

State of Colorado Oil and Gas Conservation Commission

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OGCC RECEPTION Receive Date: 11/20/2019 Document Number: 402222436

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: 46290 Contact Person: Mani Silva Company Name: KP KAUFFMAN COMPANY INC Phone: (303) 8254822 Address: 1675 BROADWAY, STE 2800 Email: regulatory@kpk.com City: DENVER State: CO Zip: 80202 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 [X] No []

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: Location Type: Production Facilities Name: Maul Number: 20-2 County: WELD Qtr Qtr: SENE Section: 20 Township: 1N Range: 65W Meridian: 6 Latitude: 40.040210 Longitude: -104.679320

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.040210 Longitude: -104.679320 PDOP: 2.7 Measurement Date: 05/31/2017 Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 323004 Location Type: Well Site [] No Location ID Name: MAUL-61N65W Number: 20SENE County: WELD Qtr Qtr: SENE Section: 20 Township: 1N Range: 65W Meridian: 6 Latitude: 40.039787 Longitude: -104.682029

Flowline Start Point Riser

Latitude: 40.039790 Longitude: -104.682030 PDOP: 2.7 Measurement Date: 05/31/2017 Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000
 Bedding Material: Native Materials Date Construction Completed: 06/27/1985
 Maximum Anticipated Operating Pressure (PSI): 560 Testing PSI: 700
 Test Date: 05/31/2017

OPERATOR COMMENTS AND SUBMITTAL

Comments The locations of the described flowlines are approximations based on employee's working knowledge of the oil and gas operations. Operator is able to provide an exact location upon request.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.
 Signed: _____ Date: 11/20/2019 Email: regulatory@kpk.com

Print Name: Mani Silva Title: Field Supervisor

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

Att Doc Num	Name
402222439	AERIAL PHOTO
402222440	OFF-LOCATION FLOWLINE GEODATABASE SHP

Total Attach: 2 Files