

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:

07/30/2018

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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: 10633 Contact Person: Renee Kendrick
Company Name: CRESTONE PEAK RESOURCES OPERATING LLC Phone: (303) 309-1931
Address: 1801 CALIFORNIA STREET #2500 Email: renee.kendrick@crestonepr.com
City: DENVER State: CO Zip: 80202
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: 335860 Location Type: Production Facilities
Name: BICKLER-61N68W Number: 34NESW
County: BROOMFIELD
Qtr Qtr: NESW Section: 34 Township: 1N Range: 68W Meridian: 6
Latitude: 40.006930 Longitude: -104.990480

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 456390 Flowline Type: Wellhead Line Action Type: Abandonment

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.006699 Longitude: -104.990255 PDOP: Measurement Date: 06/25/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 323083 Location Type: Well Site [] No Location ID
Name: BICKLER-61N68W Number: 34SWNW
County: WELD
Qtr Qtr: SWNW Section: 34 Township: 1N Range: 68W Meridian: 6
Latitude: 40.009021 Longitude: -104.996112

Flowline Start Point Riser

Latitude: 40.009025 Longitude: -104.996092 PDOP: Measurement Date: 06/25/2018
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Natural Gas Pipe Material: _____ Max Outer Diameter:(Inches) 3.000
Bedding Material: _____ Date Construction Completed: 09/26/1987
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE ABANDONMENT

Date: 07/01/2018

Description of Abandonment

Pipe was disconnected from Crestone wellhead and also from Crestone separator. Both ends plugged below ground. Flowline was flushed with 25bbls fresh water prior to plugging. Line was verified free of hydro carbons with LEL monitor. Line was cut below ground level. Line was capped on both ends with 120lbs of slurry per state NTO, then backfilled on both ends.

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: 07/30/2018 Email: renee.kendrick@crestonepr.com

Print Name: Renee Kendrick Title: Regulatory Coordinator

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: 8/23/2018

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files