

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:

11/20/2020

Document Number:

402469401

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 906.

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: 446479 Location Type: Production Facilities
Name: JACK BERGER A Number: _____
County: WELD
Qtr Qtr: NWSW Section: 35 Township: 2N Range: 67W Meridian: 6
Latitude: 40.091800 Longitude: -104.862800

Description of Corrosion Protection

Fiberglass pipelines are resistant to most acids, bases, oxidizing agents, metal salts, reducing gases and sulfur gases. These pipelines have been utilized by KPK because of their corrosion resistance. As such, additional corrosion protection is not needed for these pipelines.

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: 458972 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 311459 Location Type: Well Site ☐
Name: BAJA-62N67W Number: 35SESW
County: WELD No Location ID
Qtr Qtr: SESW Section: 35 Township: 2N Range: 67W Meridian: 6
Latitude: 40.089840 Longitude: -104.860020
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: 11/23/2007
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

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

Date: 09/25/2018

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

The Baja 14-35 P&A is complete. The well head was cut and capped on 9/12/2018. The entire flow line was removed on 9/25/2018. The entire tank battery was removed on 9/25/2018.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 475843 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 317759 Location Type: Well Site ☐
Name: JACK BERGER A-62N67W Number: 35NESW
County: WELD No Location ID
Qtr Qtr: NESW Section: 35 Township: 2N Range: 67W Meridian: 6
Latitude: 40.092907 Longitude: -104.861661
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: 06/24/1973
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

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: 475842 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 311312 Location Type: _____ Well Site ☐
Name: JACK BERGER A-62N67W Number: 35SESW
County: WELD No Location ID
Qtr Qtr: SESW Section: 35 Township: 2N Range: 67W Meridian: 6
Latitude: 40.089854 Longitude: -104.860573

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: 12/15/1976
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

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: 475845 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 317740 Location Type: _____ Well Site ☐
Name: JACK BERGER A-62N67W Number: 35SWSW
County: WELD No Location ID
Qtr Qtr: SWSW Section: 35 Township: 2N Range: 67W Meridian: 6
Latitude: 40.089162 Longitude: -104.865485

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: 05/24/1973
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

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: 475844 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 318331 Location Type: _____ Well Site ☐
Name: JACK BERGER A-62N67W Number: 35NWSW
County: WELD No Location ID
Qtr Qtr: NWSW Section: 35 Township: 2N Range: 67W Meridian: 6
Latitude: 40.092545 Longitude: -104.865001

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: 10/07/1976
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

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: 11/20/2020 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: 1/27/2021

Conditions of Approval

COA Type

Description

Attachment Check List

Att Doc Num

Name

402469401	Form 44 Approved-O
402584622	Form44 Submitted

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)