

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:

02/17/2022

Document Number:

402297448

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: 39560 Contact Person: Paul Herring
Company Name: TOP OPERATING COMPANY Phone: (303) 727-9915
Address: 3609 S WADSWORTH BLVD STE 340 Email: paul.herring@topoperating.com
City: LAKEWOOD State: CO Zip: 80235
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: 318924 Location Type: Production Facilities
Name: COUNTER-62N66W Number: 30NWNW
County: WELD
Qtr Qtr: NWNW Section: 30 Township: 2N Range: 66W Meridian: 6
Latitude: 40.113737 Longitude: -104.826591

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 482507 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.116141 Longitude: -104.828210 PDOP: 5.0 Measurement Date: 11/11/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 311313 Location Type: Well Site No Location ID
Name: DI-TA (JOHN DITIRRO)-62N66W Number: 30SENV
County: WELD
Qtr Qtr: SENW Section: 30 Township: 2N Range: 66W Meridian: 6
Latitude: 40.111000 Longitude: -104.824530

Flowline Start Point Riser

Latitude: 40.111063 Longitude: -104.824508 PDOP: 3.5 Measurement Date: 11/06/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Condensate Pipe Material: Fiberspar Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 06/27/2007
Maximum Anticipated Operating Pressure (PSI): 350 Testing PSI: 350
Test Date: 11/03/2019

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 482508 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.116141 Longitude: -104.828210 PDOP: 5.0 Measurement Date: 11/06/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 318924 Location Type: Well Site No Location ID
Name: COUNTER-62N66W Number: 30NWNW
County: WELD
Qtr Qtr: NWNW Section: 30 Township: 2N Range: 66W Meridian: 6
Latitude: 40.113737 Longitude: -104.826591

Flowline Start Point Riser

Latitude: 40.113578 Longitude -104.826412 PDOP: 3.2 Measurement Date: 11/11/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Condensate Pipe Material: Fiberspar Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 08/09/1981
Maximum Anticipated Operating Pressure (PSI): 275 Testing PSI: 282
Test Date: 11/02/2019

OPERATOR COMMENTS AND SUBMITTAL

Comments The Counter 1AD well and Di Ta 1A well produces to the same Tank Battery.

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

Signed: _____ Date: 02/17/2022 Email: jeff.freitas@topoperating.com

Print Name: Jeffrey Freitas Title: Supervisor

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: 7/11/2022

Conditions of Approval

COA Type

Description

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Attachment Check List

Att Doc Num

Name

402297448	Form44 Submitted
402297638	PRESSURE TEST
402956904	OFF-LOCATION FLOWLINE GIS SHP
402956907	OFF-LOCATION FLOWLINE GIS SHP

Total Attach: 4 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)