

State of Colorado  
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

Receive Date:

07/15/2019

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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 ☒ No ☐

**OFF LOCATION FLOWLINE****FLOWLINE ENDPOINT LOCATION IDENTIFICATION**

Location ID: 322976 Location Type: Production Facilities  
Name: Rasmussen Facilities Pad Number: 19H-M268  
County: WELD  
Qtr Qtr: SWSW Section: 19 Township: 2N Range: 68W Meridian: 6  
Latitude: 40.119235 Longitude: -105.050730

**FLOWLINE FACILITY INFORMATION**

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

**OFF LOCATION FLOWLINE REGISTRATION****Flowline End Point Riser**

Latitude: 40.119513 Longitude: -105.052178 PDOP: 2.7 Measurement Date: 05/13/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 336073 Location Type: Well Site ☐ No Location ID  
Name: RASMUSSEN-62N68W Number: 19NESW  
County: WELD  
Qtr Qtr: NESW Section: 19 Township: 2N Range: 68W Meridian: 6  
Latitude: 40.122420 Longitude: -105.047830

**Flowline Start Point Riser**

Latitude: 40.122429 Longitude: -105.047848 PDOP: 4.3 Measurement Date: 05/13/2019  
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: 11/16/1995  
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: 40.119513 Longitude: -105.052146 PDOP: 2.9 Measurement Date: 05/13/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 330350 Location Type: \_\_\_\_\_ Well Site ☐ No Location ID  
Name: RASMUSSEN-62N68W Number: 19SESW  
County: WELD  
Qtr Qtr: SESW Section: 19 Township: 2N Range: 68W Meridian: 6  
Latitude: 40.117986 Longitude: -105.048038

**Flowline Start Point Riser**

Latitude: 40.117972 Longitude: -105.047985 PDOP: 4.0 Measurement Date: 05/13/2019  
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: 05/11/1995  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OPERATOR COMMENTS AND SUBMITTAL**

Comments

Rasmussen 19-14 Flowline Registration 12318943\_FL  
Rasmussen 19-11 Flowline Registration 12318994\_FL

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

Signed: \_\_\_\_\_ Date: 07/15/2019 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**

| <u>Att Doc Num</u> | <u>Name</u> |
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Total Attach: 0 Files