

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:

11/24/2020

Document Number:

402539925

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 906.

Operator Information

OGCC Operator Number: 10459 Contact Person: Nathan Bennett
Company Name: EXTRACTION OIL & GAS INC Phone: (720) 354-4616
Address: 370 17TH STREET SUITE 5200 Email: nbennett@extracionog.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: 452748 Location Type: Production Facilities
Name: Maul 2 Number: CTB
County: ADAMS
Qtr Qtr: SWSE Section: 26 Township: 1S Range: 66W Meridian: 6
Latitude: 39.929115 Longitude: -104.739670

Description of Corrosion Protection

Extraction's corrosion procedures are detailed in its Flowline Management SOP. Coating materials will be used that minimize internal and external corrosion, such as internally coated pipe or stainless steel for water service, and externally coated FBE on all buried steel pipe. If flowlines are repaired due to corrosion, Extraction will investigate the failure, promptly respond with the appropriate remedial actions and determine the root cause and apply corrective actions as necessary. Extraction retains records of its chemical program in the form of Failure Analysis Reports, records of chemical invoices and chemical delivery.

Description of Integrity Management Program

Extraction's integrity management program is detailed in its Flowline Management SOP, which covers flowline installation, operation, maintenance, inspection, testing, and repairs. Prior to beginning any project involving flowlines, Extraction ensures the project plans, flowline installation, flowline maintenance (including repairs) and all flowline inspection and testing projects meet the requirements of the Flowline Management SOP. All pressure tests on flowlines will be conducted by an independent, third party qualified to do such testing. Precautions shall be taken to protect employees and the general public.

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.

N/A.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 465172 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 320555 Location Type: Well Site ☐
Name: MAUL-61S66W Number: 26NWSE
County: ADAMS No Location ID
Qtr Qtr: NWSE Section: 26 Township: 1S Range: 66W Meridian: 6
Latitude: 39.934255 Longitude: -104.740416

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.375
Bedding Material: Native Materials Date Construction Completed: 06/17/2007
Maximum Anticipated Operating Pressure (PSI): 500 Testing PSI: 170
Test Date: 04/06/2018

OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification

Date: _____

Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 465170 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 320561 Location Type: Well Site ☐
Name: MAUL-61S66W Number: 26SESE
County: ADAMS No Location ID
Qtr Qtr: SESE Section: 26 Township: 1S Range: 66W Meridian: 6
Latitude: 39.930670 Longitude: -104.735780

Equipment at Start Point Riser: Separator

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.375
Bedding Material: Native Materials Date Construction Completed: 06/23/2007
Maximum Anticipated Operating Pressure (PSI): 500 Testing PSI: 218
Test Date: 04/06/2018

OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification

Date: _____

Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:**FLOWLINE FACILITY INFORMATION**Flowline Facility ID: 465169 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: 320472 Location Type: Well Site ☐
Name: MAUL-61S66W Number: 26SE
County: ADAMS No Location ID
Qtr Qtr: SE Section: 26 Township: 1S Range: 66W Meridian: 6
Latitude: 39.931050 Longitude: -104.739927

Equipment at Start Point Riser: Well**Flowline Description and Testing**

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.375
Bedding Material: Native Materials Date Construction Completed: 05/27/2000
Maximum Anticipated Operating Pressure (PSI): 500 Testing PSI: 246
Test Date: 04/06/2018

OFF LOCATION FLOWLINE Abandonment VerificationDate: 02/21/2020**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:

A trench was excavated to expose and remove the flowline. Approximately 667' of ~2-7/8" steel pipeline (buried between 5' and 6' deep) was removed in its entirety. Trench was backfilled and land surface graded.

FLOWLINE FACILITY INFORMATIONFlowline Facility ID: 465171 Flowline Type: Wellhead Line Action Type: _____**OFF LOCATION FLOWLINE REGISTRATION**Equipment at End Point Riser: Separator**Flowline Start Point Location Identification**

Location ID: 320606 Location Type: Well Site ☐
Name: MAUL-61S66W Number: 26NESE
County: ADAMS No Location ID
Qtr Qtr: NESE Section: 26 Township: 1S Range: 66W Meridian: 6

Latitude: 39.934274 Longitude: -104.735787

Equipment at Start Point Riser: Well

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.375
Bedding Material: Native Materials Date Construction Completed: 09/04/2007
Maximum Anticipated Operating Pressure (PSI): 500 Testing PSI: 120
Test Date: 04/06/2018

OFF LOCATION FLOWLINE Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification

Date: _____

Description of Realignment, Out of Service, Pre-Abandonment Notice, or Abandonment Verification:

OPERATOR COMMENTS AND SUBMITTAL

Comments This Form 44 is being filed for a Flowline Abandonment. The subject flowline has been removed in its entirety.
00109406FL
- Previously serviced the Maul 2 well (API #05-001-09406).
- Recent PRESSURE TEST is attached.
- Updated GIS shapefile is attached.

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

Signed: _____ Date: 11/24/2020 Email: nbennett@extracionog.com

Print Name: Nathan Bennett

Title: Regulatory Supervisor

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: 5/18/2021

Conditions of Approval

COA Type

Description

Attachment Check List

Att Doc Num

Name

402539925	Form44 Submitted
402539937	OFF-LOCATION FLOWLINE GEODATABASE SHP
402539947	PRESSURE TEST

Total Attach: 3 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)