

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:

05/10/2019

Document Number:

401921497

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: Kyle Waggoner
Company Name: WHITING OIL & GAS CORPORATION Phone: (970) 437-4113
Address: 1700 BROADWAY STE 2300 Email: kyle.waggoner@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 [X] No []

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 435644 Location Type: Well Site
Name: Razor Number: 11F Pad
County: WELD
Qtr Qtr: SENW Section: 11 Township: 10N Range: 58W Meridian: 6
Latitude: 40.854011 Longitude: -103.835472

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 464992 Flowline Type: Peripheral Piping Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.854698 Longitude: -103.834568 PDOP: Measurement Date: 11/02/2018
Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 436611 Location Type: Production Facilities [] No Location ID
Name: Razor Number: 11 Production
County: WELD
Qtr Qtr: SWNE Section: 11 Township: 10N Range: 58W Meridian: 6
Latitude: 40.854164 Longitude: -103.832767

Flowline Start Point Riser

Latitude: 40.853774 Longitude: -103.832505 PDOP: Measurement Date: 11/02/2018
Equipment at Start Point Riser: Manifold

Flowline Description and Testing

Type of Fluid Transferred: Natural Gas Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 6.625
Bedding Material: Native Materials Date Construction Completed: 05/30/2015
Maximum Anticipated Operating Pressure (PSI): 1100 Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 464993 Flowline Type: Peripheral Piping Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.854785 Longitude: -103.834581 PDOP: _____ Measurement Date: 11/02/2018
Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 436611 Location Type: Production Facilities No Location ID
Name: Razor Number: 11 Production
County: WELD
Qtr Qtr: SWNE Section: 11 Township: 10N Range: 58W Meridian: 6
Latitude: 40.854164 Longitude: -103.832767

Flowline Start Point Riser

Latitude: 40.853774 Longitude -103.832505 PDOP: _____ Measurement Date: 11/02/2018
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Maximum Anticipated Operating Pressure (PSI): 1100 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: 05/10/2019 Email: kyle.waggoner@whiting.com

Print Name: Kyle Waggoner Title: Field Regulatory Manager

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: 6/5/2019

Attachment Check List

Att Doc Num	Name
401921497	Form44 Submitted
402039406	FLOWLINE LAYOUT DRAWING

Total Attach: 2 Files