

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: 10/24/2019 Document Number: 402220621

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: 31257 Contact Person: Gene Fritzler Company Name: FRITZLER RESOURCES INC Phone: (970) 7680845 Address: P O BOX 114 Email: gfritzler12@gmail.com City: FORT MORGAN State: CO Zip: 80701 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: 319820 Location Type: Production Facilities Name: WAILES-Inlet Manifold Number: County: ADAMS Qtr Qtr: SWSE Section: 4 Township: 2S Range: 63W Meridian: 6 Latitude: 39.897789 Longitude: -104.438829

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.897789 Longitude: -104.438829 PDOP: Measurement Date: 06/10/2019 Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 320125 Location Type: Well Site No Location ID Name: WAILES-62S63W Number: 4SESW County: ADAMS Qtr Qtr: SESW Section: 4 Township: 2S Range: 63W Meridian: 6 Latitude: 39.899876 Longitude: -104.443974

Flowline Start Point Riser

Latitude: 39.899876 Longitude: -104.443974 PDOP: 2.0 Measurement Date: 06/10/2008 Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: \_\_\_\_\_ Pipe Material: HDPE Max Outer Diameter:(Inches) 2.000  
Bedding Material: \_\_\_\_\_ Date Construction Completed: 06/27/1982  
Maximum Anticipated Operating Pressure (PSI): 90 Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: \_\_\_\_\_ Flowline Type: Production Line Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 39.897789 Longitude: -104.438829 PDOP: \_\_\_\_\_ Measurement Date: 06/10/2019  
Equipment at End Point Riser: Manifold

**Flowline Start Point Location Identification**

Location ID: 320157 Location Type: \_\_\_\_\_ Well Site  No Location ID  
Name: WAILES-62S63W Number: 4NWSW  
County: ADAMS  
Qtr Qtr: NWSW Section: 4 Township: 2S Range: 63W Meridian: 6  
Latitude: 39.902341 Longitude: -104.448654

**Flowline Start Point Riser**

Latitude: 39.902341 Longitude -104.448654 PDOP: 1.9 Measurement Date: 06/10/2008  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Crude Oil Emulsion Pipe Material: HDPE Max Outer Diameter:(Inches) 2.000  
Bedding Material: Native Materials Date Construction Completed: 05/05/1983  
Maximum Anticipated Operating Pressure (PSI): 90 Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: \_\_\_\_\_ Flowline Type: Production Line Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 39.897789 Longitude: -104.438829 PDOP: \_\_\_\_\_ Measurement Date: 06/10/2019  
Equipment at End Point Riser: Manifold

**Flowline Start Point Location Identification**

Location ID: 319820 Location Type: \_\_\_\_\_ Well Site  No Location ID  
Name: CHRIS WAILES-62S63W Number: 4SESE  
County: ADAMS  
Qtr Qtr: SESE Section: 4 Township: 2S Range: 63W Meridian: 6  
Latitude: 39.899414 Longitude: -104.435107

**Flowline Start Point Riser**

Latitude: 39.899414 Longitude -104.435107 PDOP: 1.9 Measurement Date: 06/10/2008

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: 05/10/1975

Maximum Anticipated Operating Pressure (PSI): 90 Testing PSI: \_\_\_\_\_

Test Date: \_\_\_\_\_

**OPERATOR COMMENTS AND SUBMITTAL**

Comments We recieve email and phone notifications from locate

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

Signed: \_\_\_\_\_ Date: 10/24/2019 Email: gfritzler12@gmail.com

Print Name: Gene Fritzler Title: VP

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>
<u>402220896</u>	<u>AERIAL PHOTO</u>

Total Attach: 1 Files