

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: 12/17/2019 Document Number: 402264818

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: 10575 Contact Person: Jeff Rickard Company Name: 8 NORTH LLC 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 (UNCC) that participates in Colorado's One Call notification system? Yes [X] No [ ]

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 321352 Location Type: Production Facilities Name: ALMQUIST-62N69W Number: 34NESE County: BOULDER Qtr Qtr: NESE Section: 34 Township: 2N Range: 69W Meridian: 6 Latitude: 40.091470 Longitude: -105.096960

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462642 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.091317 Longitude: -105.097332 PDOP: 1.0 Measurement Date: 05/16/2017 Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 321438 Location Type: Well Site [ ] No Location ID Name: ALMQUIST MB-62N69W Number: 34SESE County: BOULDER Qtr Qtr: SESE Section: 34 Township: 2N Range: 69W Meridian: 6 Latitude: 40.088530 Longitude: -105.095380

Flowline Start Point Riser

Latitude: 40.088512 Longitude: -105.095374 PDOP: 3.3 Measurement Date: 07/11/2017 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: 08/30/1993  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OFF LOCATION FLOWLINE REMOVAL FROM SERVICE**

Date: \_\_\_\_\_

**Description of Removal from Service**

\_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 462641 Flowline Type: Wellhead Line Action Type: \_\_\_\_\_

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.091320 Longitude: -105.097343 PDOP: 1.0 Measurement Date: 05/16/2017  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 321435 Location Type: \_\_\_\_\_ Well Site  No Location ID  
Name: ALMQUIST MB-62N69W Number: 34NWSE  
County: BOULDER  
Qtr Qtr: NWSE Section: 34 Township: 2N Range: 69W Meridian: 6  
Latitude: 40.093366 Longitude: -105.099679

**Flowline Start Point Riser**

Latitude: 40.092665 Longitude -105.100440 PDOP: 1.1 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: 02/22/2005  
Maximum Anticipated Operating Pressure (PSI): 398 Testing PSI: 398  
Test Date: 03/29/2018

**OFF LOCATION FLOWLINE REMOVAL FROM SERVICE**

Date: \_\_\_\_\_

**Description of Removal from Service**

\_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 462643 Flowline Type: Wellhead Line Action Type: Abandonment

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.091315 Longitude: -105.097343 PDOP: 1.0 Measurement Date: 05/07/2017

Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 321352 Location Type: Well Site  No Location ID  
Name: ALMQUIST-62N69W Number: 34NESE  
County: BOULDER  
Qtr Qtr: NESE Section: 34 Township: 2N Range: 69W Meridian: 6  
Latitude: 40.091470 Longitude: -105.096960

**Flowline Start Point Riser**

Latitude: 40.091464 Longitude: -105.096974 PDOP: 1.0 Measurement Date: 05/12/2017  
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: 11/04/1991  
Maximum Anticipated Operating Pressure (PSI): 500 Testing PSI: 540  
Test Date: 03/23/2018

**OFF LOCATION FLOWLINE ABANDONMENT**

Date: 10/25/2019

**Description of Abandonment**

The entire 2' steel line was removed from the ground. No 1' poly line existed.

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 462644 Flowline Type: Wellhead Line Action Type:

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.091315 Longitude: -105.097332 PDOP: 1.0 Measurement Date: 05/16/2017  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 321436 Location Type: Well Site  No Location ID  
Name: ALMQUIST-62N69W Number: 34SWSE  
County: BOULDER  
Qtr Qtr: SWSE Section: 34 Township: 2N Range: 69W Meridian: 6  
Latitude: 40.089240 Longitude: -105.099800

**Flowline Start Point Riser**

Latitude: 40.089209 Longitude: -105.099803 PDOP: 1.1 Measurement Date: 05/16/2017  
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: 10/06/1993  
Maximum Anticipated Operating Pressure (PSI): 498

Test Date: 03/23/2018

**OFF LOCATION FLOWLINE REMOVAL FROM SERVICE**

Date: \_\_\_\_\_

**Description of Removal from Service**

\_\_\_\_\_

**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: 12/17/2019 Email: jrickard@extractionog.com

Print Name: Jeff Rickard Title: Regulatory Complainece

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