

FORM

11

Rev
01/18

State of Colorado
Oil and Gas Conservation Commission

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



Receive Date:

Document Number:

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MONTHLY REPORT OF GASOLINE OR OTHER EXTRACTION PLANT

Rule 313: All operators of gasoline or other extraction plants shall make monthly reports to the Director on Form 11. Such forms shall contain all information required thereon and shall be filed with the Director on or before the 25th day of each month covering the preceding month.

Report gas volumes in MCF corrected to standard conditions of 14.73 psi and 60 degrees Fahrenheit.

CONTACT INFORMATION

OGCC Operator Number: 10716 Contact Name: Tony Bonicelli
Name of Operator: ROCKY MOUNTAIN MIDSTREAM LLC Phone: (918) 607-3247
Address: ONE WILLIAMS CENTER Title: Accounting Analyst Sr
City: TULSA State: OK Zip: 74172 Email: tony.bonicelli@williams.com

FACILITY INFORMATION

Plant Name: FORT LUPTON GAS PLANT Gas Plant Facility ID: 451349
Plant Address: 4501 WELD COUNTY ROAD 35 City: FORT LUPTON State: CO Zip: 80621
County: WELD

REPORT INFORMATION

Report For Month Of: 03 Year: 2019 Plant Shut-In For Entire Month (No Volumes): No

Report Whole Numbers ONLY. Do not enter decimals. Round ALL decimals to nearest whole number.

INTAKE VOLUME

Intake Volume From Oil Wells: 1687739 Mcf
Intake Volume From Gas Wells: Mcf
TOTAL Intake Volume: 1687739 Mcf (See Note 1)

RESIDUE: DISPOSITION AND VOLUME

Plant Fuel: 47657 Mcf
Returned For Lease Fuel: Mcf
Sold or Other Disposition (Detail Below): 1434913 Mcf (See Note 2 & 3)
Returned To Earth: Mcf
Vented: 7555 Mcf
Shrinkage: 197614 Mcf
TOTAL Residue Volume: 1687739 Mcf (See Note 1)

DETAILS of RESIDUE : SOLD or OTHER DISPOSITION (See Note 2)

Name of Purchaser or User	Address	Used For	MCF
Colorado Interstate Gas Co	2 Nevada, Colorado Springs, CO 80903	DELIVERY ON BEHALF OF SHI	1434913

DetailsTotal Volume (See Note 3) 1434913

PLANT PRODUCTION ,RECEIPTS, DELIVERIES, FLARE, AND STOCK IN 42-GAL BARRELS

Product	Opening Stock	Receipts	Deliveries	Flare	Closing Stock
BUTANE	0		33655		0
CONDENSATE	715		405		635
ETHANE	0		34384		0
GASOLINE	0		16136		0
PROPANE	0		53519		0

Description of Other: _____

NOTES

1. Total Intake Volume MUST equal Total Residue Volume.	2. Details are REQUIRED for "Sold or Other Disposition" Volumes.	3. Details Total Volume MUST equal "Sold or Other Disposition" Volume.
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OPERATOR COMMENTS

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

Signed: _____

Print Name: _____

Title: _____

Date: _____

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)