

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: 09/05/2019 Document Number: 402157393

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: 10311 Contact Person: Christi Ng Company Name: SRC ENERGY INC Phone: (720) 616.4300 Address: 1675 BROADWAY SUITE 2600 Email: cng@srcenergy.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: 467491 Location Type: Production Facilities Name: BOOTH-65N67W Number: 25SWNE County: WELD Qtr Qtr: SWNE Section: 25 Township: 5N Range: 67W Meridian: 6 Latitude: 40.377396 Longitude: -104.834462

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 470638 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.377370 Longitude: -104.834477 PDOP: 0.9 Measurement Date: 07/16/2019 Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 329451 Location Type: Well Site [] No Location ID Name: BOOTH-65N67W Number: 25SENE County: WELD Qtr Qtr: SENE Section: 25 Township: 5N Range: 67W Meridian: 6 Latitude: 40.371892 Longitude: -104.835275

Flowline Start Point Riser

Latitude: 40.371890 Longitude: -104.835258 PDOP: 1.2 Measurement Date: 07/16/2019 Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: _____ Pipe Material: _____ Max Outer Diameter:(Inches) _____
Bedding Material: _____ Date Construction Completed: 01/10/1993
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 470639 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.377396 Longitude: -104.834462 PDOP: 1.0 Measurement Date: 07/16/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 302301 Location Type: Well Site No Location ID
Name: BOOTH-65N67W Number: 25SWNE
County: WELD
Qtr Qtr: SWNE Section: 25 Township: 5N Range: 67W Meridian: 6
Latitude: 40.374190 Longitude: -104.837330

Flowline Start Point Riser

Latitude: 40.374199 Longitude: -104.837318 PDOP: 1.3 Measurement Date: 07/16/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: _____ Pipe Material: _____ Max Outer Diameter:(Inches) _____
Bedding Material: _____ Date Construction Completed: 10/15/2008
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL

Comments

[Empty text box for operator comments]

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

Signed: _____ Date: 09/05/2019 Email: cng@srcenergy.com

Print Name: Christi Ng Title: Sr. Regulatory Analyst

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**

402157393	Form44 Submitted
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Total Attach: 1 Files