

State of Colorado
Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:

11/09/2018

Document Number:

401829811

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: 10459 Contact Person: Jeff Rickard
Company Name: EXTRACTION OIL & GAS INC Phone: (720) 737-5144
Address: 370 17TH STREET SUITE 5300 Email: jrickard@extractionog.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: 319772 Location Type: Production Facilities
Name: BOX ELDER H-61S65W Number: 31NESW
County: ADAMS
Qtr Qtr: NESW Section: 31 Township: 1S Range: 65W Meridian: 6
Latitude: 39.918780 Longitude: -104.709736

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 459308 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.918774 Longitude: -104.709986 PDOP: 2.0 Measurement Date: 10/05/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 319761 Location Type: Well Site [] No Location ID
Name: BOX ELDER H-61S65W Number: 31NENE
County: ADAMS
Qtr Qtr: NENE Section: 31 Township: 1S Range: 65W Meridian: 6
Latitude: 39.925940 Longitude: -104.700555

Flowline Start Point Riser

Latitude: 39.926024 Longitude: -104.700515 PDOP: 2.0 Measurement Date: 10/05/2018
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.375
Bedding Material: Native Materials Date Construction Completed: 05/30/1973
Maximum Anticipated Operating Pressure (PSI): 500 Testing PSI: 251
Test Date: 04/02/2018

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 459309 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.918768 Longitude: -104.709990 PDOP: 1.7 Measurement Date: 10/05/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 320572 Location Type: Well Site No Location ID
Name: BOX ELDER H-61S65W Number: 31SESW
County: ADAMS
Qtr Qtr: SESW Section: 31 Township: 1S Range: 65W Meridian: 6
Latitude: 39.916096 Longitude: -104.708390

Flowline Start Point Riser

Latitude: 39.916106 Longitude -104.708381 PDOP: 1.8 Measurement Date: 10/05/2018
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.375
Bedding Material: Native Materials Date Construction Completed: 05/31/2007
Maximum Anticipated Operating Pressure (PSI): 500 Testing PSI: 142
Test Date: 04/02/2018

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: 11/09/2018 Email: emartinez@h2eincorporated.com
Print Name: Emily Martinez Title: Environmental Scientist

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: 12/10/2018

Attachment Check List

Att Doc Num	Name
401829811	Form44 Submitted
401829835	PRESSURE TEST
401829836	PRESSURE TEST

Total Attach: 3 Files