

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:

08/19/2019

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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: 466610 Location Type: Production Facilities  
Name: LOCHBUIE-61N65W-Facility Number: 31NWNW  
County: WELD  
Qtr Qtr: NWNW Section: 31 Township: 1N Range: 65W Meridian: 6  
Latitude: 40.014448 Longitude: -104.711047

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 466611 Flowline Type: Wellhead Line Action Type: Abandonment

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

Latitude: 40.014448 Longitude: -104.711047 PDOP: 5.7 Measurement Date: 04/19/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 332072 Location Type: Well Site ☐ No Location ID  
Name: LOCHBUIE-61N65W Number: 31NENW  
County: WELD  
Qtr Qtr: NENW Section: 31 Township: 1N Range: 65W Meridian: 6  
Latitude: 40.013789 Longitude: -104.709196

**Flowline Start Point Riser**

Latitude: 40.013757 Longitude: -104.709235 PDOP: 1.7 Measurement Date: 04/09/2019  
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: 02/13/2004  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OFF LOCATION FLOWLINE ABANDONMENT**

Date: 05/20/2019

**Description of Abandonment**

Flowline was disconnected from wellhead and from separator. Flowline was flushed with 25bbls fresh water prior to removal. Flowline was verified free of hydro carbons with LEL monitor. Flowline was completely removed from ground.

**OPERATOR COMMENTS AND SUBMITTAL**

Comments Flowline Facility ID: 466611 Operator ID: 12321798\_FL Lochbuie 21-31 Flowline Abandonment

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

Signed: \_\_\_\_\_ Date: 08/19/2019 Email: Schuyler.Hamilton@Crestonepr.com

Print Name: Schuyler Hamilton Title: EHS Field 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**

402148956	Form44 Submitted
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Total Attach: 1 Files