

State of Colorado
Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:

03/01/2019

Document Number:

401954149

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: 10071 Contact Person: Michael Clancy
Company Name: HIGHPOINT OPERATING CORPORATION Phone: (208) 5968194
Address: 1099 18TH ST STE 2300 Email: michael@ecopoint-inc.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: 445083 Location Type: Production Facilities
Name: Mandy Section 28 Battery Location Number:
County: WELD
Qtr Qtr: SESE Section: 28 Township: 1N Range: 64W Meridian: 6
Latitude: 40.015178 Longitude: -104.548556

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462735 Flowline Type: Wellhead Line Action Type: Abandonment

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.015558 Longitude: -104.548724 PDOP: 1.4 Measurement Date: 09/08/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 319062 Location Type: Well Site [] No Location ID
Name: MANDY-61N64W Number: 28NESE
County: WELD
Qtr Qtr: NESE Section: 28 Township: 1N Range: 64W Meridian: 6
Latitude: 40.020436 Longitude: -104.548784

Flowline Start Point Riser

Latitude: 40.020533 Longitude: -104.548783 PDOP: 2.2 Measurement Date: 08/02/2018
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 03/06/1989
Maximum Anticipated Operating Pressure (PSI): 125 Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE ABANDONMENT

Date: 06/04/2018

Description of Abandonment

Well has been P&A'd, flowline abandonment filed upon approval of Form 44 registration.

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: 03/01/2019 Email: michael@ecopoint-inc.com
Print Name: Michael Clancy Title: consultant

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: 3/6/2019

Attachment Check List

Att Doc Num	Name
401954149	Form44 Submitted

Total Attach: 1 Files