

State of Colorado Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date: 07/17/2019

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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 [X] No []

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 311412 Location Type: Production Facilities
Name: MCCOY NWSW MULTI-WELL PAD Number: 0-6-5
County: WELD
Qtr Qtr: NWSW Section: 5 Township: 2N Range: 67W Meridian: 6
Latitude: 40.166300 Longitude: -104.921110

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.167260 Longitude: -104.920968 PDOP: 4.1 Measurement Date: 05/30/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 311412 Location Type: Well Site [] No Location ID
Name: MCCOY NWSW MULTI-WELL PAD Number: 0-6-5
County: WELD
Qtr Qtr: NWSW Section: 5 Township: 2N Range: 67W Meridian: 6
Latitude: 40.166300 Longitude: -104.921110

Flowline Start Point Riser

Latitude: 40.166245 Longitude: -104.921126 PDOP: 3.2 Measurement Date: 05/30/2019
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: 05/01/1998
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: 40.167282 Longitude: -104.920956 PDOP: 2.9 Measurement Date: 06/20/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 311412 Location Type: _____ Well Site No Location ID
Name: MCCOY NWSW MULTI-WELL PAD Number: 0-6-5
County: WELD
Qtr Qtr: NWSW Section: 5 Township: 2N Range: 67W Meridian: 6
Latitude: 40.166300 Longitude: -104.921110

Flowline Start Point Riser

Latitude: 40.166373 Longitude -104.920945 PDOP: 5.4 Measurement Date: 05/30/2019
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: 11/06/2007
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: 40.167261 Longitude: -104.920960 PDOP: 2.0 Measurement Date: 05/30/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 331828 Location Type: _____ Well Site No Location ID
Name: MCCOY-62N67W Number: 5SESW
County: WELD
Qtr Qtr: SESW Section: 5 Township: 2N Range: 67W Meridian: 6
Latitude: 40.161436 Longitude: -104.916084

Flowline Start Point Riser

Latitude: 40.161567 Longitude -104.915787 PDOP: 3.8 Measurement Date: 05/30/2019

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: 03/10/2008

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: 40.167260 Longitude: -104.920956 PDOP: 1.7 Measurement Date: 05/30/2019

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 318173 Location Type: Well Site No Location ID

Name: MCCOY-62N67W Number: 5SESW

County: WELD

Qtr Qtr: SESW Section: 5 Township: 2N Range: 67W Meridian: 6

Latitude: 40.162856 Longitude: -104.918034

Flowline Start Point Riser

Latitude: 40.163086 Longitude -104.917772 PDOP: 4.9 Measurement Date: 05/30/2019

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: 04/24/1976

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 465540 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.167260 Longitude: -104.920960 PDOP: 2.4 Measurement Date: 04/25/2019

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 331827 Location Type: Well Site No Location ID

Name: MCCOY-62N67W Number: 5SWSW

County: WELD

Qtr Qtr: SWSW Section: 5 Township: 2N Range: 67W Meridian: 6
Latitude: 40.161516 Longitude: -104.922214

Flowline Start Point Riser

Latitude: 40.161662 Longitude -104.921870 PDOP: 2.0 Measurement Date: 05/08/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 3.000
Bedding Material: _____ Date Construction Completed: 03/11/2008
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE REMOVAL FROM SERVICE

Date: _____

Description of Removal from Service

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.167268 Longitude: -104.920948 PDOP: 5.4 Measurement Date: 05/30/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 331826 Location Type: _____ Well Site No Location ID
Name: MCCOY-62N67W Number: 5NESW
County: WELD
Qtr Qtr: NESW Section: 5 Township: 2N Range: 67W Meridian: 6
Latitude: 40.165976 Longitude: -104.916234

Flowline Start Point Riser

Latitude: 40.166140 Longitude -104.915949 PDOP: 2.3 Measurement Date: 05/30/2019
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: 02/29/2008
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL

Comments

Flowline Facility ID: 465540 McCoy 14-5 Previously Registered
McCoy 13-5 Flowline Registration 12319570_FL
McCoy 24-5 Flowline Registration 12321359_FL
McCoy 23-5 Flowline Registration 12321357_FL
McCoy 1 Flowline Registration 12308562_FL
McCoy 2-4-5 Flowline Registration 12324365_FL

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.
Signed: _____ Date: 07/17/2019 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

Att Doc Num	Name

Total Attach: 0 Files