

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: 10/22/2019 Document Number: 402217040

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: 311413 Location Type: Well Site Name: HSR-ARISTOCRAT-62N66W Number: 28SESE County: WELD Qtr Qtr: SESE Section: 28 Township: 2N Range: 66W Meridian: 6 Latitude: 40.103130 Longitude: -104.774530

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 473404 Flowline Type: Process Piping Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.103248 Longitude: -104.774523 PDOP: 1.0 Measurement Date: 09/10/2019 Equipment at End Point Riser: Well

Flowline Start Point Location Identification

Location ID: 433030 Location Type: Production Facilities [] No Location ID Name: Maier 28H-266 Number: Facilities County: WELD Qtr Qtr: SESE Section: 28 Township: 2N Range: 66W Meridian: 6 Latitude: 40.105180 Longitude: -104.777890

Flowline Start Point Riser

Latitude: 40.105192 Longitude: -104.776315 PDOP: 1.1 Measurement Date: 09/10/2019 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: 11/13/2013
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 473405 Flowline Type: Process Piping Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.103244 Longitude: -104.774488 PDOP: 0.9 Measurement Date: 09/10/2019
Equipment at End Point Riser: Well

Flowline Start Point Location Identification

Location ID: 433030 Location Type: Production Facilities No Location ID
Name: Maier 28H-266 Number: Facilities
County: WELD
Qtr Qtr: SESE Section: 28 Township: 2N Range: 66W Meridian: 6
Latitude: 40.105180 Longitude: -104.777890

Flowline Start Point Riser

Latitude: 40.105192 Longitude -104.776315 PDOP: 1.1 Measurement Date: 09/10/2019
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: 11/13/2013
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL

Comments

Maier 4C-28H Supply Gas 12337431_IA registration
Maier 4D-28H Supply Gas 12337430_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: 10/22/2019 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: 3/16/2020

Attachment Check List

Att Doc Num	Name
402217040	Form44 Submitted
402217065	FLOWLINE LAYOUT DRAWING

Total Attach: 2 Files