

State of Colorado Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:

02/27/2019

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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: 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: 461581 Location Type: Production Facilities
Name: S.E.G.L.-65N66W Number: 24SWNW
County: WELD
Qtr Qtr: SWNW Section: 24 Township: 5N Range: 66W Meridian: 6
Latitude: 40.385922 Longitude: -104.727629

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462366 Flowline Type: Wellhead Line Action Type: Abandonment

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.386050 Longitude: -104.727940 PDOP: 3.2 Measurement Date: 03/15/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 332572 Location Type: Well Site [] No Location ID
Name: SEGL-65N66W Number: 24SENW
County: WELD
Qtr Qtr: SENW Section: 24 Township: 5N Range: 66W Meridian: 6
Latitude: 40.386320 Longitude: -104.726530

Flowline Start Point Riser

Latitude: 40.386160 Longitude: -104.726520 PDOP: 2.7 Measurement Date: 03/15/2017
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: _____

OFF LOCATION FLOWLINE ABANDONMENT

Date: 02/16/2018

Description of Abandonment

Entire flowline abandoned and removed during the plugging operations of the SEGL 7-24 well.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462360 Flowline Type: Wellhead Line Action Type: Abandonment

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.386050 Longitude: -104.727930 PDOP: 2.3 Measurement Date: 03/15/2017
Equipment at End Point Riser: Well

Flowline Start Point Location Identification

Location ID: 332572 Location Type: _____ Well Site No Location ID
Name: SEGL-65N66W Number: 24SENW
County: WELD
Qtr Qtr: SENW Section: 24 Township: 5N Range: 66W Meridian: 6
Latitude: 40.386320 Longitude: -104.726530

Flowline Start Point Riser

Latitude: 40.386330 Longitude: -104.726520 PDOP: 2.6 Measurement Date: 03/15/2017
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: _____

OFF LOCATION FLOWLINE ABANDONMENT

Date: 08/09/2018

Description of Abandonment

Flowline flow-filled and abandoned in place during the plugging operations of the SEGL 2-24 well.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462364 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.386050 Longitude: -104.727920 PDOP: 3.3 Measurement Date: 03/15/2017

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 332572 Location Type: Well Site No Location ID
Name: SEGL-65N66W Number: 24SEW
County: WELD
Qtr Qtr: SENW Section: 24 Township: 5N Range: 66W Meridian: 6
Latitude: 40.386320 Longitude: -104.726530

Flowline Start Point Riser

Latitude: 40.386240 Longitude: -104.726520 PDOP: 2.6 Measurement Date: 03/15/2017
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:

OFF LOCATION FLOWLINE REMOVAL FROM SERVICE

Date:

Description of Removal from Service

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462362 Flowline Type: Wellhead Line Action Type: Abandonment

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.386130 Longitude: -104.727940 PDOP: 3.4 Measurement Date: 03/09/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 311338 Location Type: Well Site No Location ID
Name: S.E.G.L.-65N66W Number: 24SEW
County: WELD
Qtr Qtr: SENW Section: 24 Township: 5N Range: 66W Meridian: 6
Latitude: 40.386400 Longitude: -104.727920

Flowline Start Point Riser

Latitude: 40.386400 Longitude: -104.727940 PDOP: 2.1 Measurement Date: 03/09/2017
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: 04/01/1984
Maximum Anticipated Operating Pressure (PSI):

Test Date: _____

OFF LOCATION FLOWLINE ABANDONMENTDate: 08/28/2018**Description of Abandonment**

Flowline flow-filled and abandoned in place during the plugging operations of the SEGL 1 well.

FLOWLINE FACILITY INFORMATIONFlowline Facility ID: 462367 Flowline Type: Wellhead Line Action Type: Abandonment**OFF LOCATION FLOWLINE REGISTRATION****Flowline End Point Riser**Latitude: 40.386120 Longitude: -104.727930 PDOP: 3.5 Measurement Date: 03/09/2017Equipment at End Point Riser: Separator**Flowline Start Point Location Identification**Location ID: 336655 Location Type: Well Site No Location IDName: SEGL-65N66W Number: 24SENWCounty: WELDQtr Qtr: SENW Section: 24 Township: 5N Range: 66W Meridian: 6Latitude: 40.385760 Longitude: -104.728660**Flowline Start Point Riser**Latitude: 40.386160 Longitude: -104.728620 PDOP: 2.3 Measurement Date: 03/15/2017Equipment at Start Point Riser: Well**Flowline Description and Testing**

Type of Fluid Transferred: _____ Pipe Material: _____ Max Outer Diameter:(Inches) _____

Bedding Material: _____ Date Construction Completed: 12/01/2006

Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____

Test Date: _____

OFF LOCATION FLOWLINE ABANDONMENTDate: 04/04/2018**Description of Abandonment**

Entire flowline abandoned and removed during the plugging operations of the SEGL 21-24X well.

