

State of Colorado
Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:

07/09/2020

Document Number:

402259550

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 and

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 ☒ No ☐

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 317646 Location Type: Manifold
Name: AUGUST GITTLEIN-61N67W Number: 3NENW
County: WELD
Qtr Qtr: NENW Section: 3 Township: 1N Range: 67W Meridian: 6
Latitude: 40.085760 Longitude: -104.879410

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: 478791 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 318261 Location Type: Well Site ☐
Name: AUGUST GITTLIEN-61N67W Number: 3NWNW
County: WELD No Location ID
Qtr Qtr: NWNW Section: 3 Township: 1N Range: 67W Meridian: 6

Latitude: 40.085390 Longitude: -104.884630

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: 08/18/1976
Maximum Anticipated Operating Pressure (PSI): 14 Testing PSI: 16
Test Date: 05/12/2017

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 478792 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 317646 Location Type: Well Site ☐
Name: AUGUST GITTLEIN-61N67W Number: 3NENW
County: WELD No Location ID
Qtr Qtr: NENW Section: 3 Township: 1N Range: 67W Meridian: 6
Latitude: 40.085760 Longitude: -104.879410

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: 08/18/1972
Maximum Anticipated Operating Pressure (PSI): 14 Testing PSI: 16
Test Date: 10/04/2018

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: 07/09/2020 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: 12/9/2020

Conditions of Approval

COA Type

Description

Attachment Check List

Att Doc Num

Name

402259550	Form44 Submitted
402259567	PRESSURE TEST
402417088	OFF-LOCATION FLOWLINE GEODATABASE SHP

Total Attach: 3 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)

