

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:

07/09/2019

Document Number:

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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) 3325-3585  
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 (CO811) that participates in Colorado's One Call notification system? Yes ☒ No ☐

## OFF LOCATION FLOWLINE

## FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 338127 Location Type: Production Facilities  
Name: SCHOB-61S44W Number: 23NWNW  
County: YUMA  
Qtr Qtr: NWNW Section: 23 Township: 1S Range: 44W Meridian: 6  
Latitude: 39.960070 Longitude: -102.278120

## FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 476893 Flowline Type: Wellhead Line Action Type: Registration

## OFF LOCATION FLOWLINE REGISTRATION

## Flowline End Point Riser

Latitude: 39.960031 Longitude: -102.280365 PDOP: Measurement Date: 06/05/2019  
Equipment at End Point Riser: Meter

## Flowline Start Point Location Identification

Location ID: 338127 Location Type: Well Site ☐ No Location ID  
Name: SCHOB-61S44W Number: 23NWNW  
County: YUMA  
Qtr Qtr: NWNW Section: 23 Township: 1S Range: 44W Meridian: 6  
Latitude: 39.960070 Longitude: -102.278120

## Flowline Start Point Riser

Latitude: 39.960079 Longitude: -102.278146 PDOP: Measurement Date: 06/05/2019  
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: 11/14/2007  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: 45  
Test Date: 12/14/2018

**OPERATOR COMMENTS AND SUBMITTAL**

Comments Off location flowline Schobe 23-04 API 11004

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

Signed: \_\_\_\_\_ Date: 07/09/2019 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: 6/12/2020

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

402100347	Form44 Submitted
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Total Attach: 1 Files