

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:

10/15/2019

Document Number:

402193512

## 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 (CO811) that participates in Colorado's One Call notification system? Yes ☒ No ☐

## OFF LOCATION FLOWLINE

## FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 424858 Location Type: Production Facilities  
Name: Robel Facility Number: 12-28  
County: WELD  
Qtr Qtr: SESW Section: 28 Township: 7N Range: 64W Meridian: 6  
Latitude: 40.537022 Longitude: -104.559367

## FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 472022 Flowline Type: Wellhead Line Action Type: Registration

## OFF LOCATION FLOWLINE REGISTRATION

## Flowline End Point Riser

Latitude: 40.536978 Longitude: -104.559678 PDOP: Measurement Date: 08/22/2019  
Equipment at End Point Riser: Separator

## Flowline Start Point Location Identification

Location ID: 424859 Location Type: Well Site ☐ No Location ID  
Name: Robel 3 Pad Number: 19-28  
County: WELD  
Qtr Qtr: NWSW Section: 28 Township: 7N Range: 64W Meridian: 6  
Latitude: 40.540293 Longitude: -104.561066

## Flowline Start Point Riser

Latitude: 40.540221 Longitude: -104.561059 PDOP: Measurement Date: 08/22/2019  
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: \_\_\_\_\_ Date Construction Completed: 11/03/2011  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 472028 Flowline Type: Wellhead Line Action Type: Registration

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

Latitude: 40.536978 Longitude: -104.559678 PDOP: \_\_\_\_\_ Measurement Date: 08/22/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 424859 Location Type: \_\_\_\_\_ Well Site ☐ No Location ID  
Name: Robel 3 Pad Number: 19-28  
County: WELD  
Qtr Qtr: NWSW Section: 28 Township: 7N Range: 64W Meridian: 6  
Latitude: 40.540293 Longitude: -104.561066

**Flowline Start Point Riser**

Latitude: 40.540301 Longitude: -104.561098 PDOP: \_\_\_\_\_ Measurement Date: 08/22/2019  
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: \_\_\_\_\_ Date Construction Completed: 10/17/2011  
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: 10/15/2019 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: 2/28/2020

**Attachment Check List**

<u>Att Doc Num</u>	<u>Name</u>
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402193512	Form44 Submitted
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402210223	AERIAL PHOTO
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Total Attach: 2 Files