

State of Colorado Oil and Gas Conservation Commission

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OGCC RECEPTION Receive Date: 03/02/2021 Document Number: 402540530

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: 95520 Contact Person: Scott Kerr Company Name: WESCO OPERATING INC Phone: (307) 577-5336 Address: 120 S DURBIN STREET Email: scottk@kirkwoodcompanies.com City: CASPER State: WY Zip: 82602 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 [X] No []

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 428531 Location Type: Production Facilities Name: Maudlin Gulch Tank Battery Number: County: MOFFAT Qtr Qtr: NWSW Section: 26 Township: 4N Range: 95W Meridian: 6 Latitude: 40.286188 Longitude: -108.025465

Description of Corrosion Protection

See attached

Description of Integrity Management Program

See attached

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: Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 222700 Location Type: Well Site [] Name: GOV'T-STROOCK-NCT-1 Number: 1 County: MOFFAT No Location ID Qtr Qtr: SENE Section: 35 Township: 4N Range: 95W Meridian: 6

Latitude: 40.273740 Longitude: -108.011750

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberspar Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 05/01/2012
Maximum Anticipated Operating Pressure (PSI): 240 Testing PSI: 430
Test Date: 09/26/2019

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 223191 Location Type: Well Site
Name: MAUDLIN GULCH Number: 26
County: MOFFAT No Location ID
Qtr Qtr: NENW Section: 35 Township: 4N Range: 95W Meridian: 6
Latitude: 40.279420 Longitude: -108.021200

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberspar Max Outer Diameter:(Inches) 3.500
Bedding Material: Native Materials Date Construction Completed: 10/01/2012
Maximum Anticipated Operating Pressure (PSI): 70 Testing PSI: 450
Test Date: 10/04/2019

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 223184 Location Type: Well Site
Name: MAUDLIN GULCH UNIT Number: 24
County: MOFFAT No Location ID
Qtr Qtr: NWSE Section: 35 Township: 4N Range: 95W Meridian: 6
Latitude: 40.272160 Longitude: -108.016050

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberspar Max Outer Diameter:(Inches) 3.500
Bedding Material: Native Materials Date Construction Completed: 08/01/2012
Maximum Anticipated Operating Pressure (PSI): 150 Testing PSI: 300

Test Date: 05/06/2014

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Well

Flowline Start Point Location Identification

Location ID: 150085 Location Type: Production Facilities
Name: MAUDLIN GULCH 12 Number: _____
County: MOFFAT No Location ID
Qtr Qtr: SWNW Section: 27 Township: 4N Range: 95W Meridian: 6
Latitude: 40.288658 Longitude: -108.044792

Equipment at Start Point Riser: Tank

Flowline Description and Testing

Type of Fluid Transferred: Produced Water Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 3.000
Bedding Material: Native Materials Date Construction Completed: 11/01/2011
Maximum Anticipated Operating Pressure (PSI): 480 Testing PSI: 635
Test Date: 09/23/2019

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 312871 Location Type: Well Site
Name: MAUDLIN GULCH-64N95W Number: 35SWNE
County: MOFFAT No Location ID
Qtr Qtr: SWNE Section: 35 Township: 4N Range: 95W Meridian: 6
Latitude: 40.274748 Longitude: -108.015271

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberspar Max Outer Diameter:(Inches) 3.500
Bedding Material: Native Materials Date Construction Completed: 10/01/2012
Maximum Anticipated Operating Pressure (PSI): 140 Testing PSI: 455
Test Date: 09/26/2019

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 222575 Location Type: Well Site
Name: MAUDLIN GULCH UNIT Number: 4
County: MOFFAT No Location ID
Qtr Qtr: SWNE Section: 27 Township: 4N Range: 95W Meridian: 6
Latitude: 40.289100 Longitude: -108.037210

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 3.000
Bedding Material: Native Materials Date Construction Completed: 01/01/1990
Maximum Anticipated Operating Pressure (PSI): 150 Testing PSI: 300
Test Date: 10/07/2019

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: _____ Flowline Type: Manifold Piping Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: _____ Location Type: Manifold
Name: Header Number: 4
County: MOFFAT No Location ID
Qtr Qtr: SENE Section: 35 Township: 4N Range: 95W Meridian: 6
Latitude: 40.273868 Longitude: -108.011500

Equipment at Start Point Riser: Manifold

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberspar Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 06/01/2014
Maximum Anticipated Operating Pressure (PSI): 240 Testing PSI: 430
Test Date: 09/26/2019

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 312882 Location Type: Well Site
Name: GOV'T-STROOCK-NCT-1-64N95W Number: 35NESE
County: MOFFAT No Location ID
Qtr Qtr: NESE Section: 35 Township: 4N Range: 95W Meridian: 6
Latitude: 40.270218 Longitude: -108.011941

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberspar Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 05/01/2012
Maximum Anticipated Operating Pressure (PSI): 340 Testing PSI: 470
Test Date: 09/25/2019

