

State of Colorado  
Oil and Gas Conservation Commission

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Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

12/03/2018

Document Number:

401859029

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: 10311 Contact Person: Christi Ng  
Company Name: SRC ENERGY INC Phone: (720) 616.4300  
Address: 1675 BROADWAY SUITE 2600 Email: cng@srcenergy.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: 319090 Location Type: Production Facilities  
Name: BUXMAN, D.-66N66W Number: 26NENW  
County: WELD  
Qtr Qtr: NENW Section: 26 Township: 6N Range: 66W Meridian: 6  
Latitude: 40.464780 Longitude: -104.746997

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 461643 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.464900 Longitude: -104.746720 PDOP: 2.5 Measurement Date: 05/11/2017  
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 305727 Location Type: Well Site [ ] No Location ID  
Name: BUXMAN I-66N66W Number: 26SEW  
County: WELD  
Qtr Qtr: SENW Section: 26 Township: 6N Range: 66W Meridian: 6  
Latitude: 40.460843 Longitude: -104.747046

Flowline Start Point Riser

Latitude: 40.460830 Longitude: -104.747020 PDOP: 1.8 Measurement Date: 05/11/2017  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: \_\_\_\_\_ Pipe Material: \_\_\_\_\_ Max Outer Diameter:(Inches) \_\_\_\_\_  
Bedding Material: \_\_\_\_\_ Date Construction Completed: 01/01/2007  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OPERATOR COMMENTS AND SUBMITTAL**

Comments 

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| Flowing abandonment to follow flowline registration. |
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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: 12/03/2018 Email: cng@srcenergy.com

Print Name: Christi Ng Title: Sr. Regulatory Analyst

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: 2/4/2019

**Attachment Check List**

| <u>Att Doc Num</u> | <u>Name</u>      |
|--------------------|------------------|
| 401859029          | Form44 Submitted |

Total Attach: 1 Files