

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:

03/14/2019

Document Number:

401964472

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: 96155 Contact Person: Cara Mezydlo
Company Name: WHITING OIL & GAS CORPORATION Phone: (303) 876-7091
Address: 1700 BROADWAY STE 2300 Email: cara.mezydlo@whiting.com
City: DENVER State: CO Zip: 80290
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: 315010 Location Type: Well Site
Name: MANIFOLD FEDERAL-61N101W Number: 6LOT30
County: RIO BLANCO
Qtr Qtr: LOT 30 Section: 6 Township: 1N Range: 101W Meridian: 6
Latitude: 40.085600 Longitude: -108.780270

FLOWLINE FACILITY INFORMATION

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

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

Latitude: 40.085600 Longitude: -108.780270 PDOP: 3.0 Measurement Date: 05/15/2017
Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 315010 Location Type: Well Site ☐ No Location ID
Name: FEDERAL-61N101W Number: 6SWNW
County: RIO BLANCO
Qtr Qtr: SWNW Section: 6 Township: 1N Range: 101W Meridian: 6
Latitude: 40.085860 Longitude: -108.779850

Flowline Start Point Riser

Latitude: 40.085840 Longitude: -108.779910 PDOP: 3.0 Measurement Date: 05/17/2017
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: Sand Date Construction Completed: 12/31/1983
Maximum Anticipated Operating Pressure (PSI): 30 Testing PSI: 114
Test Date: 05/16/2018

FLOWLINE FACILITY INFORMATION

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

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

Latitude: 40.085600 Longitude: -108.780270 PDOP: 3.0 Measurement Date: 05/15/2017
Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 315117 Location Type: Well Site ☐ No Location ID
Name: FEDERAL-61N101W Number: 6NWSW
County: RIO BLANCO
Qtr Qtr: NWSW Section: 6 Township: 1N Range: 101W Meridian: 6
Latitude: 40.083250 Longitude: -108.779740

Flowline Start Point Riser

Latitude: 40.083300 Longitude: -108.779720 PDOP: 3.0 Measurement Date: 05/17/2017
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Fiberglass Max Outer Diameter:(Inches) 2.875
Bedding Material: Sand Date Construction Completed: 12/31/1983
Maximum Anticipated Operating Pressure (PSI): 30 Testing PSI: 101
Test Date: 05/12/2018

OPERATOR COMMENTS AND SUBMITTAL

Comments

Registering off location line in preparation for upcoming flowline modifications accompanying upcoming well plugging work. Attached flowline layout drawing shows all lines in the system. This registration covers segments from the Federal 12-6 well (loc 315117) and Federal 1 well (loc 315010) to the manifold they feed into. The manifold does not have a location ID yet, and this is the same manifold described on Document 401947825. The manifold on both these documents should be given the same location ID, when it is assigned.

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

Signed: _____ Date: 03/14/2019 Email: cara.mezydlo@whiting.com

Print Name: Cara Mezydlo Title: Engineering Tech

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

<u>Att Doc Num</u>	<u>Name</u>
401965507	PRESSURE TEST
401972708	PRESSURE TEST
401972709	LAYOUT DRAWING-ACTUAL
401972711	OFF-LOCATION FLOWLINE GEODATABASE KML
Total Attach: 4 Files	