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 222755 Location Type: Well Site
Name: Maudlin Gulch Unit 22R Number: M-22R
County: MOFFAT No Location ID
Qtr Qtr: NESE Section: 21 Township: 4N Range: 95W Meridian: 6
Latitude: 40.299700 Longitude: -108.047208

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberspar Max Outer Diameter:(Inches) 3.000
Bedding Material: Native Materials Date Construction Completed: 08/01/2019
Maximum Anticipated Operating Pressure (PSI): 140 Testing PSI: 280
Test Date: 09/16/2019

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 222662 Location Type: Well Site
Name: MAUDLIN GULCH Number: 15
County: MOFFAT No Location ID
Qtr Qtr: NWNE Section: 35 Township: 4N Range: 95W Meridian: 6
Latitude: 40.276520 Longitude: -108.018460

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberspar Max Outer Diameter:(Inches) 3.000
Bedding Material: Native Materials Date Construction Completed: 05/01/2012
Maximum Anticipated Operating Pressure (PSI): 50 Testing PSI: 450
Test Date: 10/03/2019

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: _____ Flowline Type: Manifold Piping Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 312873 Location Type: Manifold
Name: MAUDLIN GULCH UNIT-64N95W Number: 22SWSW
County: MOFFAT No Location ID
Qtr Qtr: SWSW Section: 22 Township: 4N Range: 95W Meridian: 6
Latitude: 40.295718 Longitude: -108.046202

Equipment at Start Point Riser: Manifold

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberspar Max Outer Diameter:(Inches) 3.500
Bedding Material: Native Materials Date Construction Completed: 06/01/2014
Maximum Anticipated Operating Pressure (PSI): 140 Testing PSI: 280
Test Date: 09/16/2019

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: _____ Flowline Type: Manifold Piping Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 479314 Location Type: Manifold
Name: Header Number: 2
County: MOFFAT No Location ID
Qtr Qtr: NWNW Section: 35 Township: 4N Range: 95W Meridian: 6
Latitude: 40.279690 Longitude: -108.025362

Equipment at Start Point Riser: Manifold

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberspar Max Outer Diameter:(Inches) 4.000
Bedding Material: Native Materials Date Construction Completed: 06/01/2014
Maximum Anticipated Operating Pressure (PSI): 50 Testing PSI: 450
Test Date: 10/03/2019

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

222685 Location Type: Well Site

Location ID:

Name: MAUDLIN GULCH UNIT Number: 18

County: MOFFAT No Location ID

Qtr Qtr: SWSW Section: 22 Township: 4N Range: 95W Meridian: 6

Latitude: 40.295990 Longitude: -108.046050

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberspar Max Outer Diameter:(Inches) 3.000

Bedding Material: Native Materials Date Construction Completed: 08/01/2019

Maximum Anticipated Operating Pressure (PSI): 140 Testing PSI: 280

Test Date: 09/16/2019

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 223209 Location Type: Well Site

Name: MAUDLIN GULCH UNIT Number: 27

County: MOFFAT No Location ID

Qtr Qtr: NESE Section: 27 Township: 4N Range: 95W Meridian: 6

Latitude: 40.284070 Longitude: -108.029800

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 3.000

Bedding Material: Native Materials Date Construction Completed: 01/01/1990

Maximum Anticipated Operating Pressure (PSI): 60 Testing PSI: 240

Test Date: 10/04/2019

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: Flowline Type: Manifold Piping Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: Location Type: Manifold

Name: Header Number: 3

County: MOFFAT No Location ID

Qtr Qtr: NWNE Section: 35 Township: 4N Range: 95W Meridian: 6

Latitude: 40.276766 Longitude: -108.017781

Equipment at Start Point Riser: Manifold

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberspar Max Outer Diameter:(Inches) 3.500
Bedding Material: Native Materials Date Construction Completed: 06/01/2014
Maximum Anticipated Operating Pressure (PSI): 50 Testing PSI: 450
Test Date: 10/03/2019

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Well

Flowline Start Point Location Identification

Location ID: 332715 Location Type: Production Facilities
Name: MAUDLIN GULCH UNIT-64N95W Number: 27NESE
County: MOFFAT No Location ID
Qtr Qtr: NESE Section: 27 Township: 4N Range: 95W Meridian: 6
Latitude: 40.283988 Longitude: -108.029782

Equipment at Start Point Riser: Tank

Flowline Description and Testing

Type of Fluid Transferred: Produced Water Pipe Material: Fiberspar Max Outer Diameter:(Inches) 4.000
Bedding Material: Native Materials Date Construction Completed: 08/01/2019
Maximum Anticipated Operating Pressure (PSI): 480 Testing PSI: 690
Test Date: 09/24/2019

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Conditions of Approval

COA Type

Description

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Attachment Check List

Att Doc Num

Name

402541864	CORROSION PROTECTION DESCRIPTION
402541866	OFF-LOCATION FLOWLINE GEODATABASE SHP

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)

