

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: 10/21/2019 Document Number: 402215756

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 [X] No [ ]

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 429105 Location Type: Well Site Name: FLANIGAN 61N64W / 6 NWNW Number: 2A-6H County: WELD Qtr Qtr: NWNW Section: 6 Township: 1N Range: 64W Meridian: 6 Latitude: 40.086740 Longitude: -104.599360

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 473261 Flowline Type: Process Piping Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.086752 Longitude: -104.599358 PDOP: 1.2 Measurement Date: 10/16/2019 Equipment at End Point Riser: Well

Flowline Start Point Location Identification

Location ID: 429109 Location Type: Production Facilities [ ] No Location ID Name: FLANIGAN 62N64W / 31 SWSW Number: 2A-6H BATTERY County: WELD Qtr Qtr: SWSW Section: 31 Township: 2N Range: 64W Meridian: 6 Latitude: 40.090410 Longitude: -104.602350

Flowline Start Point Riser

Latitude: 40.089748 Longitude: -104.601816 PDOP: 1.5 Measurement Date: 10/16/2019 Equipment at Start Point Riser: Separator

**Flowline Description and Testing**

Type of Fluid Transferred: Natural Gas Pipe Material: HDPE Max Outer Diameter:(Inches) 1.000  
Bedding Material: \_\_\_\_\_ Date Construction Completed: 11/19/2012  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 473262 Flowline Type: Process Piping Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.086762 Longitude: -104.599462 PDOP: 1.2 Measurement Date: 10/16/2019  
Equipment at End Point Riser: Well

**Flowline Start Point Location Identification**

Location ID: 429109 Location Type: Production Facilities  No Location ID  
Name: FLANIGAN 62N64W / 31 SWSW Number: 2A-6H BATTERY  
County: WELD  
Qtr Qtr: SWSW Section: 31 Township: 2N Range: 64W Meridian: 6  
Latitude: 40.090410 Longitude: -104.602350

**Flowline Start Point Riser**

Latitude: 40.089748 Longitude -104.601816 PDOP: 1.5 Measurement Date: 10/16/2019  
Equipment at Start Point Riser: Separator

**Flowline Description and Testing**

Type of Fluid Transferred: Natural Gas Pipe Material: HDPE Max Outer Diameter:(Inches) 1.000  
Bedding Material: \_\_\_\_\_ Date Construction Completed: 11/19/2012  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OPERATOR COMMENTS AND SUBMITTAL**

Comments 

Flanigan 2A-6H Supply Gas 12335694\_IA registration  
Flanigan 2B-6H Supply Gas 12335691\_IA registration

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.  
Signed: \_\_\_\_\_ Date: 10/21/2019 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: 3/12/2020

**Attachment Check List**

**Att Doc Num**      **Name**

402215756	Form44 Submitted
-----------	------------------

Total Attach: 1 Files