

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

05/15/2019

Document Number:

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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: 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 [X] No [ ]

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 446941 Location Type: Production Facilities
Name: BAILEY Number: 31-12
County: BOULDER
Qtr Qtr: NWNE Section: 12 Township: 1N Range: 69W Meridian: 6
Latitude: 40.071152 Longitude: -105.064351

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.070948 Longitude: -105.064336 PDOP: 0.9 Measurement Date: 04/23/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 414720 Location Type: Well Site [ ] No Location ID
Name: BAILEY Number: 31-12
County: BOULDER
Qtr Qtr: NWNE Section: 12 Township: 1N Range: 69W Meridian: 6
Latitude: 40.071270 Longitude: -105.062600

Flowline Start Point Riser

Latitude: 40.071270 Longitude: -105.062671 PDOP: 4.8 Measurement Date: 04/22/2019
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: \_\_\_\_\_ Date Construction Completed: 11/19/2010  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

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

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.070944 Longitude: -105.064337 PDOP: 0.9 Measurement Date: 04/23/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 414720 Location Type: \_\_\_\_\_ Well Site  No Location ID  
Name: BAILEY Number: 31-12  
County: BOULDER  
Qtr Qtr: NWNE Section: 12 Township: 1N Range: 69W Meridian: 6  
Latitude: 40.071270 Longitude: -105.062600

**Flowline Start Point Riser**

Latitude: 40.071273 Longitude -105.062632 PDOP: 2.9 Measurement Date: 04/22/2019  
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: \_\_\_\_\_ Date Construction Completed: 05/19/2008  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**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: 05/15/2019 Email: Costin.McQueen@Crestonepr.com  
Print Name: Costin McQueen Title: Environmental 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**

**Att Doc Num**      **Name**

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

Total Attach: 0 Files