

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: 09/29/2019 Document Number: 402041306

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) 774-4017 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 (UNCC) that participates in Colorado's One Call notification system? Yes [X] No [ ]

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 336389 Location Type: Production Facilities Name: DONIPHAN SHIELDS NENE MULTI-WELL Number: 8-4-11 County: BOULDER Qtr Qtr: NENE Section: 11 Township: 1N Range: 69W Meridian: 6 Latitude: 40.070350 Longitude: -105.077970

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.070785 Longitude: -105.067390 PDOP: 2.7 Measurement Date: 04/23/2019 Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 321483 Location Type: Well Site [ ] No Location ID Name: BAILEY Number: 22-12 County: BOULDER Qtr Qtr: NENW Section: 12 Township: 1N Range: 69W Meridian: 6 Latitude: 40.070765 Longitude: -105.067380

Flowline Start Point Riser

Latitude: 40.070785 Longitude: -105.067352 PDOP: 5.7 Measurement Date: 04/23/2019 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: 12/01/2010  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: \_\_\_\_\_ Flowline Type: Wellhead Line Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.070676 Longitude: -105.078111 PDOP: 0.9 Measurement Date: 04/23/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 321485 Location Type: \_\_\_\_\_ Well Site  No Location ID  
Name: DONIPHAN SHIELDS-61N69W Number: 11SWNE  
County: BOULDER  
Qtr Qtr: SWNE Section: 11 Township: 1N Range: 69W Meridian: 6  
Latitude: 40.067860 Longitude: -105.081106

**Flowline Start Point Riser**

Latitude: 40.067870 Longitude -105.081077 PDOP: 2.0 Measurement Date: 04/23/2019  
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: 12/06/2008  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: \_\_\_\_\_ Flowline Type: Wellhead Line Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.070714 Longitude: -105.078099 PDOP: 2.9 Measurement Date: 04/23/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 321469 Location Type: \_\_\_\_\_ Well Site  No Location ID  
Name: BAILEY-61N69W Number: 12NWNW  
County: BOULDER  
Qtr Qtr: NWNW Section: 12 Township: 1N Range: 69W Meridian: 6  
Latitude: 40.071176 Longitude: -105.072837

**Flowline Start Point Riser**

Latitude: 40.071155 Longitude -105.072827 PDOP: 4.3 Measurement Date: 04/23/2019

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: 03/01/2007

Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_

Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: \_\_\_\_\_ Flowline Type: Wellhead Line Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.071155 Longitude: -105.072827 PDOP: 4.3 Measurement Date: 04/23/2019

Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 321483 Location Type: \_\_\_\_\_ Well Site  No Location ID

Name: BAILEY Number: 22-12

County: BOULDER

Qtr Qtr: NENW Section: 12 Township: 1N Range: 69W Meridian: 6

Latitude: 40.070765 Longitude: -105.067380

**Flowline Start Point Riser**

Latitude: 40.070785 Longitude -105.067390 PDOP: 2.7 Measurement Date: 04/23/2019

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: 12/06/2007

Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_

Test Date: \_\_\_\_\_

**OPERATOR COMMENTS AND SUBMITTAL**

Comments

Operator Flowline ID: 01306557\_FL Doniphan Shields 32-11 Flowline Registration

Operator Flowline ID: 01306635\_FL Bailey 22-12 Flowline Section Registration (Initial section of Commingled Flowline)

Operator Flowline ID: 0130663501306550\_FL Bailey 22-12 and 21-12 Commingled Flowline Section Registration (Middle Section of Commingled flowline to the Bailey 11-12 Wellhead)

Operator Flowline ID: 013066350130655001306524\_FL Bailey 22-12, Bailey 21-12, Bailey 11-12 Commingled Flowline Section to the Separator. (Final Section)

Three parts of a single flowline were registered to facilitate and document in the event a well is abandoned. This is a single commingled flowline. Including sections under the following Operator Flowline ID's.

01306635\_FL

0130663501306550\_FL

013066350130655001306524\_FL

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

Signed: \_\_\_\_\_ Date: 09/29/2019 Email: Schuyler.Hamilton@Crestonepr.com

Print Name: Schuyler Hamilton Title: EHS Field Technician

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**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
402192255	FLOWLINE LAYOUT DRAWING

Total Attach: 1 Files