

FORM

12

Rev  
04/18State of Colorado  
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109

FOR OGCC USE ONLY

Document Number:

401642590

Receive Date:

05/23/2018

## GAS FACILITY REGISTRATION/CHANGE OF OPERATOR

Per Rule 313B.a and Rule 313B.b, a Form 12 is required to register a new Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility. Financial Assurance is required per Rule 711. Per Rule 313B.c, a Form 12 is required for an annual report of changes to a Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility. Per Rule 313B.d, a Form 12 is required to report the transfer of ownership of a Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility.

## Purpose of Form: (Select one)

New Registration ☐ Annual Report of Changes ☐ Change of Operator ☒

Name of Operator: XTO ENERGY INC

OGCC Operator Number: 100264 Suff:

Is the Buying Operator a Tier One member of the Utility Notification Center of Colorado (UNCC) that participates in Colorado's

One Call notification system? Yes ☒ No ☐

Address: 600 E EXCHANGE AVE

City: FORTH WORTH State: TX Zip: 76164

Contact Name: ALICE YAUGER

First Name

Last Name

Phone: 817 3785312 Email: ALICE\_YAUGER@XTOENERGY.COM

## NON-Submitting Operator Information:

COGCC Number of Non-Submitting: 10133 Name of Non-Submitting: HILCORP ENERGY COMPANY

Non-Submitting Operator is: Buying Operator Contact Name: JEFFERY WOOLLEY

Title: REGULATORY &amp; COMPLIANCE Non-Submitting Operator Contact Email: jwoolley@hilcorp.com

## FACILITY INFORMATION

Facility Name and Number: DURANGO COMPRESSOR STATION COGCC Facility ID: 412310

A separate Form 12 must be submitted for each facility or each component of a gathering system.  
Select the type of facility below.

TYPE OF FACILITY (Select one)

Gas Compressor Station	<input checked="" type="checkbox"/>	Gas Processing Plant	<input type="checkbox"/>
Gas Gathering Pipeline System	<input type="checkbox"/>	Underground Gas Storage	<input type="checkbox"/>

Estimated Daily Processing Total: 17.00 MMSCFPD

Gas Compressor Station – Number of Compressors: 6

Financial Assurance: Gas Facility Surety ID#

Surface Ownership: Fee ☐ State ☐ Federal ☒ Indian ☐

**Facility Location**

- Provide a legal location and the latitude and longitude of that location.
- Provide the GPS data for the latitude and longitude of the legal location.
- When one exists, provide the street address of the facility.
- For a Gas Gathering Pipeline System or an Underground Gas Storage Facility use sections, townships, ranges and counties to describe the geographic area covered by the system or facility.

**Legal Location:** QTRQTR NENE Sec 9 Twp 34N Rng 8W Meridian N

**County** LA PLATA

**Latitude** 37.234797 **Longitude** -107.743882

**GPS Data (if available):** PDOP Reading 0.0

**Date of Measurement** 5/11/2018 **GPS Instrument Operator's Name** ALICE YAUGER

**Facility Address (if exists)** 1256 CR 223  
**City** DURANGO **State** CO **Zip** 81301

**Gas Gathering Pipeline System or Underground Gas Storage Facility - Description of Geographic Area:**


**Related Gas Gathering Pipeline System**

For a Gas Processing Plant or a Gas Compressor Station that is part of a Gas Gathering Pipeline System:

If the Gas Gathering Pipeline System is registered, enter the Facility ID of that system: 455014

If the Gas Gathering Pipeline System is NOT registered, enter the Form 12 Document Number submitted to register that system: \_\_\_\_\_

**CHANGE OF OPERATOR**

Effective Date of Change: 3/29/2018 Form is being submitted by: Selling Operator

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 ☐

Name of Buying Operator: HILCORP ENERGY COMPANY	Name of Selling Operator: XTO ENERGY INC
Buying Operator COGCC Number: 10133	Selling Operator COGCC Number: 100264
Print Name: JEFFERY WOOLLEY	Print Name: ALICE YAUGER
Signature:	Signature:
Title: REGULATORY & COMPLIANCE	Title: PERMITTING ANALYST
Date: 3/29/2018	Date: 3/29/2018

**Operator Comments:**

This facility along with the gathering system and CDPs were sold to Hilcorp Energy effective 3/29/2018.

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

**SUMMITTED BY:**

Signed: \_\_\_\_\_ Print Name: ALICE YAUGER

Title: PERMITTING ANALYST Email: ALICE\_YAUGER@XTOENERGY.COM Date: 5/23/2018

COGCC Approved: RAMOS, MARTHA

Date: 5/30/2018

**FACILITY ID:** 412310

### **General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Bonding	This form was submitted for a registered facility per Rule 313B.b. The form was not submitted to report any changes.	05/30/2018

Total: 1 comment(s)

Signature:

### **Attachment Check List**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
401642590	Form 12 SUBMITTED
401642744	TOPOGRAPHIC MAP
401642753	FACILITY LAYOUT DRAWING
401643282	GEOGRAPHIC AREA MAP
401643283	TOPOGRAPHIC MAP
401643304	OTHER
401650161	RATIFICATION DOCUMENT

Total Attach: 7 Files