

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:

402198338

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: 331608 Location Type: Production Facilities
Name: CHAPIN 61N65W Number: / 4 SESE
County: WELD
Qtr Qtr: SESE Section: 4 Township: 1N Range: 65W Meridian: 6
Latitude: 40.075060 Longitude: -104.661820

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 473624 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.074680 Longitude: -104.661544 PDOP: 1.1 Measurement Date: 07/15/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 428697 Location Type: Well Site ☐ No Location ID
Name: CHAVEZ 61N65W / 4 Number: SWSE HZ PAD
County: WELD
Qtr Qtr: SWSE Section: 4 Township: 1N Range: 65W Meridian: 6
Latitude: 40.073960 Longitude: -104.664930

Flowline Start Point Riser

Latitude: 40.073977 Longitude: -104.664864 PDOP: 1.1 Measurement Date: 07/15/2019
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: 12/01/2012
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 473625 Flowline Type: Wellhead Line Action Type: Registration

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

Latitude: 40.074692 Longitude: -104.661502 PDOP: 1.1 Measurement Date: 07/15/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 428697 Location Type: Well Site ☐ No Location ID
Name: CHAVEZ 61N65W / 4 Number: SWSE HZ PAD
County: WELD
Qtr Qtr: SWSE Section: 4 Township: 1N Range: 65W Meridian: 6
Latitude: 40.073960 Longitude: -104.664930

Flowline Start Point Riser

Latitude: 40.073964 Longitude: -104.664861 PDOP: 1.1 Measurement Date: 07/15/2019
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: 12/01/2012
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL

Comments Chavez 4A-4H. 12335476_FL. registration
Chavez 4B-4H. 12335474_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: 3/17/2020

Attachment Check List

Att Doc Num**Name**

402198338

Form44 Submitted

Total Attach: 1 Files