

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:

10/27/2020

Document Number:

402472075

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: 444947 Location Type: Production Facilities
Name: North Quebec TB Number: _____
County: ADAMS
Qtr Qtr: NESE Section: 8 Township: 1S Range: 67W Meridian: 6
Latitude: 39.976330 Longitude: -104.903480

Description of Corrosion Protection

Carbon Steel pipelines are typically covered with a protective external coating, and are subject to rigorous fabrication, inspection, and quality control standards to reduce the occurrence of pipe and coating defects that can lead to external corrosion. While the likelihood of corrosion is minimal due to low operating pressures, KPK regularly inspects and pressure tests all lines to ensure corrosion is not occurring.

Description of Integrity Management Program

Production and upkeep of KPK's assets involves regular hands-on operation by KPK's field crews. These field crews not only maintain safe production, but also conduct routine inspections to confirm proper integrity of the production systems. While pipeline integrity issues are minimal due to pipeline materials and low operating pressure, KPK regularly inspects and pressure tests all lines to ensure pipeline integrity is maintained.

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.

Construction of pipelines is generally not occurring. When necessary to remedy a pipeline issue, KPK typically assesses all conditions to determine the proper construction method. A combination of boring and open trench are utilized by KPK.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 476099 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 319670 Location Type: Well Site ☐
Name: N QUEBEC-61S67W Number: 8NWSE
County: ADAMS No Location ID
Qtr Qtr: NWSE Section: 8 Township: 1S Range: 67W Meridian: 6
Latitude: 39.977319 Longitude: -104.910352
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 01/21/1976
Maximum Anticipated Operating Pressure (PSI): 60 Testing PSI: 60
Test Date: 09/15/2020

OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification

Date: _____

Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 476097 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 335735 Location Type: Well Site ☐
Name: TALON POINT Number: 15-8
County: ADAMS No Location ID
Qtr Qtr: SWSE Section: 8 Township: 1S Range: 67W Meridian: 6
Latitude: 39.974361 Longitude: -104.908833
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 03/10/2008
Maximum Anticipated Operating Pressure (PSI): 200 Testing PSI: 200
Test Date: 09/15/2020

OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification

Date: _____

Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 476098 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 320484 Location Type: _____ Well Site ☐

Name: NORTH QUEBEC-61S67W Number: 8NESE

County: ADAMS No Location ID

Qtr Qtr: NESE Section: 8 Township: 1S Range: 67W Meridian: 6

Latitude: 39.977869 Longitude: -104.905642

Equipment at Start Point Riser: Well

Flowline Description and Testing

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

Bedding Material: Native Materials Date Construction Completed: 10/02/2001

Maximum Anticipated Operating Pressure (PSI): 60 Testing PSI: 60

Test Date: 09/15/2020

OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification

Date: _____

Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:

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: 10/27/2020 Email: regulatory@kpk.com

Print Name: Jeremy Kauffman Title: Analyst

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: 1/13/2021

Conditions of Approval

COA Type

Description

Attachment Check List

Att Doc Num

Name

402472075	Form44 Submitted
402519712	PRESSURE TEST

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)

