

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: 03/17/2020 Document Number: 402252866

Off-Location Flowline

The Flowline Report, Form 44, shall be submitted to register, report realignment, report removal from service, provide pre-abandonment notices, or report abandonment of Off-Location Flowlines, Flowline Systems, Produced Water Transfer Systems, or Crude Oil Transfer Lines or Systems as required by the 1100 Series Rules. The Form 44 shall also be submitted to register, report realignment, or report abandonment of Domestic Taps, and to report Grade 1 Gas Leaks from Flowlines per Rules 610

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 (CO811) that participates in Colorado's One Call notification system? Yes [X] No []

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 476325 Location Type: Production Facilities Name: Premium Turkey Farms Number: County: WELD Qtr Qtr: SWNE Section: 22 Township: 2N Range: 67W Meridian: 6 Latitude: 40.126470 Longitude: -104.873210

Description of Corrosion Protection Description of Integrity Management Program Description of the construction method used for public by-ways, road crossings, sensitive wildlife habitats, sensitive areas, and natural and manmade watercourses (i.e., open trench, bored and cased, or bored only), if applicable.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 476327 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 311310 Location Type: Well Site [] Name: PREMIUM TURKEY FARMS B-62N67W Number: 22NWNE County: WELD No Location ID Qtr Qtr: NWNE Section: 22 Township: 2N Range: 67W Meridian: 6

Latitude: 40.127991 Longitude: -104.874536

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.000
Bedding Material: Native Materials Date Construction Completed: 11/19/1976
Maximum Anticipated Operating Pressure (PSI): 16 Testing PSI: 20
Test Date: 05/23/2017

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 476328 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 317866 Location Type: Well Site
Name: PREMIUM TURKEY FARMS C-62N67W Number: 22SWNE
County: WELD No Location ID
Qtr Qtr: SWNE Section: 22 Township: 2N Range: 67W Meridian: 6
Latitude: 40.125610 Longitude: -104.875333

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.000
Bedding Material: Native Materials Date Construction Completed: 10/11/1973
Maximum Anticipated Operating Pressure (PSI): 16 Testing PSI: 20
Test Date: 05/23/2017

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 476329 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 318353 Location Type: Well Site
Name: PREMIUM TURKEY FARMS C-62N67W Number: 22SENE
County: WELD No Location ID
Qtr Qtr: SENE Section: 22 Township: 2N Range: 67W Meridian: 6
Latitude: 40.125475 Longitude: -104.869719

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.000
Bedding Material: Native Materials Date Construction Completed: 10/26/1976
Maximum Anticipated Operating Pressure (PSI): 16 Testing PSI: 20

Test Date: 05/23/2017

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. Exact locations cannot be obtained due to flowline material.

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

Signed: _____ Date: 03/17/2020 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: 5/13/2020

Attachment Check List

| <u>Att Doc Num</u> | <u>Name</u> |
|--------------------|---------------------------------------|
| 402252866 | Form44 Submitted |
| 402344962 | OFF-LOCATION FLOWLINE GEODATABASE SHP |

Total Attach: 2 Files