

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:

10/24/2019

Document Number:

402220118

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: 10633 Contact Person: Schuyler Hamilton
Company Name: CRESTONE PEAK RESOURCES OPERATING LLC Phone: (303) 7744017
Address: 1801 CALIFORNIA STREET #2500 Email: schuyler.hamilton@crestonepr.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: 332862 Location Type: Production Facilities
Name: MUSICK-MCCLINTOCK-64N65W Number: 32NWNE
County: WELD
Qtr Qtr: NWNE Section: 32 Township: 4N Range: 65W Meridian: 6
Latitude: 40.274318 Longitude: -104.684554

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 477624 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.273718 Longitude: -104.683675 PDOP: 1.4 Measurement Date: 08/23/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 323160 Location Type: Well Site ☐ No Location ID
Name: MUSICK GAS UNIT-64N65W Number: 32SENE
County: WELD
Qtr Qtr: SENE Section: 32 Township: 4N Range: 65W Meridian: 6
Latitude: 40.271486 Longitude: -104.681948

Flowline Start Point Riser

Latitude: 40.271729 Longitude: -104.682141 PDOP: 1.5 Measurement Date: 08/23/2019
Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000
Bedding Material: _____ Date Construction Completed: 06/12/1986
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL


Comments Musick Gas Unit 1 12312642_FL registration

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

Signed: _____ Date: 10/24/2019 Email: costin.mcqueen@crestonepr.com

Print Name: Costin McQueen Title: Geologist

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: 8/11/2020

Conditions of Approval

COA Type

Description

Attachment Check List

Att Doc Num

Name

402220118

Form44 Submitted

Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

Stamp Upon
Approval

Total: 0 comment(s)

