

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:

07/25/2019

Document Number:

402120846

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: 76840 Contact Person: Kevin Bothwell
Company Name: SCHNEIDER ENERGY SERVICES INC Phone: (970) 867 9437
Address: P O BOX 889 Email: kbothwell@schneideroilandgas.com
City: FORT MORGAN State: CO Zip: 80701
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: 313962 Location Type: Production Facilities
Name: SMITH-63N59W Number: 5NWSE
County: MORGAN
Qtr Qtr: NWSE Section: 5 Township: 3N Range: 59W Meridian: 6
Latitude: 40.252790 Longitude: -104.006500

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 479050 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.250375 Longitude: -104.008897 PDOP: 2.8 Measurement Date: 04/30/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 313962 Location Type: Well Site No Location ID
Name: SMITH-63N59W Number: 5NWSE
County: MORGAN
Qtr Qtr: NWSE Section: 5 Township: 3N Range: 59W Meridian: 6
Latitude: 40.252790 Longitude: -104.006500

Flowline Start Point Riser

Latitude: 40.252852 Longitude: -104.006529 PDOP: 2.9 Measurement Date: 05/08/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Crude Oil Emulsion Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000

Bedding Material: Native Materials Date Construction Completed: 01/24/2009

Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____

Test Date: _____

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: 07/25/2019 Email: kbothwell@schneideroilandgas.com

Print Name: Kevin Bothwell Title: Employee

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: 1/8/2021

Conditions of Approval

COA Type

Description

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Attachment Check List

Att Doc Num

Name

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Total Attach: 0 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)

