

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:

05/31/2019

Document Number:

401942456

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: 433131 Location Type: Well Site
Name: Razor Number: 26J Pad
County: WELD
Qtr Qtr: NWSE Section: 26 Township: 10N Range: 58W Meridian: 6
Latitude: 40.809111 Longitude: -103.830547

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.807987 Longitude: -103.830734 PDOP: Measurement Date: 11/06/2018
Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 435421 Location Type: Production Facilities [] No Location ID
Name: Razor Number: 26 Production
County: WELD
Qtr Qtr: NESW Section: 26 Township: 10N Range: 58W Meridian: 6
Latitude: 40.808739 Longitude: -103.836811

Flowline Start Point Riser

Latitude: 40.808357 Longitude: -103.836620 PDOP: Measurement Date: 05/29/2019
Equipment at Start Point Riser: Manifold

Flowline Description and Testing

Type of Fluid Transferred: Natural Gas Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 8.625
Bedding Material: Native Materials Date Construction Completed: 09/12/2014
Maximum Anticipated Operating Pressure (PSI): 1200 Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.807987 Longitude: -103.830760 PDOP: _____ Measurement Date: 11/06/2018
Equipment at End Point Riser: Manifold

Flowline Start Point Location Identification

Location ID: 435421 Location Type: Production Facilities No Location ID
Name: Razor Number: 26 Production
County: WELD
Qtr Qtr: NESW Section: 26 Township: 10N Range: 58W Meridian: 6
Latitude: 40.808739 Longitude: -103.836811

Flowline Start Point Riser

Latitude: 40.808357 Longitude -103.836620 PDOP: _____ Measurement Date: 05/29/2019
Equipment at Start Point Riser: Manifold

Flowline Description and Testing

Type of Fluid Transferred: Natural Gas Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 8.625
Bedding Material: Native Materials Date Construction Completed: 09/25/2014
Maximum Anticipated Operating Pressure (PSI): 1200 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: 05/31/2019 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: _____

Attachment Check List

Att Doc Num **Name**

402060748	FLOWLINE LAYOUT DRAWING
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Total Attach: 1 Files