

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: 06/14/2019 Document Number: 402075398

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: 319815 Location Type: Production Facilities Name: MAUL-61S66W Number: 26SWNE County: ADAMS Qtr Qtr: SWNE Section: 26 Township: 1S Range: 66W Meridian: 6 Latitude: 39.938650 Longitude: -104.739407

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 477008 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.938478 Longitude: -104.739478 PDOP: 1.0 Measurement Date: 05/15/2019 Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 320604 Location Type: Well Site [] No Location ID Name: MAUL-61S66W Number: 26NWNE County: ADAMS Qtr Qtr: NWNE Section: 26 Township: 1S Range: 66W Meridian: 6 Latitude: 39.941544 Longitude: -104.740485

Flowline Start Point Riser

Latitude: 39.941548 Longitude: -104.740473 PDOP: 1.1 Measurement Date: 05/15/2019 Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.375
Bedding Material: Native Materials Date Construction Completed: 09/07/2007
Maximum Anticipated Operating Pressure (PSI): 217 Testing PSI: 250
Test Date: 04/05/2018

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 477009 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 39.938486 Longitude: -104.739476 PDOP: 0.9 Measurement Date: 05/15/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 320563 Location Type: Well Site No Location ID
Name: MAUL-61S66W Number: 26NENE
County: ADAMS
Qtr Qtr: NENE Section: 26 Township: 1S Range: 66W Meridian: 6
Latitude: 39.941543 Longitude: -104.737579

Flowline Start Point Riser

Latitude: 39.941531 Longitude -104.735790 PDOP: 1.1 Measurement Date: 05/15/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.375
Bedding Material: Native Materials Date Construction Completed: 05/16/2007
Maximum Anticipated Operating Pressure (PSI): 215 Testing PSI: 500
Test Date: 04/05/2018

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: 06/14/2019 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: 6/22/2020

Attachment Check List

| Att Doc Num | Name |
|--------------------|------------------|
| 402075398 | Form44 Submitted |
| 402075415 | PRESSURE TEST |
| 402075419 | PRESSURE TEST |

Total Attach: 3 Files