

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: 10/07/2019 Document Number: 402184116

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: 10459 Contact Person: Jeff Rickard Company Name: EXTRACTION OIL & GAS INC Phone: (720) 737-5144 Address: 370 17TH STREET SUITE 5300 Email: jrickard@extractionog.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: 321274 Location Type: Production Facilities Name: IANNACITO-61N69W Number: 6NWNW County: BOULDER Qtr Qtr: NWNW Section: 6 Township: 1N Range: 69W Meridian: 6 Latitude: 40.085230 Longitude: -105.166720

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 474031 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.085033 Longitude: -105.166441 PDOP: 1.0 Measurement Date: 05/17/2017 Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 321274 Location Type: Well Site [] No Location ID Name: IANNACITO-61N69W Number: 6NWNW County: BOULDER Qtr Qtr: NWNW Section: 6 Township: 1N Range: 69W Meridian: 6 Latitude: 40.085230 Longitude: -105.166720

Flowline Start Point Riser

Latitude: 40.085222 Longitude: -105.166691 PDOP: 1.0 Measurement Date: 05/17/2017 Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.375
 Bedding Material: Native Materials Date Construction Completed: 07/29/1981
 Maximum Anticipated Operating Pressure (PSI): 406 Testing PSI: 406
 Test Date: 06/17/2019

OPERATOR COMMENTS AND SUBMITTAL

Comments

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

Signed: _____ Date: 10/07/2019 Email: emartinez@h2eincorporated.com

Print Name: Emily Martinez Title: Environmental Scientist

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: 3/19/2020

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
402184116	Form44 Submitted
402201912	PRESSURE TEST

Total Attach: 2 Files