

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:

12/11/2018

Document Number:

401852581

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: 10575	Contact Person: Jeff Rickard	
Company Name: 8 NORTH LLC	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 ☒ No ☐

OFF LOCATION FLOWLINE**FLOWLINE ENDPOINT LOCATION IDENTIFICATION**

Location ID: 321339	Location Type: Production Facilities			
Name: DONLEY-61N69W	Number: 36NWNE			
County: BOULDER				
Qtr Qtr: NWNE	Section: 36	Township: 1N	Range: 69W	Meridian: 6
Latitude: 40.011650	Longitude: -105.062120			

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 460626	Flowline Type: Wellhead Line	Action Type: Registration
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OFF LOCATION FLOWLINE REGISTRATION**Flowline End Point Riser**

Latitude: 40.011534	Longitude: -105.062440	PDOP: 0.9	Measurement Date: 05/20/2017
Equipment at End Point Riser: Separator			

Flowline Start Point Location Identification

Location ID: 321339	Location Type: Well Site	<input type="checkbox"/> No Location ID		
Name: DONLEY-61N69W	Number: 36NWNE			
County: BOULDER				
Qtr Qtr: NWNE	Section: 36	Township: 1N	Range: 69W	Meridian: 6
Latitude: 40.011650	Longitude: -105.062120			

Flowline Start Point Riser

Latitude: 40.011625	Longitude: -105.062122	PDOP: 1.0	Measurement Date: 05/20/2017
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: 03/21/2018
Maximum Anticipated Operating Pressure (PSI): 479 Testing PSI: 479
Test Date: 03/21/2018

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 460627 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION**Flowline End Point Riser**

Latitude: 40.011535 Longitude: -105.062432 PDOP: 0.9 Measurement Date: 05/20/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 321409 Location Type: Well Site ☐ No Location ID
Name: DONLEY MC-61N69W Number: 36SWNE
County: BOULDER
Qtr Qtr: SWNE Section: 36 Township: 1N Range: 69W Meridian: 6
Latitude: 40.009169 Longitude: -105.062103

Flowline Start Point Riser

Latitude: 40.009163 Longitude: -105.062108 PDOP: 0.9 Measurement Date: 05/06/2017
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: 03/21/2018
Maximum Anticipated Operating Pressure (PSI): 660 Testing PSI: 660
Test Date: 03/21/2018

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: 12/11/2018 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: 1/11/2019

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
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401852581	Form44 Submitted
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401852603	PRESSURE TEST
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401852606	PRESSURE TEST
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Total Attach: 3 Files