

State of Colorado Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION Receive Date: 07/06/2023 Document Number: 403455022

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: 70385 Contact Person: Deborah Abrams Company Name: SMITH ENERGY CORP Phone: (303) 8942100 Address: 12706 SHILOH RD Email: deborah.abrams@state.co.us City: GREELEY State: CO Zip: 80631 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: 475600 Location Type: Production Facilities Name: STATE-63N62W Number: 34SWSE County: WELD Qtr Qtr: NESW Section: 34 Township: 3N Range: 62W Meridian: 6 Latitude: 40.181089 Longitude: -104.310184

Description of Corrosion Protection

Description of Integrity Management Program

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.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 475603 Flowline Type: Production Line Action Type: Abandonment Verification

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 318957 Location Type: Well Site [] Name: STATE-63N62W Number: 34SWSE

County: WELD

No Location ID

Qtr Qtr: SWSE Section: 34 Township: 3N Range: 62W Meridian: 6

Latitude: 40.176859 Longitude: -104.307255

Equipment at Start Point Riser: Well

Flowline Description and Testing

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

Bedding Material: _____ Date Construction Completed: 12/01/1981

Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____

Test Date: _____

OFF LOCATION FLOWLINE Abandonment Verification

Date: 04/28/2023

Abandonment Verification

The abandoned Off-Location Flowline was located within the jurisdiction(s) of the following local government(s).

(No Jurisdiction)

Description of Abandonment Verification:

The tank battery was decommissioned and flowlines removed.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 475602 Flowline Type: Production Line Action Type: Abandonment Verification

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 318957 Location Type: _____ Well Site

Name: STATE-63N62W Number: 34SWSE

County: WELD No Location ID

Qtr Qtr: SWSE Section: 34 Township: 3N Range: 62W Meridian: 6

Latitude: 40.176859 Longitude: -104.307255

Equipment at Start Point Riser: Well

Flowline Description and Testing

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

Bedding Material: _____ Date Construction Completed: 12/01/1981

Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____

Test Date: _____

OFF LOCATION FLOWLINE Abandonment Verification

Date: 04/28/2023

Abandonment Verification

The abandoned Off-Location Flowline was located within the jurisdiction(s) of the following local government(s).
(No Jurisdiction)

Description of Abandonment Verification:

The tank battery was decommissioned and flowlines removed.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 475604 Flowline Type: Production Line Action Type: Abandonment Verification

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 317491 Location Type: Well Site
Name: STATE-63N62W Number: 34SESW
County: WELD No Location ID
Qtr Qtr: SESW Section: 34 Township: 3N Range: 62W Meridian: 6
Latitude: 40.176529 Longitude: -104.312165

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: _____ Pipe Material: _____ Max Outer Diameter:(Inches) _____
Bedding Material: _____ Date Construction Completed: 12/01/1981
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE Abandonment Verification

Date: 04/28/2023

Abandonment Verification

The abandoned Off-Location Flowline was located within the jurisdiction(s) of the following local government(s).
(No Jurisdiction)

Description of Abandonment Verification:

The tank battery was decommissioned and flowlines removed.

OPERATOR COMMENTS AND SUBMITTAL

Comments

[Empty text box for operator comments]

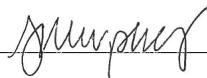
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

Signed: _____ Date: 07/06/2023 Email: deborah.abrams@state.co.us

Print Name: Deborah Abrams Title: OWP

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: 8/25/2023

Conditions of Approval

COA Type

Description

Attachment Check List

Att Doc Num

Name

403455022	Form44 Submitted
403455043	OFF-LOCATION FLOWLINE GIS KML
403455044	OFF-LOCATION FLOWLINE GIS KML
403455046	OFF-LOCATION FLOWLINE GIS KML

Total Attach: 4 Files

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