

State of Colorado  
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

Receive Date:

08/13/2019

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## 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: 10699 Contact Person: Pat Dolezal  
Company Name: OWN RESOURCES OPERATING LLC Phone: (970) 332-3585  
Address: 36695 US-385 Email: pat.dolezal@ownresources.com  
City: WRAY State: CO Zip: 80758  
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: 303058 Location Type: Production Facilities  
Name: BRAND-63N47W Number: 27CSE  
County: YUMA  
Qtr Qtr: CSE Section: 27 Township: 3N Range: 47W Meridian: 6  
Latitude: 40.194927 Longitude: -102.608982

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 466669 Flowline Type: Wellhead Line Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION****Flowline End Point Riser**

Latitude: 40.194878 Longitude: -102.608757 PDOP: Measurement Date: 06/04/2019  
Equipment at End Point Riser: Meter

**Flowline Start Point Location Identification**

Location ID: 304755 Location Type: Well Site ☐ No Location ID  
Name: OTTO-63N47W Number: 27NENW  
County: YUMA  
Qtr Qtr: NENW Section: 27 Township: 3N Range: 47W Meridian: 6  
Latitude: 40.204017 Longitude: -102.617472

**Flowline Start Point Riser**

Latitude: 40.204010 Longitude: -102.617500 PDOP: Measurement Date: 06/04/2019  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Natural Gas Pipe Material: HDPE Max Outer Diameter:(Inches) 2.000  
Bedding Material: \_\_\_\_\_ Date Construction Completed: 04/20/2005  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: 44  
Test Date: 11/06/2018

**OPERATOR COMMENTS AND SUBMITTAL**

Comments Off location flowline Otto 02-27 API 125-8950

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

Signed: \_\_\_\_\_ Date: 08/13/2019 Email: pat.dolezal@ownresources.com

Print Name: Pat Dolezal Title: Regulatory Specialist

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: 8/14/2019

**Attachment Check List****Att Doc Num****Name**

402143398	Form44 Submitted
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Total Attach: 1 Files