

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: 08/28/2020 Document Number: 402477828

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 and

Operator Information

OGCC Operator Number: 10261 Contact Person: Tyler Greenly Company Name: BAYSWATER EXPLORATION & PRODUCTION LLC Phone: (303) 8932503 Address: 730 17TH ST STE 500 Email: tgreenly@bayswater.us 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: 418911 Location Type: Well Site Name: LARSON TANK BATTERY Number: County: WELD Qtr Qtr: NWNW Section: 20 Township: 7N Range: 66W Meridian: 6 Latitude: 40.567230 Longitude: -104.807410

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: 465760 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: 302243 Location Type: Well Site [ ] Name: LARSON-67N66W Number: 20NWNW County: WELD No Location ID Qtr Qtr: NWNW Section: 20 Township: 7N Range: 66W Meridian: 6

Qtr Qtr: Section: Township: Range: Meridian:

Latitude: 40.565750 Longitude: -104.809390

Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000

Bedding Material: Native Materials Date Construction Completed: 09/20/2008

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

**OFF LOCATION FLOWLINE Abandonment Verification**

Date: 01/13/2020

**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:**

Flushed flowline, cut risers and capped on both ends

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 465761 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: 418736 Location Type: Well Site

Name: HILL Number: 20-22

County: WELD No Location ID

Qtr Qtr: SENW Section: 20 Township: 7N Range: 66W Meridian: 6

Latitude: 40.562650 Longitude: -104.804760

Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000

Bedding Material: Native Materials Date Construction Completed: 12/19/2008

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

**OFF LOCATION FLOWLINE Abandonment Verification**

Date: 01/13/2020

**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:**

Flushed flowline, cut risers and capped on both ends

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 465762 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: 302241 Location Type: Well Site   
Name: LARSON-67N66W Number: 20SWNW  
County: WELD No Location ID  
Qtr Qtr: SWNW Section: 20 Township: 7N Range: 66W Meridian: 6  
Latitude: 40.562080 Longitude: -104.809530

Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: \_\_\_\_\_ Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000  
Bedding Material: Native Materials Date Construction Completed: 09/25/2008  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OFF LOCATION FLOWLINE Abandonment Verification**

Date: 01/13/2020

**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:**

Flushed flowline, cut risers and capped on both ends

**OPERATOR COMMENTS AND SUBMITTAL**

Comments

[Empty text box for operator comments]

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

Signed: \_\_\_\_\_ Date: 08/28/2020 Email: tgreenly@bayswater.us

Print Name: Tyler Greenly Title: Superintendent

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: 10/16/2020

## Conditions of Approval

**COA Type**

**Description**

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## Attachment Check List

**Att Doc Num**

**Name**

402477828	Form44 Submitted
402477830	THIRD PARTY VERIFICATION

Total Attach: 2 Files

## General Comments

**User Group**

**Comment**

**Comment Date**

		Stamp Upon Approval

Total: 0 comment(s)

