

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:

07/25/2019

Document Number:

402120635

## 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: 69175 Contact Person: Jenifer Hakkarinen  
Company Name: PDC ENERGY INC Phone: (303) 8605800  
Address: 1775 SHERMAN STREET - STE 3000 Email: Jenifer.Hakkarinen@pdce.com  
City: DENVER State: CO Zip: 80203  
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: 323178 Location Type: Production Facilities  
Name: LANDAU-65N65W Number: 3NESE  
County: WELD  
Qtr Qtr: NESE Section: 3 Township: 5N Range: 65W Meridian: 6  
Latitude: 40.426325 Longitude: -104.642278

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 466654 Flowline Type: Wellhead Line Action Type: Registration

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

Latitude: 40.425552 Longitude: -104.642100 PDOP: Measurement Date: 01/01/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 323178 Location Type: Well Site ☐ No Location ID  
Name: LANDAU-65N65W Number: 3NESE  
County: WELD  
Qtr Qtr: NESE Section: 3 Township: 5N Range: 65W Meridian: 6  
Latitude: 40.426325 Longitude: -104.642278

**Flowline Start Point Riser**

Latitude: 40.426243 Longitude: -104.642120 PDOP: Measurement Date: 01/01/2019  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: \_\_\_\_\_ Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000  
Bedding Material: Native Materials Date Construction Completed: 01/07/1986  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ 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: 07/25/2019 Email: Jenifer.Hakkarinen@pdce.com

Print Name: Jenifer Hakkarinen Title: Reg Tech

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: 8/13/2019

**Attachment Check List****Att Doc Num****Name**

402120635	Form44 Submitted
402121514	AERIAL PHOTO

Total Attach: 2 Files