

**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:

10/10/2019

Document Number:

402199337

**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: 69175 Contact Person: Jenifer Hakkarinen  
Company Name: PDC ENERGY INC Phone: (303) 860-5800  
Address: 1775 SHERMAN STREET - STE 3000 Email: Jenifer.Hakkarinen@pdce.com  
City: DENVER State: CO Zip: 80203  
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: 424902 Location Type: Production Facilities  
Name: Weld County Number: 9-28  
County: WELD  
Qtr Qtr: SESE Section: 28 Township: 7N Range: 64W Meridian: 6  
Latitude: 40.538306 Longitude: -104.547652

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 477995 Flowline Type: Wellhead Line Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.537694 Longitude: -104.547156 PDOP: Measurement Date: 08/22/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 424902 Location Type: Well Site ☐ No Location ID  
Name: Weld County Number: 9-28  
County: WELD  
Qtr Qtr: SESE Section: 28 Township: 7N Range: 64W Meridian: 6  
Latitude: 40.538306 Longitude: -104.547652

**Flowline Start Point Riser**

Latitude: 40.538317 Longitude: -104.547666 PDOP: Measurement Date: 08/22/2019  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Crude Oil Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000  
Bedding Material: \_\_\_\_\_ Date Construction Completed: 10/10/2011  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 477996 Flowline Type: Wellhead Line Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION****Flowline End Point Riser**

Latitude: 40.537694 Longitude: -104.547156 PDOP: \_\_\_\_\_ Measurement Date: 08/22/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 424902 Location Type: \_\_\_\_\_ Well Site ☐ No Location ID

Name: Weld County Number: 9-28

County: WELD

Qtr Qtr: SESE Section: 28 Township: 7N Range: 64W Meridian: 6

Latitude: 40.538306 Longitude: -104.547652

**Flowline Start Point Riser**

Latitude: 40.538231 Longitude: -104.547664 PDOP: \_\_\_\_\_ Measurement Date: 08/17/2019

Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Crude Oil Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000  
Bedding Material: \_\_\_\_\_ Date Construction Completed: 09/25/2011  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**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: 10/10/2019 Email: Jenifer.Hakkarinen@pdce.com

Print Name: Jenifer Hakkarinen Title: Reg Tech

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: 9/14/2020

## Condtions of Approval

**COA Type**

**Description**

## Attachment Check List

**Att Doc Num**

**Name**

402199337	Form44 Submitted
402205783	AERIAL PHOTO

Total Attach: 2 Files

## General Comments

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval
--	--	------------------------

Total: 0 comment(s)