FLOWLINE FACILITY INFORMATIONFlowline Facility ID: 462369 Flowline Type: Wellhead Line Action Type: Abandonment**OFF LOCATION FLOWLINE REGISTRATION****Flowline End Point Riser**Latitude: 40.386050 Longitude: -104.727940 PDOP: 3.4 Measurement Date: 03/15/2017Equipment at End Point Riser: Separator**Flowline Start Point Location Identification**Location ID: 323042 Location Type: Well Site No Location ID

Name: S.E.G.L.-65N66W

Number: 24SWNW

County: WELD

Qtr Qtr: SWNW Section: 24 Township: 5N Range: 66W Meridian: 6

Latitude: 40.386066 Longitude: -104.732681

Flowline Start Point Riser

Latitude: 40.386060 Longitude: -104.732640 PDOP: 2.8 Measurement Date: 06/15/2017

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: 06/01/1985

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

OFF LOCATION FLOWLINE ABANDONMENT

Date: 12/18/2018

Description of Abandonment

Flowline flow-filled and abandoned in place during the plugging operations of the SEGL 2 well.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462368 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.386130 Longitude: -104.727920 PDOP: 3.5 Measurement Date: 03/15/2017

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 336655 Location Type: Well Site No Location ID

Name: SEGL-65N66W Number: 24SENW

County: WELD

Qtr Qtr: SENW Section: 24 Township: 5N Range: 66W Meridian: 6

Latitude: 40.385760 Longitude: -104.728660

Flowline Start Point Riser

Latitude: 40.385980 Longitude: -104.728660 PDOP: 2.4 Measurement Date: 03/15/2017

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: 11/01/2005

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

OFF LOCATION FLOWLINE REMOVAL FROM SERVICE

Date: _____

Description of Removal from Service

FLOWLINE FACILITY INFORMATIONFlowline Facility ID: 462361 Flowline Type: Wellhead Line Action Type: Abandonment**OFF LOCATION FLOWLINE REGISTRATION****Flowline End Point Riser**Latitude: 40.386130 Longitude: -104.727920 PDOP: 3.5 Measurement Date: 03/09/2017Equipment at End Point Riser: Separator**Flowline Start Point Location Identification**Location ID: 332973 Location Type: _____ Well Site _____ No Location IDName: SEGL-65N66W Number: 24SENWCounty: WELDQtr Qtr: SENW Section: 24 Township: 5N Range: 66W Meridian: 6Latitude: 40.386150 Longitude: -104.728360**Flowline Start Point Riser**Latitude: 40.386140 Longitude: -104.728370 PDOP: 2.2 Measurement Date: 03/09/2017Equipment at Start Point Riser: Well**Flowline Description and Testing**

Type of Fluid Transferred: _____ Pipe Material: _____ Max Outer Diameter:(Inches) _____

Bedding Material: _____ Date Construction Completed: 10/01/2005

Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____

Test Date: _____

OFF LOCATION FLOWLINE ABANDONMENTDate: 08/09/2018**Description of Abandonment**

Flowline flow-filled and abandoned in place during the plugging operations of the SEGL 3-24 well.

FLOWLINE FACILITY INFORMATIONFlowline Facility ID: 462363 Flowline Type: Wellhead Line Action Type: _____**OFF LOCATION FLOWLINE REGISTRATION****Flowline End Point Riser**Latitude: 40.386050 Longitude: -104.727920 PDOP: 3.3 Measurement Date: 03/15/2017Equipment at End Point Riser: Separator**Flowline Start Point Location Identification**Location ID: 336655 Location Type: _____ Well Site _____ No Location IDName: SEGL-65N66W Number: 24SENWCounty: WELD

Qtr Qtr: SENW Section: 24 Township: 5N Range: 66W Meridian: 6
Latitude: 40.385760 Longitude: -104.728660

Flowline Start Point Riser

Latitude: 40.385760 Longitude -104.728630 PDOP: 3.1 Measurement Date: 03/15/2017
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: 10/20/2005
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE REMOVAL FROM SERVICE

Date: _____

Description of Removal from Service

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462365 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.386130 Longitude: -104.727940 PDOP: 3.5 Measurement Date: 03/09/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 336655 Location Type: _____ Well Site No Location ID
Name: SEGL-65N66W Number: 24SENW
County: WELD
Qtr Qtr: SENW Section: 24 Township: 5N Range: 66W Meridian: 6
Latitude: 40.385760 Longitude: -104.728660

Flowline Start Point Riser

Latitude: 40.385510 Longitude -104.728610 PDOP: 2.5 Measurement Date: 03/09/2017
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: 12/01/2006
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

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: 02/27/2019 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: _____

Attachment Check List

Att Doc Num

Name

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files