

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:

10/31/2019

Document Number:

402228060

## 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: 53255 Contact Person: Jordan Reid  
Company Name: MARALEX RESOURCES INC Phone: (970) 5634000  
Address: P O BOX 338 Email: maralextechjr@gmail.com  
City: IGNACIO State: CO Zip: 81137  
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 ☐

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

Location ID: 325477 Location Type: Well Site  
Name: MAGDALEN CLARE 33-7-2-N33N7W Number: 2SWNW  
County: LA PLATA  
Qtr Qtr: SWNW Section: 2 Township: 33N Range: 7W Meridian: N  
Latitude: 37.135999 Longitude: -107.582840

**DOMESTIC TAP FACILITY INFORMATION**

Flowline Facility ID: 475648 Flowline Facility Type: Domestic Action Type: Registration

**DOMESTIC TAP REGISTRATION**

Installation or Date of Discovery: 09/08/1997

**Flowline Start Point Riser**

Latitude: 37.135965 Longitude: -107.582619 PDOP: Measurement Date: 08/12/2019

Tap Source: Separator

**Street Address of Point of Delivery**

Address: 3780 County Road 334

City: Ignacio State: CO Zip: 81137

Latitude: Longitude: PDOP: Measurement 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: 10/31/2019 Email: maralextechjr@gmail.com

Print Name: Jordan Reid Title: Production Technician

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: 4/23/2020

**Attachment Check List**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
402228060	Form44 Submitted

Total Attach: 1 Files