

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

Document Number:

402148956

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: 8/20/2019

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

402148956	Form44 Submitted
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Total Attach: 1 Files