

State of Colorado Oil and Gas Conservation Commission

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



OGCC RECEPTION Receive Date: 10/31/2019 Document Number: 402226690

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: 17180 Contact Person: Lee Ann Elsom Company Name: CITATION OIL & GAS CORP Phone: (281) 891-1577 Address: 14077 CUTTEN RD Email: lelsom@cogc.com City: HOUSTON State: TX Zip: 77269 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: Location Type: Production Facilities Name: Christoper, Bledsoe, Speaker Comp. Number: 2,4,5,6&11,3-12 County: CHEYENNE Qtr Qtr: SWSW Section: 1 Township: 12S Range: 51W Meridian: 6 Latitude: 39.025039 Longitude: -103.059711

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.025039 Longitude: -103.059711 PDOP: Measurement Date: 10/31/2019 Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 208458 Location Type: Well Site [ ] No Location ID Name: CHRISTOPHER 41-1 Number: 5 County: CHEYENNE Qtr Qtr: NENE Section: 1 Township: 12S Range: 51W Meridian: 6 Latitude: 39.035780 Longitude: -103.052557

Flowline Start Point Riser

Latitude: 39.035780 Longitude: -103.052557 PDOP: Measurement Date: 10/31/2019 Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Crude Oil Emulsion Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.500  
 Bedding Material: Native Materials Date Construction Completed: 08/20/1993  
 Maximum Anticipated Operating Pressure (PSI): 100 Testing PSI: \_\_\_\_\_  
 Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: \_\_\_\_\_ Flowline Type: Production Line Action Type: Registration

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

Latitude: 39.025039 Longitude: -103.059711 PDOP: \_\_\_\_\_ Measurement Date: 10/31/2019  
 Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 208430 Location Type: \_\_\_\_\_ Well Site  No Location ID  
 Name: BLEDSOE Number: 3-12  
 County: CHEYENNE  
 Qtr Qtr: NENW Section: 12 Township: 12S Range: 51W Meridian: 6  
 Latitude: 39.022186 Longitude: -103.063918

**Flowline Start Point Riser**

Latitude: 39.022186 Longitude -103.063918 PDOP: \_\_\_\_\_ Measurement Date: 10/31/2019  
 :  
 Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Crude Oil Emulsion Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.500  
 Bedding Material: Native Materials Date Construction Completed: 03/04/1993  
 Maximum Anticipated Operating Pressure (PSI): 100 Testing PSI: \_\_\_\_\_  
 Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: \_\_\_\_\_ Flowline Type: Wellhead Line Action Type: Registration

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

Latitude: 38.997411 Longitude: -103.053427 PDOP: \_\_\_\_\_ Measurement Date: 10/31/2019  
 Equipment at End Point Riser: Well

**Flowline Start Point Location Identification**

Location ID: \_\_\_\_\_ Location Type: \_\_\_\_\_ Production Facilities  No Location ID  
 Name: Christoper, Bledsoe, Speaker Comp. Number: 2,4,5,6&11,3-12  
 County: CHEYENNE  
 Qtr Qtr: SWSW Section: 1 Township: 12S Range: 51W Meridian: 6  
 Latitude: 39.025039 Longitude: -103.059711

**Flowline Start Point Riser**

Latitude: 39.025039 Longitude -103.059711 PDOP: Measurement Date: 11/07/2019

Equipment at Start Point Riser: Manifold

**Flowline Description and Testing**

Type of Fluid Transferred: Natural Gas Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 3.500  
Bedding Material: Native Materials Date Construction Completed: 12/27/1993  
Maximum Anticipated Operating Pressure (PSI): 450 Testing PSI:  
Test Date:

**FLOWLINE FACILITY INFORMATION**

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

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 39.044670 Longitude: -103.053297 PDOP: Measurement Date: 10/31/2019  
Equipment at End Point Riser: Well

**Flowline Start Point Location Identification**

Location ID: Location Type: Production Facilities  No Location ID  
Name: Christoper, Bledsoe, Speaker Comp. Number: 2,4,5,6&11,3-12  
County: CHEYENNE  
Qtr Qtr: SWSW Section: 1 Township: 12S Range: 51W Meridian: 6  
Latitude: 39.025039 Longitude: -103.059711

**Flowline Start Point Riser**

Latitude: 39.025039 Longitude -103.059711 PDOP: Measurement Date: 10/31/2019  
Equipment at Start Point Riser: Manifold

**Flowline Description and Testing**

Type of Fluid Transferred: Produced Water Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.500  
Bedding Material: Native Materials Date Construction Completed: 09/20/1993  
Maximum Anticipated Operating Pressure (PSI): 25 Testing PSI:  
Test Date:

**FLOWLINE FACILITY INFORMATION**

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

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 39.025039 Longitude: -103.059711 PDOP: Measurement Date: 10/31/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 208462 Location Type: Well Site  No Location ID  
Name: CHRISTOPHER 32-1 Number: 6  
County: CHEYENNE

Qtr Qtr: SWNE Section: 1 Township: 12S Range: 51W Meridian: 6  
Latitude: 39.032910 Longitude: -103.057435

**Flowline Start Point Riser**

Latitude: 39.032910 Longitude -103.057435 PDOP: \_\_\_\_\_ Measurement Date: 10/31/2019  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Crude Oil Emulsion Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.500  
Bedding Material: Native Materials Date Construction Completed: 10/05/1993  
Maximum Anticipated Operating Pressure (PSI): 100 Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: \_\_\_\_\_ Flowline Type: Production Line Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 39.025039 Longitude: -103.059711 PDOP: \_\_\_\_\_ Measurement Date: 10/31/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 208448 Location Type: Well Site  No Location ID  
Name: CHRISTOPHER 43-1 Number: 4  
County: CHEYENNE  
Qtr Qtr: NESE Section: 1 Township: 12S Range: 51W Meridian: 6  
Latitude: 39.028584 Longitude: -103.054448

**Flowline Start Point Riser**

Latitude: 39.028584 Longitude -103.054448 PDOP: \_\_\_\_\_ Measurement Date: 10/31/2019  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Crude Oil Emulsion Pipe Material: Fiberglass Max Outer Diameter:(Inches) 3.500  
Bedding Material: Native Materials Date Construction Completed: 07/19/1993  
Maximum Anticipated Operating Pressure (PSI): 100 Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**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: 10/31/2019 Email: HKennedy@cogc.com

Print Name: Herschel Kennedy Title: Senior Production Foreman

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: \_\_\_\_\_

### **Attachment Check List**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
402227032	OFF-LOCATION FLOWLINE GEODATABASE SHP

Total Attach: 1 Files