

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Receive Date:

Document Number:

402247461

MONTHLY REPORT OF GASOLINE OR OTHER EXTRACTION PLANT

Rule 313: All operators of gasoline or other extraction plants shall make monthly reports to the Director on Form 11. Such forms shall contain all information required thereon and shall be filed with the Director on or before the 25th day of each month covering the preceding month.

Report gas volumes in MCF corrected to standard conditions of 14.73 psi and 60 degrees Fahrenheit.

CONTACT INFORMATION

OGCC Operator Number: 96340 Contact Name: Linda Boone
Name of Operator: WIEPKING-FULLERTON ENERGY LLC Phone: (720) 941-0791
Address: 106 GLENMOOR LN Title: Agent
City: ENGLEWOOD State: CO Zip: 80113 Email: ldboonepar@aol.com

FACILITY INFORMATION

Plant Name: GREAT PLAINS FIELD GAS PLANT Gas Plant Facility ID: 421328
Plant Address: _____ City: _____ State: CO Zip: _____
County: LINCOLN

REPORT INFORMATION

Report For Month Of: 10 Year: 2019 Plant Shut-In For Entire Month (No Volumes): No

Report Whole Numbers ONLY. Do not enter decimals. Round ALL decimals to nearest whole number.

INTAKE VOLUME

Intake Volume From Oil Wells: 12293 Mcf
Intake Volume From Gas Wells: _____ Mcf
TOTAL Intake Volume: 12293 Mcf (See Note 1)

RESIDUE: DISPOSITION AND VOLUME

Plant Fuel: 2790 Mcf
Returned For Lease Fuel: 3235 Mcf
Sold or Other Disposition (Detail Below): _____ Mcf (See Note 2 & 3)
Returned To Earth: _____ Mcf
Vented: 175 Mcf
Shrinkage: 6093 Mcf
TOTAL Residue Volume: 12293 Mcf (See Note 1)

DETAILS of RESIDUE : SOLD or OTHER DISPOSITION (See Note 2)

Name of Purchaser or User	Address	Used For	MCF

DetailsTotal Volume (See Note 3) _____ 0

PLANT PRODUCTION ,RECEIPTS, DELIVERIES, FLARE, AND STOCK IN 42-GAL BARRELS

Product	Opening Stock	Receipts	Deliveries	Flare	Closing Stock
BUTANE			217		
ETHANE			78		
GAS FLARED					
GASOLINE			147		
OTHER			8		
PROPANE			252		

Description of Other: Methane

NOTES

1. Total Intake Volume MUST equal Total Residue Volume.	2. Details are REQUIRED for "Sold or Other Disposition" Volumes.	3. Details Total Volume MUST equal "Sold or Other Disposition" Volume.
---	--	--

OPERATOR COMMENTS

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____

Print Name: _____

Title: _____

Date: _____

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)