNIT-62S56W Number: 6SWSE
County: WASHINGTON
Qtr Qtr: SWSE Section: 6 Township: 2S Range: 56W Meridian: 6
Latitude: 39.901506 Longitude: -103.694914

Flowline Start Point Riser

Latitude: 39.901669 Longitude: -103.695349 PDOP: 5.0 Measurement Date: 01/01/2013
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: 08/15/1953
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 469018 Flowline Type: Wellhead Line Action Type: Registration

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

Latitude: 39.911967 Longitude: -103.686176 PDOP: 5.0 Measurement Date: 01/01/2013
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 316982 Location Type: Well Site ☐ No Location ID
Name: LITTLE BEAVER UNIT-62S56W Number: 5SWNW
County: WASHINGTON
Qtr Qtr: SWNW Section: 5 Township: 2S Range: 56W Meridian: 6
Latitude: 39.909155 Longitude: -103.685714

Flowline Start Point Riser

Latitude: 39.909231 Longitude: -103.685761 PDOP: 5.0 Measurement Date: 01/01/2013
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: 11/05/1952
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 469019 Flowline Type: Wellhead Line Action Type: Registration

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

Latitude: 39.911967 Longitude: -103.686176 PDOP: 5.0 Measurement Date: 01/01/2013
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 316988 Location Type: Well Site ☐ No Location ID
Name: LITTLE BEAVER UNIT-62S56W Number: 5NWNE
County: WASHINGTON
Qtr Qtr: NWNE Section: 5 Township: 2S Range: 56W Meridian: 6
Latitude: 39.914595 Longitude: -103.673803

Flowline Start Point Riser

Latitude: 39.914719 Longitude -103.674050 PDOP: 5.0 Measurement Date: 01/01/2013

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: 05/20/1953

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 469020 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.911967 Longitude: -103.686176 PDOP: 5.0 Measurement Date: 01/01/1980

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 316994 Location Type: Well Site ☐ No Location ID

Name: LITTLE BEAVER UNIT-61S56W Number: 32NWSW

County: WASHINGTON

Qtr Qtr: NWSW Section: 32 Township: 1S Range: 56W Meridian: 6

Latitude: 39.920025 Longitude: -103.685894

Flowline Start Point Riser

Latitude: 39.920122 Longitude -103.686034 PDOP: 5.0 Measurement Date: 01/01/2013

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: 03/19/1953

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 469021 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.911967 Longitude: -103.686176 PDOP: 5.0 Measurement Date: 01/01/2013

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 316985 Location Type: Well Site ☐ No Location ID

Name: LITTLE BEAVER UNIT-62S56W Number: 6NENE

County: WASHINGTON

Qtr Qtr: NENE Section: 6 Township: 2S Range: 56W Meridian: 6
Latitude: 39.912955 Longitude: -103.690264

Flowline Start Point Riser

Latitude: 39.912988 Longitude -103.690397 PDOP: 5.0 Measurement Date: 01/01/2013

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: 03/28/1953

Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____

Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 469022 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.911967 Longitude: -103.686176 PDOP: 5.0 Measurement Date: 01/01/2013

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 316980 Location Type: _____ Well Site ☐ No Location ID

Name: LITTLE BEAVER UNIT-62S56W Number: 6NESE

County: WASHINGTON

Qtr Qtr: NESE Section: 6 Township: 2S Range: 56W Meridian: 6

Latitude: 39.907125 Longitude: -103.688004

Flowline Start Point Riser

Latitude: 39.907338 Longitude -103.688059 PDOP: 5.0 Measurement Date: 01/01/2013

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: 11/19/1952

Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____

Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 469023 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.911967 Longitude: -103.686176 PDOP: 5.0 Measurement Date: 01/01/2013

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 316992 Location Type: Well Site ☐ No Location ID
Name: LITTLE BEAVER UNIT-61S56W Number: 32SWSE
County: WASHINGTON
Qtr Qtr: SWSE Section: 32 Township: 1S Range: 56W Meridian: 6
Latitude: 39.918225 Longitude: -103.673753

Flowline Start Point Riser

Latitude: 39.918400 Longitude -103.674000 PDOP: 5.0 Measurement Date: 01/01/2013
:

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: 10/16/1958
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 469024 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.911967 Longitude: -103.686176 PDOP: 5.0 Measurement Date: 01/01/2013
Equipment at End Point Riser: Well

Flowline Start Point Location Identification

Location ID: 316983 Location Type: Well Site ☐ No Location ID
Name: LITTLE BEAVER UNIT-62S56W Number: 5NWNE
County: WASHINGTON
Qtr Qtr: NWNE Section: 5 Township: 2S Range: 56W Meridian: 6
Latitude: 39.912785 Longitude: -103.676123

Flowline Start Point Riser

Latitude: 39.912929 Longitude -103.676346 PDOP: 5.0 Measurement Date: 01/01/2013
:

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: 04/30/1953
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 469025 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.911967 Longitude: -103.686176 PDOP: 5.0 Measurement Date: 01/01/2013

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 316996 Location Type: Well Site ☐ No Location ID

Name: LITTLE BEAVER UNIT-61S56W Number: 32SESE

County: WASHINGTON

Qtr Qtr: SESE Section: 32 Township: 1S Range: 56W Meridian: 6

Latitude: 39.918225 Longitude: -103.669043

Flowline Start Point Riser

Latitude: 39.918225 Longitude: -103.669043 PDOP: 5.0 Measurement Date: 01/01/2013

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: 12/03/1953

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 469026 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.911967 Longitude: -103.686176 PDOP: 5.0 Measurement Date: 01/01/2013

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 316984 Location Type: Well Site ☐ No Location ID

Name: LITTLE BEAVER UNIT-62S56W Number: 5NENW

County: WASHINGTON

Qtr Qtr: NENW Section: 5 Township: 2S Range: 56W Meridian: 6

Latitude: 39.912775 Longitude: -103.681103

Flowline Start Point Riser

Latitude: 39.913101 Longitude: -103.681058 PDOP: 5.0 Measurement Date: 01/01/2013

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: 09/23/1953

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

FLOWLINE FACILITY INFORMATIONFlowline Facility ID: 469027 Flowline Type: Wellhead Line Action Type: Registration**OFF LOCATION FLOWLINE REGISTRATION****Flowline End Point Riser**Latitude: 39.911967 Longitude: -103.686176 PDOP: 5.0 Measurement Date: 01/01/1980Equipment at End Point Riser: Separator**Flowline Start Point Location Identification**Location ID: 316990 Location Type: Well Site ☐ No Location IDName: LITTLE BEAVER UNIT-61S56W Number: 31SESECounty: WASHINGTONQtr Qtr: SESE Section: 31 Township: 1S Range: 56W Meridian: 6Latitude: 39.916385 Longitude: -103.690594**Flowline Start Point Riser**Latitude: 39.916493 Longitude: -103.690703 PDOP: 5.0 Measurement Date: 01/08/1980Equipment at Start Point Riser: Well**Flowline Description and Testing**

Type of Fluid Transferred: _____ Pipe Material: _____ Max Outer Diameter:(Inches) _____

Bedding Material: _____ Date Construction Completed: 05/02/1950

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: 10/31/2019 Email: ross.magpieoil@gmail.comPrint Name: Ross Warner Title: Compliance

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: 11/5/2019**Attachment Check List****Att Doc Num****Name**

402228537

Form44 Submitted

Total Attach: 1 Files