

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: 10/16/2019 Document Number: 402210940

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 [X] No []

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 317601 Location Type: Production Facilities Name: DEVORE-63N66W Number: 34NENE County: WELD Qtr Qtr: NENE Section: 34 Township: 3N Range: 66W Meridian: 6 Latitude: 40.186157 Longitude: -104.757869

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.186190 Longitude: -104.758141 PDOP: 1.8 Measurement Date: 06/28/2019 Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 336458 Location Type: Well Site [] No Location ID Name: DEVORE-63N66W Number: 34NENE County: WELD Qtr Qtr: NENE Section: 34 Township: 3N Range: 66W Meridian: 6 Latitude: 40.187627 Longitude: -104.755969

Flowline Start Point Riser

Latitude: 40.187760 Longitude: -104.755852 PDOP: 4.8 Measurement Date: 06/28/2019 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: 08/08/2006
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: 40.186068 Longitude: -104.758465 PDOP: 4.4 Measurement Date: 06/28/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 336458 Location Type: _____ Well Site No Location ID
Name: DEVORE-63N66W Number: 34NENE
County: WELD
Qtr Qtr: NENE Section: 34 Township: 3N Range: 66W Meridian: 6
Latitude: 40.187627 Longitude: -104.755969

Flowline Start Point Riser

Latitude: 40.187665 Longitude -104.755849 PDOP: 3.2 Measurement Date: 06/28/2019
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: 11/22/1999
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: 40.186068 Longitude: -104.758477 PDOP: 3.0 Measurement Date: 06/28/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 330934 Location Type: _____ Well Site No Location ID
Name: DEVORE-63N66W Number: 34SENE
County: WELD
Qtr Qtr: SENE Section: 34 Township: 3N Range: 66W Meridian: 6
Latitude: 40.182907 Longitude: -104.755649

Flowline Start Point Riser

Latitude: 40.182909 Longitude -104.755840 PDOP: 0.8 Measurement Date: 06/28/2019

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: 03/23/2000

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: 40.186075 Longitude: -104.758472 PDOP: 3.3 Measurement Date: 06/28/2019

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 330959 Location Type: Well Site No Location ID

Name: DEVORE-63N66W Number: 34NWNE

County: WELD

Qtr Qtr: NWNE Section: 34 Township: 3N Range: 66W Meridian: 6

Latitude: 40.187577 Longitude: -104.761600

Flowline Start Point Riser

Latitude: 40.187666 Longitude -104.761576 PDOP: 5.2 Measurement Date: 06/28/2019

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: 06/06/2001

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: 40.186079 Longitude: -104.758481 PDOP: 3.5 Measurement Date: 06/28/2019

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 330772 Location Type: Well Site No Location ID

Name: DEVORE-63N66W Number: 34SWNE

County: WELD

Qtr Qtr: SWNE Section: 34 Township: 3N Range: 66W Meridian: 6
Latitude: 40.183577 Longitude: -104.760229

Flowline Start Point Riser

Latitude: 40.183643 Longitude -104.760170 PDOP: 3.5 Measurement Date: 06/28/2019
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: 02/19/2000
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL

Comments

Devore 31-34. 12319936_FL. registration Devore 32-34. 12319598_FL. registration Devore 41-34. 12319803_FL. registration Devore 42-34. 12319899_FL. registration Devore 6-0-34. 12324073_FL. registration
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I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.
Signed: _____ Date: 10/16/2019 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

Total Attach: 0 Files