

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:

12/27/2018

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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: 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 <input checked="" type="checkbox"/> No <input type="checkbox"/>		

**OFF LOCATION FLOWLINE****FLOWLINE ENDPOINT LOCATION IDENTIFICATION**

Location ID: 421085 Location Type: Production Facilities  
Name: COX PC GK Number: 35-99HZ TANK  
County: WELD  
Qtr Qtr: NWSW Section: 35 Township: 11N Range: 61W Meridian: 6  
Latitude: 40.877840 Longitude: -104.182020

**FLOWLINE FACILITY INFORMATION**

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

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

Latitude: 40.877844 Longitude: -104.181571 PDOP: 1.1 Measurement Date: 07/15/2018  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 421072 Location Type: Well Site ☐ No Location ID  
Name: COX PC GK Number: 35-99HZ  
County: WELD  
Qtr Qtr: SWSW Section: 35 Township: 11N Range: 61W Meridian: 6  
Latitude: 40.872340 Longitude: -104.182000

**Flowline Start Point Riser**

Latitude: 40.872338 Longitude: -104.182023 PDOP: 1.0 Measurement Date: 07/15/2018  
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: 02/21/2011  
Maximum Anticipated Operating Pressure (PSI): 500 Testing PSI: 200  
Test Date: 09/21/2018

**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: 12/27/2018 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: \_\_\_\_\_

**Attachment Check List****Att Doc Num****Name**

401870663

PRESSURE TEST

Total Attach: 1 Files