

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:

10/11/2018

Document Number:

401737133

## 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: 10261 Contact Person: Matthew Minne  
Company Name: BAYSWATER EXPLORATION & PRODUCTION LLC Phone: (720) 6657831  
Address: 730 17TH ST STE 500 Email: mminne@bayswater.us  
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: 302312 Location Type: Production Facilities  
Name: DRAKE-67N66W Number: 18SWNE  
County: WELD  
Qtr Qtr: SWNE Section: 18 Township: 7N Range: 66W Meridian: 6  
Latitude: 40.575920 Longitude: -104.819550

## FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462788 Flowline Type: Production Line Action Type: Registration

## OFF LOCATION FLOWLINE REGISTRATION

## Flowline End Point Riser

Latitude: 40.576468 Longitude: -104.820136 PDOP: 2.1 Measurement Date: 09/09/2018  
Equipment at End Point Riser: Separator

## Flowline Start Point Location Identification

Location ID: 302311 Location Type: Production Facilities ☐ No Location ID  
Name: DRAKE-67N66W Number: 18NWNE  
County: WELD  
Qtr Qtr: NWNE Section: 18 Township: 7N Range: 66W Meridian: 6  
Latitude: 40.580660 Longitude: -104.819540

## Flowline Start Point Riser

Latitude: 40.580654 Longitude: -104.819533 PDOP: 2.1 Measurement Date: 08/28/2018  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Other Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000  
Bedding Material: Native Materials Date Construction Completed: 10/08/2008  
Maximum Anticipated Operating Pressure (PSI): 441 Testing PSI: 441  
Test Date: 04/16/2018

**OPERATOR COMMENTS AND SUBMITTAL**

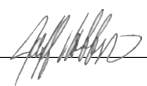
Comments

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

Signed: \_\_\_\_\_ Date: 10/11/2018 Email: mminne@bayswater.us

Print Name: Matthew Minne Title: Facility Operation Lead

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: 2/28/2019

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

401737133	Form44 Submitted
401793321	OFF-LOCATION FLOWLINE GEODATABASE
401793323	PRESSURE TEST

Total Attach: 3 Files