

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:

10/16/2019

Document Number:

402202362

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: 34105 Contact Person: Kent Gilbert
Company Name: GILBERT-STEWART OPERATING LLC Phone: (303) 534-1686
Address: 1801 BROADWAY STE 200 Email: kgoil@msn.com
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 ☒ No ☐

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 475565 Location Type: Production Facilities
Name: YELTSIN-615S45W Number: 1SWSE
County: CHEYENNE
Qtr Qtr: SESE Section: 1 Township: 15S Range: 45W Meridian: 6
Latitude: 38.770553 Longitude: -102.390873

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 475573 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 38.769782 Longitude: -102.390796 PDOP: 3.3 Measurement Date: 06/22/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 321871 Location Type: Well Site ☐ No Location ID
Name: AKERS-615S45W Number: 1NESE
County: CHEYENNE
Qtr Qtr: NESE Section: 1 Township: 15S Range: 45W Meridian: 6
Latitude: 38.774417 Longitude: -102.390575

Flowline Start Point Riser

Latitude: 38.774508 Longitude: -102.390539 PDOP: 6.6 Measurement Date: 06/15/2017
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Crude Oil Emulsion Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.000
Bedding Material: Native Materials Date Construction Completed: 09/25/1991
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: 10/16/2019 Email: gmuniz@ltenv.com

Print Name: Gentry Muniz Title: Project Scientist

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: 4/21/2020

Attachment Check List**Att Doc Num****Name**

402202362

Form44 Submitted

402202391

OFF-LOCATION FLOWLINE GEODATABASE GDB

Total Attach: 2 Files