

State of Colorado
Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:

12/01/2020

Document Number:

402543951

Produced Water Transfer System

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: 10447 Contact Person: Chris McRickard
Company Name: URSA OPERATING COMPANY LLC Phone: (720) 508-8362
Address: 950 17TH STREET, SUITE 1900 Email: cmcrickard@ursaresources.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 ☐

PRODUCED WATER TRANSFER SYSTEM

PRODUCED WATER TRANSFER SYSTEM IDENTIFICATION

Facility ID: 466821 Transfer System Name: BM-Water Action Type: Realignment
Estimated Daily Transfer Volume: 0 barrels Financial Assurance Rule 712 Facility Surety ID: 20180072

PRODUCED WATER TRANSFER SYSTEM REGISTRATION

Planned Construction Date: 10/01/2014
A representative legal location and associated latitude and longitude near the center of the transfer system.
County: GARFIELD
Qtr Qtr: SESW Section: 17 Township: 7S Range: 95W Meridian: 6
Latitude: 39.437670 Longitude: -108.030432
GPS Quality Value: 1.8 Type of GPS Quality Value: PDOP Measurement Date: 11/01/2018

PRODUCED WATER TRANSFER LINE AS-BUILT

Date Produced Water Transfer Line was Placed into Service: _____

Pipe Description and Testing

Type of Fluid Transferred: Produced Water Pipe Material: HDPE Standard Dimension Ratio: 9.0
(for HDPE pipe only)
Max outer Diameter (inches): 10.000 Wall Thickness: 1.500 Weight (lb/ft): 15.60 Grade: _____
Coating: False Pipe Material: Native Materials Burial Depth: 6
Max Anticipated Operating PSI: 250 Testing Pressure: 341 Test Date: 03/23/2015

Description of Corrosion Protection:

N/A not available for HDPE pipe

Description of Integrity Management Program:

- Constructed using Best Management Practices.
- Pipelines (Mon A, Wat A, Wat B, Yater) and (Tompkins/Mon B) were hydrostatically tested and passed.
- After use lines were drained/winterized and valves closed.
- Inspected daily when in use, Quarterly when not in use.
- Water Lines are QC'd when the produced water system is in active status. All valve sets are visually inspected

during pumping operations. When system is in active status, annual pressure tests will be conducted and pressures are manually monitored during operations.

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.

Constructed using Best Management Practices, but details are not available.

PRODUCED WATER TRANSFER SYSTEM REALIGNMENT

Date: 11/30/2020

Description of Realignment:

This form 44 is being submitted to provide updates to the Flowline System, specifically adding details to "Description of Corrosion Protection", "Description of Integrity Management Program" and "Description of Construction Methods" where construction information is available.

OPERATOR COMMENTS AND SUBMITTAL

Comments This form 44 is being submitted to provide updates to the Flowline System, specifically adding details to "Description of Corrosion Protection", "Description of Integrity Management Program" and "Description of Construction Methods" where construction information is available.

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

Signed: _____ Date: 12/01/2020 Email: cmcricard@ursaresources.com

Print Name: Chris McRickard 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: _____

Conditions of Approval

COA Type

Description

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Attachment Check List

Att Doc Num

Name

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Total Attach: 0 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)

