

**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:

12/14/2020

Document Number:

402553158

**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: Jeff Rickard  
Company Name: KP KAUFFMAN COMPANY INC Phone: (303) 825-4822  
Address: 1675 BROADWAY, STE 2800 Email: jrickard@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: 318400 Location Type: Production Facilities  
Name: UPRR 43 PAN AM B-61N68W Number: 3NWNW  
County: WELD  
Qtr Qtr: NWNW Section: 3 Township: 1N Range: 68W Meridian: 6  
Latitude: 40.085367 Longitude: -104.996696

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: 475437 Flowline Type: Wellhead Line Action Type:

**OFF LOCATION FLOWLINE REGISTRATION**

Equipment at End Point Riser: Manifold

**Flowline Start Point Location Identification**

Location ID: 318639 Location Type: Well Site ☐  
Name: UPRR 43 PAN AM B-61N68W Number: 3NENW  
County: WELD No Location ID  
Qtr Qtr: NENW Section: 3 Township: 1N Range: 68W Meridian: 6

Latitude: 40.085322 Longitude: -104.991788

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: 07/01/2017  
Maximum Anticipated Operating Pressure (PSI): 10 Testing PSI: 12  
Test Date: 05/04/2017

**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: 475436 Flowline Type: Wellhead Line Action Type: \_\_\_\_\_

**OFF LOCATION FLOWLINE REGISTRATION**

Equipment at End Point Riser: Manifold

**Flowline Start Point Location Identification**

Location ID: 318345 Location Type: Well Site ☐  
Name: UPRR 43 PAN AM B-61N68W Number: 3NWSW  
County: WELD No Location ID  
Qtr Qtr: NWSW Section: 3 Township: 1N Range: 68W Meridian: 6  
Latitude: 40.078515 Longitude: -104.996092

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: 10/10/1976  
Maximum Anticipated Operating Pressure (PSI): 10 Testing PSI: 12  
Test Date: 05/04/2017

**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: 475439 Flowline Type: Wellhead Line Action Type: \_\_\_\_\_

**OFF LOCATION FLOWLINE REGISTRATION**

Equipment at End Point Riser: Manifold

**Flowline Start Point Location Identification**

Location ID: 318400 Location Type: Well Site ☐ ☒  
Name: UPRR 43 PAN AM B-61N68W Number: 3NWNW  
County: WELD No Location ID  
Qtr Qtr: NWNW Section: 3 Township: 1N Range: 68W Meridian: 6  
Latitude: 40.085367 Longitude: -104.996696  
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: 12/06/1976  
Maximum Anticipated Operating Pressure (PSI): 10 Testing PSI: 12  
Test Date: 05/04/2017

**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: 475438 Flowline Type: Wellhead Line Action Type: Out of Service

**OFF LOCATION FLOWLINE REGISTRATION**

Equipment at End Point Riser: Manifold

**Flowline Start Point Location Identification**

Location ID: 318429 Location Type: Well Site ☐ ☒  
Name: UPRR 43 PAN AM B-61N68W Number: 3SENW  
County: WELD No Location ID  
Qtr Qtr: SENW Section: 3 Township: 1N Range: 68W Meridian: 6  
Latitude: 40.082039 Longitude: -104.992565  
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: 02/20/1977  
Maximum Anticipated Operating Pressure (PSI): 10 Testing PSI: 12  
Test Date: 05/04/2017

**OFF LOCATION FLOWLINE Out of Service**Date: 12/11/2020☒ Entire Line Removal☐ Partial Line  
Removal**Description of Out of Service:**

Flowline has been OSSLAT'd and passed its most recent annual pressure test.

**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: 12/14/2020 Email: jrickard@kpk.comPrint Name: Jeff Rickard Title: Regulatory

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: 2/5/2021

## Conditions of Approval

**COA Type**

**Description**

## Attachment Check List

**Att Doc Num**

**Name**

402553158	Form 44 Approved-O
402592982	Form44 Submitted

Total Attach: 2 Files

## General Comments

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)