

State of Colorado  
Oil and Gas Conservation Commission

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OGCC RECEPTION  
Receive Date:  
07/09/2018  
Document Number:  
401695514

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: 75027 Contact Person: AZUCENA TORRES  
Company Name: ROSEWOOD RESOURCES INC Phone: (970) 848-2228  
Address: 2101 CEDAR SPRINGS RD STE 1500 Email: AZUCENATORRES@ROSEWD.COM  
City: DALLAS State: TX Zip: 75201  
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  No

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION  
Location ID: 416838 Location Type: Production Facilities  
Name: Shivley Number: 34-29  
County: YUMA  
Qtr Qtr: SWSE Section: 29 Township: 5S Range: 43W Meridian: 6  
Latitude: 39.589170 Longitude: -102.199770

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 460866 Flowline Type: Production Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.587485 Longitude: -102.193817 PDOP: Measurement Date: 07/06/2018  
Equipment at End Point Riser: Meter

Flowline Start Point Location Identification

Location ID: 416838 Location Type: Well Site  No Location ID  
Name: Shivley Number: 34-29  
County: YUMA  
Qtr Qtr: SWSE Section: 29 Township: 5S Range: 43W Meridian: 6  
Latitude: 39.589170 Longitude: -102.199770

Flowline Start Point Riser

Latitude: 39.589169 Longitude: -102.199785 PDOP: Measurement Date: 06/21/2018  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Natural Gas Pipe Material: POLY Max Outer Diameter:(Inches) 2.000  
Bedding Material: Sand Date Construction Completed: 08/05/2010  
Maximum Anticipated Operating Pressure (PSI): 65 Testing PSI: 195  
Test Date: 11/04/2016

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 460867 Flowline Type: Production Line Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 39.587485 Longitude: -102.193817 PDOP: \_\_\_\_\_ Measurement Date: 07/06/2018  
Equipment at End Point Riser: Manifold

**Flowline Start Point Location Identification**

Location ID: 416838 Location Type: \_\_\_\_\_ Well Site  No Location ID  
Name: Shivley Number: 34-29  
County: YUMA  
Qtr Qtr: SWSE Section: 29 Township: 5S Range: 43W Meridian: 6  
Latitude: 39.589170 Longitude: -102.199770

**Flowline Start Point Riser**

Latitude: 39.589169 Longitude -102.199785 PDOP: \_\_\_\_\_ Measurement Date: 07/06/2018  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Produced Water Pipe Material: POLY Max Outer Diameter:(Inches) 2.000  
Bedding Material: Sand Date Construction Completed: 08/05/2010  
Maximum Anticipated Operating Pressure (PSI): 30 Testing PSI: 40  
Test Date: 10/28/2016

**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: 07/09/2018 Email: AZUCENATORRES@ROSEWD.COM  
Print Name: AZUCENA TORRES Title: HSE & REGULATORY REP

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: 1/22/2019

**Attachment Check List**

<b>Att Doc Num</b>	<b>Name</b>
401695546	PRESSURE TEST
401695562	LAYOUT DRAWING-ACTUAL

Total Attach: 2 Files