

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:

10/23/2019

Document Number:

402199430

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) 860-5800
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: 323474 Location Type: Production Facilities
Name: PHIL WILSON-65N64W Number: 19SWSE
County: WELD
Qtr Qtr: SWSE Section: 19 Township: 5N Range: 64W Meridian: 6
Latitude: 40.378965 Longitude: -104.590296

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 472746 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.379423 Longitude: -104.590033 PDOP: Measurement Date: 06/30/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 328428 Location Type: Well Site ☐ No Location ID
Name: MOWERY-65N64W Number: 19SESE
County: WELD
Qtr Qtr: SESE Section: 19 Township: 5N Range: 64W Meridian: 6
Latitude: 40.379025 Longitude: -104.585666

Flowline Start Point Riser

Latitude: 40.378889 Longitude: -104.585556 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: _____ Date Construction Completed: 08/20/1992
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 472747 Flowline Type: Wellhead Line Action Type: Registration

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

Latitude: 40.379506 Longitude: -104.589758 PDOP: _____ Measurement Date: 06/30/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 323474 Location Type: _____ Well Site ☐ No Location ID
Name: PHIL WILSON-65N64W Number: 19SWSE
County: WELD
Qtr Qtr: SWSE Section: 19 Township: 5N Range: 64W Meridian: 6
Latitude: 40.378965 Longitude: -104.590296

Flowline Start Point Riser

Latitude: 40.379191 Longitude: -104.590209 PDOP: _____ Measurement Date: 06/30/2017
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: _____ Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000
Bedding Material: Native Materials Date Construction Completed: 07/28/1986
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: 10/23/2019 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: 3/3/2020

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
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402199430	Form44 Submitted
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402218807	AERIAL PHOTO
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Total Attach: 2 Files