

State of Colorado Oil and Gas Conservation Commission

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OGCC RECEPTION Receive Date: 01/28/2020 Document Number: 402289160

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: Ralph A Number: 1 County: WELD Qtr Qtr: NWNE Section: 25 Township: 1N Range: 64W Meridian: 6 Latitude: 40.028930 Longitude: -104.498800

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.028930 Longitude: -104.498800 PDOP: 2.7 Measurement Date: 05/01/2019 Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 328354 Location Type: Well Site [] No Location ID Name: RALPH-61N64W Number: 25NWNE County: WELD Qtr Qtr: NWNE Section: 25 Township: 1N Range: 64W Meridian: 6 Latitude: 40.027730 Longitude: -104.496690

Flowline Start Point Riser

Latitude: 40.027740 Longitude: -104.496760 PDOP: 2.7 Measurement Date: 05/01/2019 Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 4.000
Bedding Material: Native Materials Date Construction Completed: 09/07/1992
Maximum Anticipated Operating Pressure (PSI): 240 Testing PSI: 300
Test Date: 12/10/2019

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.
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I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.
Signed: _____ Date: 01/28/2020 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: _____

Attachment Check List

Att Doc Num	Name
402289168	OFF-LOCATION FLOWLINE GEODATABASE SHP
402296751	PRESSURE TEST

Total Attach: 2 Files