

State of Colorado Energy & Carbon Management Commission

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



ECMC RECEPTION

Receive Date:

12/31/2024

Document Number:

404043786

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

ECMC Operator Number: 17180 Contact Person: Ron Schultz
Company Name: CITATION OIL & GAS CORP Phone: (281) 891-1559
Address: 14077 CUTTEN RD Email: rschultz@cogc.com
City: HOUSTON State: TX Zip: 77069
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 [X]

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 321704 Location Type: Production Facilities
Name: ARAPAHOE UNIT-614S42W Number: 36NENE
County: CHEYENNE
Qtr Qtr: NENE Section: 36 Township: 14S Range: 42W Meridian: 6
Latitude: 38.796837 Longitude: -102.054683

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: 480504 Flowline Type: Production Line Action Type: Realignment

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 321704 Location Type: Well Site
Name: ARAPAHOE UNIT-614S42W Number: 36NENE
County: CHEYENNE No Location ID

Qtr Qtr: NENE Section: 36 Township: 14S Range: 42W Meridian: 6

Latitude: 38.796837 Longitude: -102.054683

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: 04/30/1988

Maximum Anticipated Operating Pressure (PSI): 100 Testing PSI:

Test Date:

OFF LOCATION FLOWLINE Realignment

Date: 04/30/1998

Description of Realignment:

Updated Flowline location.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 480507 Flowline Type: Production Line Action Type: Realignment

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 321695 Location Type: Well Site

Name: ARAPAHOE UNIT-614S42W Number: 25SWSE

County: CHEYENNE No Location ID

Qtr Qtr: SWSE Section: 25 Township: 14S Range: 42W Meridian: 6

Latitude: 38.800094 Longitude: -102.060050

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: 12/15/1987

Maximum Anticipated Operating Pressure (PSI): 100 Testing PSI:

Test Date:

OFF LOCATION FLOWLINE Realignment

Date: 12/15/1987

Description of Realignment:

Updated Flowline location.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 480506 Flowline Type: Production Line Action Type: Realignment

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 321713 Location Type: Well Site
Name: ARAPAHOE UNIT-614S42W Number: 21SWNW
County: CHEYENNE No Location ID
Qtr Qtr: SWNW Section: 21 Township: 14S Range: 42W Meridian: 6
Latitude: 38.822413 Longitude: -102.125644
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: 02/17/1988
Maximum Anticipated Operating Pressure (PSI): 100 Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE Realignment

Date: 02/17/1988

Description of Realignment:

Updated Flowline location.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 480508 Flowline Type: Production Line Action Type: Realignment

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 321685 Location Type: Well Site
Name: ARAPAHOE UNIT-614S42W Number: 25SESE
County: CHEYENNE No Location ID
Qtr Qtr: SESE Section: 25 Township: 14S Range: 42W Meridian: 6
Latitude: 38.799979 Longitude: -102.055389
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: 08/24/2005
Maximum Anticipated Operating Pressure (PSI): 100 Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE Realignment

Date: 08/24/2005

Description of Realignment:

Updated Flowline location.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 480505 Flowline Type: Production Line Action Type: Realignment

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 321703 Location Type: Well Site
Name: ARAPAHOE UNIT-614S42W Number: 25SESW
County: CHEYENNE No Location ID
Qtr Qtr: SESW Section: 25 Township: 14S Range: 42W Meridian: 6
Latitude: 38.800224 Longitude: -102.064771

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: 12/31/1987
Maximum Anticipated Operating Pressure (PSI): 100 Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE Realignment

Date: 12/31/1987

Description of Realignment:

Updated Flowline location.

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: 12/31/2024 Email: ben.shoup@absarokasolutions.com

Print Name: Ben Shoup Title: Agent

Based on the information provided herein, this Flowline Report complies with ECMC Rules and applicable orders and is hereby approved.

ECMC Approved:  **Director of ECMC** Date: 3/5/2025

CONDITIONS OF APPROVAL, IF ANY LIST

COA Type

Description

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ATTACHMENT LIST

Att Doc Num

Name

404043786	Form44 Submitted
404044495	OFF-LOCATION FLOWLINE GIS SHP

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)