

State of Colorado
Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:

05/17/2019

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: 10575 Contact Person: Jeff Rickard
Company Name: 8 NORTH LLC Phone: (720) 737-5144
Address: 370 17TH STREET SUITE 5300 Email: Jrickard@extractionog.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: 321260 Location Type: Production Facilities
Name: LYNCH #1 MC Number: 6-9, 10, 15
County: BOULDER
Qtr Qtr: SESE Section: 6 Township: 1N Range: 69W Meridian: 6
Latitude: 40.076340 Longitude: -105.154280

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.076332 Longitude: -105.154282 PDOP: 0.8 Measurement Date: 04/06/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 206890 Location Type: Well Site [] No Location ID
Name: LYNCH MC Number: 6-15
County: BOULDER
Qtr Qtr: SWSE Section: 6 Township: 1N Range: 69W Meridian: 6
Latitude: 40.074530 Longitude: -105.157270

Flowline Start Point Riser

Latitude: 40.074537 Longitude: -105.157262 PDOP: 1.1 Measurement Date: 04/06/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.375
Bedding Material: Native Materials Date Construction Completed: 07/21/1993
Maximum Anticipated Operating Pressure (PSI): 1000 Testing PSI: 495
Test Date: 03/15/2018

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.076335 Longitude: -105.154282 PDOP: 0.8 Measurement Date: 04/06/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 206888 Location Type: _____ Well Site No Location ID
Name: LYNCH MC Number: 6-9
County: BOULDER
Qtr Qtr: NESE Section: 6 Township: 1N Range: 69W Meridian: 6
Latitude: 40.078440 Longitude: -105.152020

Flowline Start Point Riser

Latitude: 40.078448 Longitude -105.152024 PDOP: 1.0 Measurement Date: 04/06/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.375
Bedding Material: Native Materials Date Construction Completed: 08/04/1993
Maximum Anticipated Operating Pressure (PSI): 1000 Testing PSI: 515
Test Date: 03/15/2018

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.076328 Longitude: -105.154282 PDOP: 0.8 Measurement Date: 04/06/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 206889 Location Type: _____ Well Site No Location ID
Name: LYNCH MC Number: 6-10
County: BOULDER
Qtr Qtr: NWSE Section: 6 Township: 1N Range: 69W Meridian: 6
Latitude: 40.077750 Longitude: -105.157720

Flowline Start Point Riser

Latitude: 40.077724 Longitude -105.157711 PDOP: 1.0 Measurement Date: 04/06/2019

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.375
Bedding Material: Native Materials Date Construction Completed: 07/28/1993
Maximum Anticipated Operating Pressure (PSI): 500 Testing PSI: 215
Test Date: 03/15/2018

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.076342 Longitude: -105.154281 PDOP: 1.0 Measurement Date: 04/06/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 206543 Location Type: Well Site No Location ID
Name: LYNCH Number: 1-6
County: BOULDER
Qtr Qtr: SESE Section: 6 Township: 1N Range: 69W Meridian: 6
Latitude: 40.076372 Longitude: -105.153390

Flowline Start Point Riser

Latitude: 40.076375 Longitude -105.153402 PDOP: 1.0 Measurement Date: 04/06/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.750
Bedding Material: Native Materials Date Construction Completed: 09/07/1980
Maximum Anticipated Operating Pressure (PSI): 500 Testing PSI: 160
Test Date: 03/15/2018

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: 05/17/2019 Email: Emartinez@h2eincorporated.com

Print Name: Emily Martinez Title: Enivornmental Scientist

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>
402047917	PRESSURE TEST
402047920	PRESSURE TEST
402047921	PRESSURE TEST
402047922	PRESSURE TEST

Total Attach: 4 Files