

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:

04/10/2019

Document Number:

402003054

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: 10633 Contact Person: Schuyler Hamilton
Company Name: CRESTONE PEAK RESOURCES OPERATING LLC Phone: (303) 774-4017
Address: 1801 CALIFORNIA STREET #2500 Email: Schuyler.Hamilton@Crestonepr.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 ☒ No ☐

OFF LOCATION FLOWLINE**FLOWLINE ENDPOINT LOCATION IDENTIFICATION**

Location ID: 421058 Location Type: Production Facilities
Name: HERREN 63N67W Number: 6-0-33 PAD
County: WELD
Qtr Qtr: NENE Section: 33 Township: 3N Range: 67W Meridian: 6
Latitude: 40.188800 Longitude: -104.886860

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 459790 Flowline Type: Wellhead Line Action Type:

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

Latitude: 40.189133 Longitude: -104.887015 PDOP: Measurement Date: 10/02/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 331341 Location Type: Well Site ☐ No Location ID
Name: HERREN-63N67W Number: 33SWNE
County: WELD
Qtr Qtr: SWNE Section: 33 Township: 3N Range: 67W Meridian: 6
Latitude: 40.183436 Longitude: -104.893674

Flowline Start Point Riser

Latitude: 40.183551 Longitude: -104.893459 PDOP: Measurement Date: 09/25/2018
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: _____ Date Construction Completed: 02/01/2009
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE REMOVAL FROM SERVICE

Date: 12/26/2018

Description of Removal from Service

Pipe was disconnected from wellhead and separator. Flowline was flushed with 25bbls fresh water prior to removal.
Line was completely removed.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462464 Flowline Type: Wellhead Line Action Type: Abandonment

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

Latitude: 40.189112 Longitude: -104.887018 PDOP: 2.7 Measurement Date: 01/17/2019

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 331740 Location Type: _____ Well Site ☐ No Location ID

Name: HERREN-63N67W

Number: 33NWNE

County: WELD

Qtr Qtr: NWNE Section: 33 Township: 3N Range: 67W Meridian: 6

Latitude: 40.188106 Longitude: -104.893604

Flowline Start Point Riser

Latitude: 40.188214 Longitude: -104.893412 PDOP: 1.0 Measurement Date: 01/16/2019

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: _____ Date Construction Completed: 02/27/2009
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE ABANDONMENT

Date: 03/25/2019

Description of Abandonment

Pipe was disconnected from wellhead and separator. Flowline was flushed with 25bbls fresh water prior to removal.
Line was completely removed.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462465 Flowline Type: Wellhead Line Action Type: Abandonment

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

Latitude: 40.189111 Longitude: -104.887015 PDOP: 1.4 Measurement Date: 01/17/2019

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 330338 Location Type: Well Site ☐ No Location ID

Name: HERREN-63N67W Number: 33NENE

County: WELD

Qtr Qtr: NENE Section: 33 Township: 3N Range: 67W Meridian: 6

Latitude: 40.187926 Longitude: -104.887803

Flowline Start Point Riser

Latitude: 40.188089 Longitude: -104.887615 PDOP: 0.9 Measurement Date: 01/17/2019

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: Date Construction Completed: 04/04/1995

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

OFF LOCATION FLOWLINE ABANDONMENT

Date: 03/25/2019

Description of Abandonment

Pipe was disconnected from wellhead and separator. Flowline was flushed with 25bbls fresh water prior to removal. Line was completely removed.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 459789 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.189133 Longitude: -104.887015 PDOP: Measurement Date: 10/02/2018

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 331342 Location Type: Well Site ☐ No Location ID

Name: Herren Number: 33H-H367 Pad

County: WELD

Qtr Qtr: SENE Section: 33 Township: 3N Range: 67W Meridian: 6

Latitude: 40.183205 Longitude: -104.887167

Flowline Start Point Riser

Latitude: 40.183516 Longitude: -104.887389 PDOP: Measurement Date: 09/25/2018

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: _____ Date Construction Completed: 03/24/2008
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE REMOVAL FROM SERVICE

Date: 12/26/2018

Description of Removal from Service

Pipe was disconnected from wellhead and separator. Flowline was flushed with 25bbls fresh water prior to removal.
Line was completely removed.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 459788 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.189133 Longitude: -104.887015 PDOP: _____ Measurement Date: 10/02/2018

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 318301 Location Type: _____ Well Site ☐ No Location ID

Name: HERREN-63N67W Number: 33SENE

County: WELD

Qtr Qtr: SENE Section: 33 Township: 3N Range: 67W Meridian: 6

Latitude: 40.185066 Longitude: -104.889994

Flowline Start Point Riser

Latitude: 40.185175 Longitude: -104.889722 PDOP: _____ Measurement Date: 10/02/2018

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 3.000

Bedding Material: _____ Date Construction Completed: 03/15/1977

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

Test Date: _____

OFF LOCATION FLOWLINE REMOVAL FROM SERVICE

Date: 12/26/2018

Description of Removal from Service

Pipe was disconnected from wellhead and separator. Flowline was flushed with 25bbls fresh water prior to removal.
Line was completely removed.

OPERATOR COMMENTS AND SUBMITTAL

Comments Abandonment of 2 flowlines. Other flowlines (Flowline Facility ID: 459788, 458789, 459790) were previously abandoned under Form 44 # 401902245.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.
Signed: _____ Date: 04/10/2019 Email: Schuyler.Hamilton@Crestonepr.com

Print Name: Schuyler Hamilton Title: EHS Field Technician

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>
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Total Attach: 0 Files