

State of Colorado Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:

10/21/2019

Document Number:

402171891

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: 10598 Contact Person: Diane Overbey
Company Name: SANDRIDGE EXPLORATION & PRODUCTION LLC Phone: (405) 429-5828
Address: 123 ROBERT S KERR AVE Email: doverbey@sandridgeenergy.com
City: OKLAHOMA CITY State: OK Zip: 73102
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: 436676 Location Type: Production Facilities
Name: Surprise Central Facility Number: _____
County: JACKSON
Qtr Qtr: SWSW Section: 4 Township: 6N Range: 80W Meridian: 6
Latitude: 40.515287 Longitude: -106.387483

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: _____ Flowline Type: Production Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.515154 Longitude: -106.386506 PDOP: _____ Measurement Date: 05/01/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 445005 Location Type: Well Site ☐ No Location ID
Name: Surprise Unit 0680 Number: S9
County: JACKSON
Qtr Qtr: NENW Section: 9 Township: 6N Range: 80W Meridian: 6
Latitude: 40.509980 Longitude: -106.384040

Flowline Start Point Riser

Latitude: 40.510708 Longitude: -106.384462 PDOP: _____ Measurement Date: 05/01/2019
Equipment at Start Point Riser: Custody Transfer Point

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: HDPE Max Outer Diameter:(Inches) 8.000
Bedding Material: Native Materials Date Construction Completed: 05/01/2019
Maximum Anticipated Operating Pressure (PSI): 150 Testing PSI: 436
Test Date: 02/21/2019

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: 10/21/2019 Email: doverbey@sandridgeenergy.com

Print Name: Diane Overbey Title: Regulatory Analyst II

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

<u>Att Doc Num</u>	<u>Name</u>
402171895	FLOWLINE LAYOUT DRAWING
402216021	PRESSURE TEST

Total Attach: 2 Files