

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:

06/02/2020

Document Number:

402411378

## Off-Location Flowline

The Flowline Report, Form 44, shall be submitted to register, report realignment, report removal from service, provide pre-abandonment notices, or report abandonment of Off-Location Flowlines, Flowline Systems, Produced Water Transfer Systems, or Crude Oil Transfer Lines or Systems as required by the 1100 Series Rules. The Form 44 shall also be submitted to register, report realignment, or report abandonment of Domestic Taps, and to report Grade 1 Gas Leaks from Flowlines per Rules 610

Operator Information

OGCC Operator Number: 10459 Contact Person: Nathan Bennett  
Company Name: EXTRACTION OIL & GAS INC Phone: (720) 354-4616  
Address: 370 17TH STREET SUITE 5300 Email: nbennett@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 ☒ No ☐

## OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 320283 Location Type: Production Facilities  
Name: AMOCO-61S65W Number: 17N2S2SE  
County: ADAMS  
Qtr Qtr: N2S2SE Section: 17 Township: 1S Range: 65W Meridian: 6  
Latitude: 39.960580 Longitude: -104.682950

Description of Corrosion Protection

Description of Integrity Management Program

Description of the construction method used for public by-ways, road crossings, sensitive wildlife habitats, sensitive areas, and natural and manmade watercourses (i.e., open trench, bored and cased, or bored only), if applicable.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 465175 Flowline Type: Wellhead Line Action Type: Abandonment Verification

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 320292 Location Type: Well Site ☐  
Name: AMOCO-61S65W Number: 17SESW  
County: ADAMS No Location ID  
SESW 17 1S 65W 6

Qtr Qtr:                      Section:                      Township:                      Range:                      Meridian:  
Latitude:    39.960490                      Longitude:    -104.692460

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: 11/13/1988  
Maximum Anticipated Operating Pressure (PSI):    155                      Testing PSI:    500  
Test Date:    04/10/2018

**OFF LOCATION FLOWLINE Abandonment Verification**

Date:    04/02/2020

**Abandonment Verification**

The abandoned Off-Location Flowline was located within the jurisdiction(s) of the following local government(s).  
(No Jurisdiction)

**Description of Abandonment Verification:**

Flowline corridor was trenched open. Approximately 2,543' of ~4" steel flowline (buried +/- 5' deep) was removed. Trench was backfilled and land surface was graded.

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID:    465173                      Flowline Type:    Wellhead Line                      Action Type:                     

**OFF LOCATION FLOWLINE REGISTRATION**

Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID:    320524                      Location Type:                      Well Site                      ☐  
Name: AMOCO-61S65W                      Number: 17NWSW  
County: ADAMS                      No Location ID  
Qtr Qtr:    NWSW                      Section:    17                      Township:    1S                      Range:    65W                      Meridian:    6  
Latitude:    39.962860                      Longitude:    -104.695830

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: 05/01/2005  
Maximum Anticipated Operating Pressure (PSI):    43                      Testing PSI:    500  
Test Date:    04/10/2018

**OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification**

Date:                     

**Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:**

**FLOWLINE FACILITY INFORMATION**Flowline Facility ID: 465174 Flowline Type: Wellhead Line Action Type: \_\_\_\_\_**OFF LOCATION FLOWLINE REGISTRATION**Equipment at End Point Riser: Separator**Flowline Start Point Location Identification**

Location ID: 320283 Location Type: Well Site ☐  
Name: AMOCO-61S65W Number: 17N2S2SE  
County: ADAMS No Location ID  
Qtr Qtr: N2S2SE Section: 17 Township: 1S Range: 65W Meridian: 6  
Latitude: 39.960580 Longitude: -104.682950

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: 04/20/1988  
Maximum Anticipated Operating Pressure (PSI): 405 Testing PSI: 750  
Test Date: 04/10/2018

**OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification**

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

**Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:****OPERATOR COMMENTS AND SUBMITTAL**

Comments This Form 44 is being filed for a Flowline Abandonment.  
December 2020 update: 402416912

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

Signed: \_\_\_\_\_ Date: 06/02/2020 Email: nbennett@extractionog.comPrint Name: Nathan Bennett Title: Regulatory Supervisor

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: 6/11/2020**Attachment Check List**

Att Doc Num	Name
402411378	Form44 Submitted

Total Attach: 1 Files