

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:

09/27/2019

Document Number:

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## Domestic Tap

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 ☐

**DOMESTIC TAP****DOMESTIC TAP ASSOCIATED WELL LOCATION IDENTIFICATION**

Location ID: 303392 Location Type: Well Site  
Name: JONES-61N44W Number: 18SESE  
County: YUMA  
Qtr Qtr: SESE Section: 18 Township: 1N Range: 44W Meridian: 6  
Latitude: 40.048480 Longitude: -102.324850

**DOMESTIC TAP FACILITY INFORMATION**

Flowline Facility ID: Flowline Facility Type: Domestic Action Type: Registration

**DOMESTIC TAP REGISTRATION**

Installation or Date of Discovery: 10/13/1987

**Flowline Start Point Riser**

Latitude: 40.048480 Longitude: -102.324850 PDOP: Measurement Date: 07/01/2019

Tap Source: Wellhead

**Street Address of Point of Delivery**

Address:

City: State: Zip:

Latitude: 40.052033 Longitude: -102.330242 PDOP: Measurement Date: 07/01/2019

**OPERATOR COMMENTS AND SUBMITTAL**

Comments

Domestic tap Jones 01-18 API 125-6923

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

Signed: \_\_\_\_\_ Date: 09/27/2019 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: \_\_\_\_\_

### **Attachment Check List**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
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Total Attach: 0 Files