

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: 06/17/2019

Document Number: 402076875

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: 8960 Contact Person: Fred Kayser
Company Name: BONANZA CREEK ENERGY OPERATING COMPANY LLC Phone: (303) 3356904
Address: 410 17TH STREET SUITE #1400 Email: fkayser@bonanzacrck.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: 319214 Location Type: Production Facilities
Name: Champlin Number: 1-9 Pad
County: WELD
Qtr Qtr: SESE Section: 9 Township: 4N Range: 63W Meridian: 6
Latitude: 40.321220 Longitude: -104.436140

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 463242 Flowline Type: Wellhead Line Action Type: Abandonment

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.321059 Longitude: -104.436510 PDOP: Measurement Date: 02/26/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 419302 Location Type: Well Site [ ] No Location ID
Name: GUTTERSEN RANCH Number: 9I
County: WELD
Qtr Qtr: NWSE Section: 9 Township: 4N Range: 63W Meridian: 6
Latitude: 40.323000 Longitude: -104.438530

Flowline Start Point Riser

Latitude: 40.323021 Longitude: -104.438523 PDOP: Measurement Date: 02/26/2019
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.500  
Bedding Material: Native Materials Date Construction Completed: 06/16/2010  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OFF LOCATION FLOWLINE ABANDONMENT**

Date: 06/12/2019

**Description of Abandonment**

\_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 463241 Flowline Type: Wellhead Line Action Type: Abandonment

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.321097 Longitude: -104.436489 PDOP: \_\_\_\_\_ Measurement Date: 02/26/2019

Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 309968 Location Type: \_\_\_\_\_ Well Site  No Location ID

Name: Guttersen Ranch Number: 34-9 Pad

County: WELD

Qtr Qtr: SWSE Section: 9 Township: 4N Range: 63W Meridian: 6

Latitude: 40.321560 Longitude: -104.441330

**Flowline Start Point Riser**

Latitude: 40.321592 Longitude -104.441356 PDOP: \_\_\_\_\_ Measurement Date: 02/26/2019

Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.500  
Bedding Material: Native Materials Date Construction Completed: 07/27/2008  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OFF LOCATION FLOWLINE ABANDONMENT**

Date: 06/12/2019

**Description of Abandonment**

\_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 463240 Flowline Type: Wellhead Line Action Type: Abandonment

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.321059 Longitude: -104.436510 PDOP: \_\_\_\_\_ Measurement Date: 02/26/2019

Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 309967 Location Type: Well Site  No Location ID  
Name: Guttersen Ranch Number: 43-9 Pad  
County: WELD  
Qtr Qtr: NESE Section: 9 Township: 4N Range: 63W Meridian: 6  
Latitude: 40.324640 Longitude: -104.436140

**Flowline Start Point Riser**

Latitude: 40.324656 Longitude: -104.436142 PDOP: Measurement Date: 02/26/2019  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.500  
Bedding Material: Native Materials Date Construction Completed: 07/07/2008  
Maximum Anticipated Operating Pressure (PSI): Testing PSI:  
Test Date:

**OFF LOCATION FLOWLINE ABANDONMENT**

Date: 06/12/2019

**Description of Abandonment**

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 463243 Flowline Type: Wellhead Line Action Type: Abandonment

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.321059 Longitude: -104.436510 PDOP: Measurement Date: 02/26/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 309966 Location Type: Well Site  No Location ID  
Name: Guttersen Ranch Number: 33-9 Pad  
County: WELD  
Qtr Qtr: NWSE Section: 9 Township: 4N Range: 63W Meridian: 6  
Latitude: 40.325310 Longitude: -104.440920

**Flowline Start Point Riser**

Latitude: 40.325306 Longitude: -104.440946 PDOP: Measurement Date: 02/26/2019  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.500  
Bedding Material: Native Materials Date Construction Completed: 07/15/2008  
Maximum Anticipated Operating Pressure (PSI):

Test Date: \_\_\_\_\_

**OFF LOCATION FLOWLINE ABANDONMENT**

Date: 06/12/2019

**Description of Abandonment**

\_\_\_\_\_

**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: 06/17/2019 Email: fkayser@bonanzacrck.com

Print Name: Fred Kayser Title: EHS Specialist

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: 6/17/2019

**Attachment Check List**

<b>Att Doc Num</b>	<b>Name</b>
402076875	Form44 Submitted
402076893	LAYOUT DRAWING-ACTUAL

Total Attach: 2 Files