

State of Colorado Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:

01/31/2019

Document Number:

401925184

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 [X] No []

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 431336 Location Type: Production Facilities
Name: DF RANCH Number: 1161-17-12 TANK
County: WELD
Qtr Qtr: SENE Section: 17 Township: 11N Range: 61W Meridian: 6
Latitude: 40.921260 Longitude: -104.221110

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 461530 Flowline Type: Wellhead Line Action Type: Abandonment

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.921262 Longitude: -104.221280 PDOP: 1.2 Measurement Date: 06/26/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 415459 Location Type: Well Site [] No Location ID
Name: DF RANCH Number: 1161-17-12
County: WELD
Qtr Qtr: NWNE Section: 17 Township: 11N Range: 61W Meridian: 6
Latitude: 40.926860 Longitude: -104.227490

Flowline Start Point Riser

Latitude: 40.926856 Longitude: -104.227514 PDOP: 1.1 Measurement Date: 06/26/2018
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 3.000
Bedding Material: Native Materials Date Construction Completed: 05/02/2010
Maximum Anticipated Operating Pressure (PSI): 74 Testing PSI: 74
Test Date: 06/15/2017

OFF LOCATION FLOWLINE ABANDONMENT

Date: 08/23/2018

Description of Abandonment

The entire 2" steel line was removed. The 1" poly line was cut, capped and left approx 4' below grade.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 461529 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.921293 Longitude: -104.221309 PDOP: 1.0 Measurement Date: 07/14/2018

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 414981 Location Type: _____ Well Site No Location ID

Name: DF RANCH Number: 1161-17-42

County: WELD

Qtr Qtr: NWSE Section: 17 Township: 11N Range: 61W Meridian: 6

Latitude: 40.919770 Longitude: -104.227490

Flowline Start Point Riser

Latitude: 40.919768 Longitude -104.227511 PDOP: 1.0 Measurement Date: 07/14/2018

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: 05/13/2010
Maximum Anticipated Operating Pressure (PSI): 370 Testing PSI: 370
Test Date: 09/28/2018

OFF LOCATION FLOWLINE REMOVAL FROM SERVICE

Date: _____

Description of Removal from Service

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: 01/31/2019 Email: jrickard@extractionog.com

Print Name: Jeff Rickard Title: Regulatory Compliance Coo

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: 2/25/2019

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401925184	Form44 Submitted

Total Attach: 1 Files