

State of Colorado Oil and Gas Conservation Commission

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OGCC RECEPTION Receive Date: 10/31/2019 Document Number: 402218026

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: 53790 Contact Person: Mark Brown Company Name: MARKUS PRODUCTION, INC Phone: (720) 350-8858 Address: 39 FAIRWAY LANE Email: mark@markusproduction.com City: LITTLETON State: CO Zip: 80123 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: 406542 Location Type: Production Facilities Name: LIVENGOOD-67N59W Number: 7SEW County: WELD Qtr Qtr: SENW Section: 7 Township: 7N Range: 59W Meridian: 6 Latitude: 40.591646 Longitude: -104.024020

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.591542 Longitude: -104.023588 PDOP: 5.9 Measurement Date: 10/31/2019 Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 327473 Location Type: Well Site [ ] No Location ID Name: LIVENGOOD-67N59W Number: 7SWNE County: WELD Qtr Qtr: SWNE Section: 7 Township: 7N Range: 59W Meridian: 6 Latitude: 40.591516 Longitude: -104.018930

Flowline Start Point Riser

Latitude: 40.591672 Longitude: -104.018969 PDOP: 2.8 Measurement Date: 10/30/2019 Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000  
Bedding Material: Native Materials Date Construction Completed: 10/01/1990  
Maximum Anticipated Operating Pressure (PSI): 150 Testing PSI: 158  
Test Date: 10/30/2019

**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: 10/31/2019 Email: mark@markusproduction.com

Print Name: Mark Brown 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: \_\_\_\_\_

**Attachment Check List**

<b>Att Doc Num</b>	<b>Name</b>
402228521	PRESSURE TEST
402228535	FLOWLINE LAYOUT DRAWING

Total Attach: 2 Files