

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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OGCC RECEPTION
Receive Date:
10/24/2019
Document Number:
402220281

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 (UNCC) that participates in Colorado's One Call notification system? Yes No

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 331523 Location Type: Production Facilities
Name: PARKER-63N67W Number: 33NWNW
County: WELD
Qtr Qtr: NWNW Section: 33 Township: 3N Range: 67W Meridian: 6
Latitude: 40.188266 Longitude: -104.902974

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.186935 Longitude: -104.899801 PDOP: 4.7 Measurement Date: 08/28/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 336347 Location Type: Well Site No Location ID
Name: PARKER-63N67W Number: 33SENW
County: WELD
Qtr Qtr: SENW Section: 33 Township: 3N Range: 67W Meridian: 6
Latitude: 40.184110 Longitude: -104.897650

Flowline Start Point Riser

Latitude: 40.184120 Longitude: -104.897652 PDOP: 2.3 Measurement Date: 08/28/2019
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: 04/16/2002
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.186934 Longitude: -104.899809 PDOP: 3.3 Measurement Date: 08/28/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 330600 Location Type: _____ Well Site No Location ID
Name: PARKER-63N67W Number: 33SWNW
County: WELD
Qtr Qtr: SWNW Section: 33 Township: 3N Range: 67W Meridian: 6
Latitude: 40.184026 Longitude: -104.902924

Flowline Start Point Riser

Latitude: 40.184179 Longitude -104.902675 PDOP: 2.6 Measurement Date: 08/28/2019
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: 02/23/2009
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.186966 Longitude: -104.899807 PDOP: 1.8 Measurement Date: 08/28/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 331523 Location Type: _____ Well Site No Location ID
Name: PARKER-63N67W Number: 33NWNW
County: WELD
Qtr Qtr: NWNW Section: 33 Township: 3N Range: 67W Meridian: 6
Latitude: 40.188266 Longitude: -104.902974

Flowline Start Point Riser

Latitude: 40.188362 Longitude -104.902748 PDOP: 2.8 Measurement Date: 08/28/2019

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: 05/27/2002

Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____

Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL

Comments

Parker 11-33 12320832_FL registration
Parker 12-33 12319342_FL registration
Parker 22-33 12320834_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: 10/24/2019 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: _____

Attachment Check List

Att Doc Num

Name

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files