

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: 10/28/2019 Document Number: 402223253

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: 17180 Contact Person: Lee Ann Elsom Company Name: CITATION OIL & GAS CORP Phone: (281) 891-1577 Address: 14077 CUTTEN RD Email: lelsom@cogc.com City: HOUSTON State: TX Zip: 77269 Is the Operator a Tier One member of the Utility Notification Center of Colorado (UNCC) that participates in Colorado's One Call notification system? Yes [X] No []

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: Location Type: Production Facilities Name: Arapahoe Unit Tank Battery Number: Sec. 28 County: CHEYENNE Qtr Qtr: L1 Section: 28 Township: 14S Range: 42W Meridian: 6 Latitude: 38.812989 Longitude: -102.113057

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 38.812989 Longitude: -102.113057 PDOP: Measurement Date: 10/28/2019 Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 207744 Location Type: Well Site [] No Location ID Name: ARAPAHOE UNIT Number: 150 (41-28) County: CHEYENNE Qtr Qtr: NENE Section: 28 Township: 14S Range: 42W Meridian: 6 Latitude: 38.811505 Longitude: -102.111605

Flowline Start Point Riser

Latitude: 38.811505 Longitude: -102.111605 PDOP: Measurement Date: 10/28/2019 Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Crude Oil Emulsion Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.500
Bedding Material: Native Materials Date Construction Completed: 10/20/1987
Maximum Anticipated Operating Pressure (PSI): 100 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: 10/28/2019 Email: HKennedy@cogc.com

Print Name: Hershel Kennedy Title: Senior Production Foreman

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: _____

Attachment Check List

Att Doc Num	Name
402223275	OFF-LOCATION FLOWLINE GEODATABASE SHP

Total Attach: 1 Files