

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: 10/01/2019 Document Number: 402194289

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: 20275 Contact Person: JIM WIEGER Company Name: CORAL PRODUCTION CORP Phone: (303) 623-3573 Address: 1600 STOUT ST STE 1500 Email: jimwieger@qwestoffice.net City: DENVER State: CO Zip: 80202 Is the Operator a Tier One member of the Utility Notification Center of Colorado (CO811) that participates in Colorado's One Call notification system? Yes [X] No []

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 316947 Location Type: Well Site Name: SCHWARTZ, DOROTHY-63S50W Number: 28SENE County: WASHINGTON Qtr Qtr: SENE Section: 28 Township: 3S Range: 50W Meridian: 6 Latitude: 39.766141 Longitude: -102.974650

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 473763 Flowline Type: Production Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.766382 Longitude: -102.974575 PDOP: 1.0 Measurement Date: 10/13/2019 Equipment at End Point Riser: Tank

Flowline Start Point Location Identification

Location ID: 317138 Location Type: Production Facilities No Location ID Name: MILLER-63S50W Number: 28NESE County: WASHINGTON Qtr Qtr: NESE Section: 28 Township: 3S Range: 50W Meridian: 6 Latitude: 39.762621 Longitude: -102.974640

Flowline Start Point Riser

Latitude: 39.764279 Longitude: -102.972712 PDOP: 1.0 Measurement Date: 09/12/2019 Equipment at Start Point Riser: Tank

Flowline Description and Testing

Type of Fluid Transferred: Produced Water Pipe Material: HDPE Max Outer Diameter:(Inches) 2.000
Bedding Material: _____ Date Construction Completed: 01/16/1989
Maximum Anticipated Operating Pressure (PSI): 0 Testing PSI: 0
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 473764 Flowline Type: Production Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.766382 Longitude: -102.974575 PDOP: 1.0 Measurement Date: 09/10/2019
Equipment at End Point Riser: Tank

Flowline Start Point Location Identification

Location ID: 317135 Location Type: Production Facilities No Location ID
Name: CHRISTIANSON B-63S50W Number: 27NENW
County: WASHINGTON
Qtr Qtr: NENW Section: 27 Township: 3S Range: 50W Meridian: 6
Latitude: 39.769880 Longitude: -102.965260

Flowline Start Point Riser

Latitude: 39.767984 Longitude -102.967274 PDOP: 1.0 Measurement Date: 09/10/2019
Equipment at Start Point Riser: Manifold

Flowline Description and Testing

Type of Fluid Transferred: Produced Water Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.000
Bedding Material: _____ Date Construction Completed: 01/16/1989
Maximum Anticipated Operating Pressure (PSI): 0 Testing PSI: 0
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: 10/01/2019 Email: jimwieger@qwestoffice.net
Print Name: JIM WIEGER Title: GEOLOGIST

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: 3/17/2020

Attachment Check List

Att Doc Num **Name**

402194289	Form44 Submitted
-----------	------------------

Total Attach: 1 Files