

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:

10/16/2019

Document Number:

402201023

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: 79905 Contact Person: Vicki Shelley
Company Name: SMITH OIL PROPERTIES INC Phone: (303) 825-7405
Address: PO BOX 219 Email: smithoilprop@aol.com
City: BYERS State: CO Zip: 80103
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: 317994 Location Type: Production Facilities
Name: ANDREWS(LANYARD WATERFLOOD)-62N62W Number: 18NESW
County: WELD
Qtr Qtr: NESW Section: 18 Township: 2N Range: 62W Meridian: 6
Latitude: 40.136560 Longitude: -104.369060

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 480311 Flowline Type: Dump Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.136560 Longitude: -104.369069 PDOP: Measurement Date: 09/23/2019
Equipment at End Point Riser: Well

Flowline Start Point Location Identification

Location ID: 477374 Location Type: Well Site ☐ No Location ID
Name: Preston Number: 42-18
County: WELD
Qtr Qtr: NWNE Section: 18 Township: 2N Range: 62W Meridian: 6
Latitude: 40.145577 Longitude: -104.363523

Flowline Start Point Riser

Latitude: 40.145577 Longitude: -104.363523 PDOP: Measurement Date: 09/23/2019
Equipment at Start Point Riser: Separator

Flowline Description and Testing

Type of Fluid Transferred: Produced Water Pipe Material: Poly Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 10/02/1974
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: 10/16/2019 Email: smithoilprop@aol.com

Print Name: Vicki Shelley Title: President

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: 7/26/2021

Conditions of Approval

COA Type

Description

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Attachment Check List

Att Doc Num

Name

402201023	Form44 Submitted
402759856	OFF-LOCATION FLOWLINE GIS SHP

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

GIS	Removed and reattached the GIS file to upload to COGCC database	07/26/2021
Engineer	Changed start location id to #477374 due to start riser lat/longs being closest to this location.	07/26/2021

Total: 2 comment(s)