

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:

10/03/2019

Document Number:

402197819

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) 7744017
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 (CO811) that participates in Colorado's One Call notification system? Yes ☒ No ☐

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 405923 Location Type: Production Facilities
Name: BARCLAY CRISMAN-63N66W Number: 20SWSW
County: WELD
Qtr Qtr: SWSW Section: 20 Township: 3N Range: 66W Meridian: 6
Latitude: 40.206176 Longitude: -104.806461

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 473036 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATIONFlowline End Point Riser

Latitude: 40.206289 Longitude: -104.806749 PDOP: 3.7 Measurement Date: 07/10/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 336271 Location Type: Well Site ☐ No Location ID
Name: BARCLAY CRISMAN-63N66W Number: 20SESW
County: WELD
Qtr Qtr: SESW Section: 20 Township: 3N Range: 66W Meridian: 6
Latitude: 40.204754 Longitude: -104.803626

Flowline Start Point Riser

Latitude: 40.204762 Longitude: -104.803624 PDOP: 1.3 Measurement Date: 07/10/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000
Bedding Material: _____ Date Construction Completed: 05/06/2007
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL

Comments

Barclay Crisman 2-8-20. 12324110_FL. registration

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

Signed: _____ Date: 10/03/2019 Email: costin.mcqueen@crestonepr.com

Print Name: Costin McQueen Title: Geologist

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: 3/10/2020**Attachment Check List****Att Doc Num****Name**

402197819

Form44 Submitted

Total Attach: 1 Files