

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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OGCC RECEPTION

Receive Date:

10/04/2018

Document Number:

401771705

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: 96340 Contact Person: Linda Boone
Company Name: WIEPKING-FULLERTON ENERGY LLC Phone: (720) 941-0791
Address: 96 GLENMOOR LN Email: ldboonepar@aol.com
City: ENGLEWOOD State: CO Zip: 80113
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: 462004 Location Type: Production Facilities
Name: Nemesis Number: 2
County: LINCOLN
Qtr Qtr: Lot 4 Section: 1 Township: 10S Range: 56W Meridian: 6
Latitude: 39.214860 Longitude: -103.609750

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462556 Flowline Type: Production Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.214860 Longitude: -103.609750 PDOP: 4.4 Measurement Date: 05/26/2017
Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 433780 Location Type: Well Site [] No Location ID
Name: Nemesis Number: 2
County: LINCOLN
Qtr Qtr: Lot 4 Section: 1 Township: 10S Range: 56W Meridian: 6
Latitude: 39.213440 Longitude: -103.619400

Flowline Start Point Riser

Latitude: 39.213440 Longitude: -103.619400 PDOP: 2.4 Measurement Date: 09/27/2013
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.000
Bedding Material: Native Materials Date Construction Completed: 01/24/2014
Maximum Anticipated Operating Pressure (PSI): 35 Testing PSI: 115
Test Date: 08/22/2016

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462557 Flowline Type: Peripheral Piping Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.214860 Longitude: -103.609750 PDOP: 2.4 Measurement Date: 09/30/2013
Equipment at End Point Riser: Heater Treater

Flowline Start Point Location Identification

Location ID: 433780 Location Type: Well Site No Location ID
Name: Nemesis Number: 2
County: LINCOLN
Qtr Qtr: Lot 4 Section: 1 Township: 10S Range: 56W Meridian: 6
Latitude: 39.213440 Longitude: -103.619400

Flowline Start Point Riser

Latitude: 39.213440 Longitude -103.619400 PDOP: 4.4 Measurement Date: 05/26/2017
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Natural Gas Pipe Material: PVC Max Outer Diameter:(Inches) 1.250
Bedding Material: Native Materials Date Construction Completed: 01/24/2014
Maximum Anticipated Operating Pressure (PSI): 20 Testing PSI: 40
Test Date: 08/23/2016

OPERATOR COMMENTS AND SUBMITTAL

Comments

Estimated date of flowline completion is 1/24/2014. Tank Battery lat/long measured on or about 5/26/2017 by GOLD, LLC as part of the flowline NTO compliance.

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

Signed: _____ Date: 10/04/2018 Email: ldboonepar@aol.com

Print Name: Linda Boone Title: Agent

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: 2/26/2019

Attachment Check List

Att Doc Num	Name
401771705	Form44 Submitted
401771727	LAYOUT DRAWING-ACTUAL
401784995	TOPO MAP

Total Attach: 3 Files