

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:

07/13/2020

Document Number:

402186535

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: 65110 Contact Person: Joseph Forma  
Company Name: O'BRIEN ENERGY RESOURCES CORP Phone: (603) 427-2099  
Address: 18 CONGRESS ST STE 207 Email: joeforma@obenergy.com  
City: PORTSMOUTH State: NH Zip: 03801  
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: 470691 Location Type: Well Site  
Name: LOST CREEK-63N62W Number: 20NWSW  
County: WELD  
Qtr Qtr: NESE Section: 19 Township: 3N Range: 62W Meridian: 6  
Latitude: 40.207672 Longitude: -104.356944

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 477195 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.207672 Longitude: -104.356889 PDOP: 2.7 Measurement Date: 10/09/2017  
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 330915 Location Type: Well Site  No Location ID  
Name: LOST CREEK O'BRIEN-63N62W Number: 20SWNW  
County: WELD  
Qtr Qtr: SWNW Section: 20 Township: 3N Range: 62W Meridian: 6  
Latitude: 40.213240 Longitude: -104.354930

Flowline Start Point Riser

Latitude: 40.213240 Longitude: -104.354930 PDOP: 2.7 Measurement Date: 10/09/2017  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Natural Gas Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.375  
Bedding Material: Native Materials Date Construction Completed: 05/01/2001  
Maximum Anticipated Operating Pressure (PSI): 0 Testing PSI: 150  
Test Date: 06/06/2017

**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: 07/13/2020 Email: joeforma@obenergy.com

Print Name: Joseph Forma Title: President

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: 7/13/2020

## Conditions of Approval

**COA Type**

**Description**

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### Attachment Check List

**Att Doc Num**

**Name**

402186535	Form44 Submitted
402186558	OFF-LOCATION FLOWLINE GEODATABASE KML
402186559	FLOWLINE LAYOUT DRAWING
402442152	OFF-LOCATION FLOWLINE GEODATABASE SHP

Total Attach: 4 Files

### General Comments

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)

