

**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:

11/24/2020

Document Number:

402182730

**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: 95620 Contact Person: Steve James  
Company Name: WESTERN OPERATING COMPANY Phone: (303) 8932438  
Address: 1165 DELAWARE STREET #200 Email: steve@westernoperating.com  
City: DENVER State: CO Zip: 80204  
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: 474009 Location Type: Production Facilities  
Name: LINNEBUR TANK BATTERY Number: \_\_\_\_\_  
County: ADAMS  
Qtr Qtr: NENE Section: 1 Township: 3S Range: 61W Meridian: 6  
Latitude: 39.826403 Longitude: -104.151668

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 479448 Flowline Type: Wellhead Line Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 39.826403 Longitude: -104.151668 PDOP: \_\_\_\_\_ Measurement Date: 09/06/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 320469 Location Type: Well Site ☐ No Location ID  
Name: LINNEBUR-63S60W Number: 6NWSW  
County: ADAMS  
Qtr Qtr: NWSW Section: 6 Township: 3S Range: 60W Meridian: 6  
Latitude: 39.818724 Longitude: -104.148997

**Flowline Start Point Riser**

Latitude: 39.818692 Longitude: -104.149076 PDOP: \_\_\_\_\_ Measurement Date: 09/06/2019  
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) 2.000Bedding Material: Native Materials Date Construction Completed: 11/03/1999

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: 11/24/2020 Email: elang@ltenv.comPrint Name: Eric Lang Title: Project Geologist

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: 2/22/2021

## Conditions of Approval

**COA Type**

**Description**

## Attachment Check List

**Att Doc Num**

**Name**

402182730	Form 44 Approved-O
402539390	OFF-LOCATION FLOWLINE GEODATABASE SHP
402606740	OFF-LOCATION FLOWLINE GIS SHP
402606837	Form44 Submitted

Total Attach: 4 Files

## General Comments

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)