

**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:

06/01/2021

Document Number:

402438190

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: 10575 Contact Person: Nathan Bennett
Company Name: 8 NORTH LLC Phone: (720) 354-4616
Address: 370 17TH STREET SUITE 5200 Email: nbennett@extractionog.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: 461773 Location Type: Production Facilities
Name: Fabrizius 27-12, 14, 42, 44 Number: _____
County: WELD
Qtr Qtr: NWNE Section: 27 Township: 11N Range: 61W Meridian: 6
Latitude: 40.892528 Longitude: -104.183633

Description of Corrosion Protection

8 North'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, 8 North will investigate the failure, promptly respond with the appropriate remedial actions and determine the root cause and apply corrective actions as necessary. 8 North 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

8 North'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, 8 North 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: 462584 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 413847 Location Type: Well Site ☐
Name: FABRIZIUS Number: 1161-27-44
County: WELD No Location ID
Qtr Qtr: SESE Section: 27 Township: 11N Range: 61W Meridian: 6
Latitude: 40.887300 Longitude: -104.185140

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: 10/14/2009
Maximum Anticipated Operating Pressure (PSI): 200 Testing PSI: 200
Test Date: 09/20/2018

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

Date: 03/25/2020

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

Bell holes will be dug along the entire length of the line in sections to allow the line to be cut and pulled out in segments.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462582 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: 415049 Location Type: Well Site ☐
Name: FABRIZIUS Number: 1161-27-14
County: WELD No Location ID
Qtr Qtr: SENE Section: 27 Township: 11N Range: 61W Meridian: 6
Latitude: 40.894350 Longitude: -104.185080

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: 05/01/2010
Maximum Anticipated Operating Pressure (PSI): 200 Testing PSI: 200
Test Date: 09/14/2018

OFF LOCATION FLOWLINE Abandonment Verification

Date: 04/29/2020

Abandonment Verification

The abandoned Off-Location Flowline was located within the jurisdiction(s) of the following local government(s).

Jurisdiction	County	Municipality
County	WELD	

Description of Abandonment Verification:

This flowline previously serviced the Fabrizius 1161 27-14 well (API #05-123-30970). Bell holes were dug along the flowline corridor to enable the flowline to be cut in sections and pulled out of the ground. Approximately 730' of ~3" steel flowline (bured +/- 3' deep) was cut and removed. The bell holes were back-filled and the land surface was graded. This flowline was removed in its entirety.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462585 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 302930 Location Type: Well Site ☐
Name: FABRIZIUS-611N61W Number: 27NWSE
County: WELD No Location ID
Qtr Qtr: NWSE Section: 27 Township: 11N Range: 61W Meridian: 6
Latitude: 40.890900 Longitude: -104.189630

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: 09/23/2009
Maximum Anticipated Operating Pressure (PSI): 200 Testing PSI: 200
Test Date: 09/20/2018

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: 462583 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 302924 Location Type: Well Site ☐

Name: FABRIZIUS-611N61W

Number: 27NWNE

County: WELD

No Location ID

Qtr Qtr: NWNE

Section: 27

Township: 11N

Range: 61W

Meridian: 6

Latitude: 40.897620

Longitude: -104.189630

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: 10/25/2009

Maximum Anticipated Operating Pressure (PSI): 135

Testing PSI: 135

Test Date: 09/20/2018

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 was removed in its entirety.

12330970FL

- Previously serviced API #05-123-30970 (Fabrizius 1161-27-14).

- Updated GIS shapefile attached.

- Updated information for the Corrosion Protection and Integrity Management programs.

This Form 44 was updated on 06/01/2021 per correspondence w/ Steve Wheeler.

- PRESSURE TEST attached.

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

Signed: _____

Date: 06/01/2021

Email: nbennett@extractionog.com

Print Name: Nathan Bennett

Title: Regulatory Manager

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: 6/4/2021

Condtions of Approval

COA Type

Description

Attachment Check List

Att Doc Num

Name

402438190	Form44 Submitted
402438745	OFF-LOCATION FLOWLINE GIS DATA
402705015	PRESSURE TEST

Total Attach: 3 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)