

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION Receive Date: 09/03/2019 Document Number: 402163107

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 Hakarinen Company Name: PDC ENERGY INC Phone: (303) 860-5800 Address: 1775 SHERMAN STREET - STE 3000 Email: Jenifer.hakarinen@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 [X] No []

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 332831 Location Type: Production Facilities Name: BOOTH-64N64W Number: 35SEW County: WELD Qtr Qtr: SENW Section: 35 Township: 4N Range: 64W Meridian: 6 Latitude: 40.271940 Longitude: -104.522420

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 470555 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.272218 Longitude: -104.522153 PDOP: Measurement Date: 06/30/2017 Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 332831 Location Type: Well Site [] No Location ID Name: BOOTH-64N64W Number: 35SEW County: WELD Qtr Qtr: SENW Section: 35 Township: 4N Range: 64W Meridian: 6 Latitude: 40.271940 Longitude: -104.522420

Flowline Start Point Riser

Latitude: 40.271960 Longitude: -104.522431 PDOP: Measurement Date: 06/30/2017 Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Crude Oil Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 10/12/2008
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 470556 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.272218 Longitude: -104.522153 PDOP: _____ Measurement Date: 06/30/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 332831 Location Type: _____ Well Site No Location ID
Name: BOOTH-64N64W Number: 35SEW
County: WELD
Qtr Qtr: SEW Section: 35 Township: 4N Range: 64W Meridian: 6
Latitude: 40.271940 Longitude: -104.522420

Flowline Start Point Riser

Latitude: 40.272019 Longitude -104.522431 PDOP: _____ Measurement Date: 06/30/2017
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Crude Oil Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 10/08/2008
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 470557 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.272218 Longitude: -104.522153 PDOP: _____ Measurement Date: 06/30/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 306644 Location Type: _____ Well Site No Location ID
Name: BOOTH-64N64W Number: 35NWNW
County: WELD
Qtr Qtr: NWNW Section: 35 Township: 4N Range: 64W Meridian: 6
Latitude: 40.273920 Longitude: -104.525920

Flowline Start Point Riser

Latitude: 40.273913 Longitude -104.525910 PDOP: Measurement Date: 06/30/2017

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Crude Oil Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000

Bedding Material: Native Materials Date Construction Completed: 11/25/2007

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 470558 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.272218 Longitude: -104.522153 PDOP: Measurement Date: 06/30/2017

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 306646 Location Type: Well Site No Location ID

Name: BOOTH-64N64W Number: 35SEW

County: WELD

Qtr Qtr: SENW Section: 35 Township: 4N Range: 64W Meridian: 6

Latitude: 40.270330 Longitude: -104.520470

Flowline Start Point Riser

Latitude: 40.270330 Longitude -104.520470 PDOP: Measurement Date: 06/30/2017

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Crude Oil Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000

Bedding Material: Native Materials Date Construction Completed: 10/04/2008

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 470559 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.272218 Longitude: -104.522153 PDOP: Measurement Date: 06/30/2017

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 306645 Location Type: Well Site No Location ID

Name: BOOTH-64N64W Number: 35NENW

County: WELD

Qtr Qtr: NENW Section: 35 Township: 4N Range: 64W Meridian: 6
Latitude: 40.273920 Longitude: -104.520500

Flowline Start Point Riser

Latitude: 40.273925 Longitude -104.520473 PDOP: _____ Measurement Date: 06/30/2017
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Crude Oil Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 11/30/2007
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: 09/03/2019 Email: Jenifer.hakarinen@pdce.com

Print Name: Jenifer Hakarinen 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: 1/7/2020

Attachment Check List

Att Doc Num	Name
402163107	Form44 Submitted
402164607	AERIAL PHOTO

Total Attach: 2 Files