

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:

04/25/2023

Document Number:

403383733

Domestic Tap

The Flowline Report, Form 44, shall be submitted to register, report realignment, report removal from service, provide pre-abandonment notices, or report abandonment of Off-Location Flowlines, Flowline Systems, Produced Water Transfer Systems, or Crude Oil Transfer Lines or Systems as required by the 1100 Series Rules. The Form 44 shall also be submitted to register, report realignment, or report abandonment of Domestic Taps, and to report Grade 1 Gas Leaks from Flowlines per Rules 610 and 906.

Operator Information

OGCC Operator Number: <u>73372</u>	Contact Person: <u>Jacob Harter</u>
Company Name: <u>RANCHO TRES</u>	Phone: <u>(970) 946-3761</u>
Address: <u>BOX B</u>	Email: <u>jharter@cottonwoodconsulting.com</u>
City: <u>RIFLE</u> State: <u>CO</u> Zip: <u>81650</u>	
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 <input type="checkbox"/> No <input checked="" type="checkbox"/>	

DOMESTIC TAP

DOMESTIC TAP ASSOCIATED WELL LOCATION IDENTIFICATION

Location ID: <u>322300</u>	Location Type: <u>Well Site</u>
Name: <u>BERT EATON-66S94W</u>	Number: <u>27SESE</u>
County: <u>GARFIELD</u>	
Qtr Qtr: <u>SESE</u> Section: <u>27</u> Township: <u>6S</u> Range: <u>94W</u> Meridian: <u>6</u>	
Latitude: <u>39.491770</u>	Longitude: <u>-107.867889</u>

DOMESTIC TAP FACILITY INFORMATION

Flowline Facility ID: <u>484439</u>	Flowline Facility Type: <u>Domestic</u>	Action Type: <u>Registration</u>
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DOMESTIC TAP REGISTRATION

Installation or Date of Discovery: 04/25/2023

Flowline Start Point Riser

Latitude: <u>39.491737</u>	Longitude: <u>-107.867903</u>	
GPS Quality Value: <u></u>	Type of GPS Quality Value: <u></u>	Measurement Date: <u>04/25/2023</u>
Tap Source: <u>Wellhead</u>		

Street Address of Point of Delivery

Address: <u>5473 County Road 320</u>		
City: <u>Rifle</u>	State: <u>CO</u>	Zip: <u>81650</u>
Latitude: <u>39.494549</u>	Longitude: <u>-107.864814</u>	
GPS Quality Value: <u></u>	Type of GPS Quality Value: <u></u>	Measurement Date: <u></u>

OPERATOR COMMENTS AND SUBMITTAL

Comments

This is an Orphan well Site. Well has no production records. in inspection 670201486 dated 5/25/2017 flowline was cut at access road and disconnect by COGCC staff, Well has been P&A . Landowner has expressed that he wants flowline abandoned in place. Comments by Richard Murray

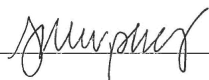
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

Signed: _____ Date: 04/25/2023 Email: jharter@cottonwoodconsulting.com

Print Name: Jacob Harter Title: Consultant

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: 5/10/2023

Conditions of Approval

COA Type

Description

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Attachment Check List

Att Doc Num

Name

403383733	Form44 Submitted
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Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)