

**State of Colorado
Oil and Gas Conservation Commission**

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OGCC RECEPTION

Receive Date:

11/25/2020

Document Number:

402540837

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: 10536 Contact Person: chris smith
Company Name: SMITH ENERGY LLC Phone: (303) 7096157
Address: 1540 MAIN ST SUITE 218 #334 Email: smithenergy@live.com
City: WINDSOR State: CO Zip: 80550
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: 317269 Location Type: Production Facilities
Name: MATHIES-62S50W Number: 13SWSW
County: WASHINGTON
Qtr Qtr: SWSW Section: 13 Township: 2S Range: 50W Meridian: 6
Latitude: 39.875191 Longitude: -102.932418

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: 473958 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 317269 Location Type: Well Site ☐
Name: MATHIES-62S50W Number: 13SWSW
County: WASHINGTON No Location ID
Qtr Qtr: SWSW Section: 13 Township: 2S Range: 50W Meridian: 6

Latitude: 39.875191 Longitude: -102.932418

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Pipe Material: Max Outer Diameter:(Inches)

Bedding Material: Date Construction Completed: 04/18/1985

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: 11/25/2020 Email: smithenergy@live.com

Print Name: chris smith Title: manager

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:

Conditions of Approval

COA Type

Description

Attachment Check List

Att Doc Num

Name

402540841

OFF-LOCATION FLOWLINE GEODATABASE SHP

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)

