

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: 11/29/2020 Document Number: 402541433

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: 31257 Contact Person: Gene Fritzier Company Name: FRITZLER RESOURCES INC Phone: (970) 7680845 Address: P O BOX 114 Email: gfritzler12@gmail.com City: FORT MORGAN State: CO Zip: 80701 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: 475073 Location Type: Production Facilities Name: WAILES-Inlet Manifold Number: Wailes County: ADAMS Qtr: SWSE Section: 4 Township: 2S Range: 63W Meridian: 6 Latitude: 39.897789 Longitude: -104.438829

Description of Corrosion Protection

Lines are 2 in HDPE, Risers are taped

Description of Integrity Management Program

Pressure will be monitored annually, Wellhead and separator pressures are monitored regularly

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.

NA

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 475081 Flowline Type: Production Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 320157 Location Type: Well Site [ ] Name: WAILES-62S63W Number: 4NWSW County: ADAMS No Location ID Qtr: NWSW Section: 4 Township: 2S Range: 63W Meridian: 6

Latitude: 39.902341 Longitude: -104.448654

Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Crude Oil Emulsion Pipe Material: HDPE Max Outer Diameter:(Inches) 2.000

Bedding Material: Native Materials Date Construction Completed: 05/05/1983

Maximum Anticipated Operating Pressure (PSI): 90 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: 475080 Flowline Type: Production Line Action Type:                     

**OFF LOCATION FLOWLINE REGISTRATION**

Equipment at End Point Riser: Manifold

**Flowline Start Point Location Identification**

Location ID: 320125 Location Type: Well Site

Name: WAILES-62S63W Number: 4SESW

County: ADAMS No Location ID

Qtr Qtr: SESW Section: 4 Township: 2S Range: 63W Meridian: 6

Latitude: 39.899876 Longitude: -104.443974

Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred:                      Pipe Material: HDPE Max Outer Diameter:(Inches) 2.000

Bedding Material:                      Date Construction Completed: 06/27/1982

Maximum Anticipated Operating Pressure (PSI): 90 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: 475082 Flowline Type: Production Line Action Type:                     

**OFF LOCATION FLOWLINE REGISTRATION**

Equipment at End Point Riser: Manifold

**Flowline Start Point Location Identification**

Location ID: 319820 Location Type: \_\_\_\_\_ Well Site   
Name: CHRIS WAILES-62S63W Number: 4SESE  
County: ADAMS No Location ID  
Qtr Qtr: SESE Section: 4 Township: 2S Range: 63W Meridian: 6  
Latitude: 39.899414 Longitude: -104.435107

Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Natural Gas Pipe Material: HDPE Max Outer Diameter:(Inches) 2.000  
Bedding Material: \_\_\_\_\_ Date Construction Completed: 05/10/1975  
Maximum Anticipated Operating Pressure (PSI): 90 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 All lines are 2 in. HDPE and contain oil/gas/water

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

Signed: \_\_\_\_\_ Date: 11/29/2020 Email: gfritzler12@gmail.com

Print Name: Gene Fritzler Title: VP

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**

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### Attachment Check List

**Att Doc Num**

**Name**

402541434	OFF-LOCATION FLOWLINE GEODATABASE KML
402541435	OFF-LOCATION FLOWLINE GEODATABASE KML
402541436	OFF-LOCATION FLOWLINE GEODATABASE KML

Total Attach: 3 Files

### General Comments

**User Group**

**Comment**

**Comment Date**

<b>User Group</b>	<b>Comment</b>	<b>Comment Date</b>
		Stamp Upon Approval

Total: 0 comment(s)

