

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:

01/13/2020

Document Number:

402284607

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) 774-4017
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: 335772 Location Type: Production Facilities
Name: SAM-61N66W Number: 25NESW
County: WELD
Qtr Qtr: NESW Section: 25 Township: 1N Range: 66W Meridian: 6
Latitude: 40.019139 Longitude: -104.729227

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 470324 Flowline Type: Wellhead Line Action Type: Abandonment

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

Latitude: 40.018687 Longitude: -104.729370 PDOP: 5.3 Measurement Date: 05/11/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 335772 Location Type: Production Facilities ☐ No Location ID
Name: SAM-61N66W Number: 25NESW
County: WELD
Qtr Qtr: NESW Section: 25 Township: 1N Range: 66W Meridian: 6
Latitude: 40.019139 Longitude: -104.729227

Flowline Start Point Riser

Latitude: 40.019037 Longitude: -104.729200 PDOP: 2.1 Measurement Date: 05/06/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 3.000
Bedding Material: _____ Date Construction Completed: 09/01/2011
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE ABANDONMENT

Date: 06/10/2019

Description of Abandonment

Flowline was disconnected from the wellhead and the separator. Flowline was flushed with fresh water and flowline was removed. Flowline was completely removed from the location.

OPERATOR COMMENTS AND SUBMITTAL

Comments Sam 13-25 Operator Flowline ID: 12321514_FL Flowline Facility ID: 470324 Flowline Abandonment

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

Signed: _____ Date: 01/13/2020 Email: Schuyler.Hamilton@Crestonepr.com

Print Name: Schuyler Hamilton Title: EHS Field Technician

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

Att Doc Num	Name

Total Attach: 0 Files