

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:

10/31/2018

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: 10633 Contact Person: Schuyler Hamilton  
Company Name: CRESTONE PEAK RESOURCES OPERATING LLC Phone: (303) 774-4017  
Address: 1801 CALIFORNIA STREET #2500 Email: schuyler.hamilton@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 ☒ No ☐

## OFF LOCATION FLOWLINE

## FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 332706 Location Type: Production Facilities  
Name: MANTLE-64N65W Number: 28SWNE  
County: WELD  
Qtr Qtr: SWNE Section: 28 Township: 4N Range: 65W Meridian: 6  
Latitude: 40.285480 Longitude: -104.664640

## FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 456906 Flowline Type: Wellhead Line Action Type: Abandonment

## OFF LOCATION FLOWLINE REGISTRATION

## Flowline End Point Riser

Latitude: 40.285329 Longitude: -104.664337 PDOP: Measurement Date: 08/02/2018  
Equipment at End Point Riser: Separator

## Flowline Start Point Location Identification

Location ID: 332220 Location Type: Well Site ☐ No Location ID  
Name: MANTLE-64N65W Number: 28SWNE  
County: WELD  
Qtr Qtr: SWNE Section: 28 Township: 4N Range: 65W Meridian: 6  
Latitude: 40.284556 Longitude: -104.666607

## Flowline Start Point Riser

Latitude: 40.284641 Longitude: -104.666696 PDOP: Measurement Date: 08/06/2018  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Multiphase Pipe Material: \_\_\_\_\_ Max Outer Diameter:(Inches) 3.000  
Bedding Material: \_\_\_\_\_ Date Construction Completed: 04/05/2004  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OFF LOCATION FLOWLINE ABANDONMENT**

Date: 10/15/2018

**Description of Abandonment**

Flowline was disconnected from wellhead and from separator. 835' of flowline was abandoned in place. Both ends plugged below ground. Flowline was flushed with 25bbls fresh water prior to plugging. Flowline was verified free of hydro carbons with LEL monitor. Flowline was cut below ground level. Flowline was capped on both ends with 120lbs of slurry per state NTO, then backfilled on both ends.

**OPERATOR COMMENTS AND SUBMITTAL**

Comments

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

Signed: \_\_\_\_\_ Date: 10/31/2018 Email: schuyler.hamilton@crestonepr.com

Print Name: Schuyler Hamilton Title: EHS Field Technician

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**

**Att Doc Num**

**Name**

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Total Attach: 0 Files