

State of Colorado
Oil and Gas Conservation Commission

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OGCC RECEPTION
Receive Date:
11/22/2019
Document Number:
402246222

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: 10598 Contact Person: Diane Overbey
Company Name: SANDRIDGE EXPLORATION & PRODUCTION LLC Phone: (405) 429-5828
Address: 123 ROBERT S KERR AVE Email: doverbey@sandridgeenergy.com
City: OKLAHOMA CITY State: OK Zip: 73102
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 No

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 458558 Location Type: Production Facilities
Name: Marmot 0880 Number: S19 CTB
County: JACKSON
Qtr Qtr: SESE Section: 19 Township: 8N Range: 80W Meridian: 6
Latitude: 40.645891 Longitude: -106.409662

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.646598 Longitude: -106.408999 PDOP: Measurement Date: 10/24/2019
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 458790 Location Type: Well Site No Location ID
Name: Oxbow 0880 Number: S29
County: JACKSON
Qtr Qtr: SWSE Section: 29 Township: 8N Range: 80W Meridian: 6
Latitude: 40.629880 Longitude: -106.395448

Flowline Start Point Riser

Latitude: 40.630445 Longitude: -106.395977 PDOP: Measurement Date: 10/24/2019
Equipment at Start Point Riser: Custody Transfer Point

Flowline Description and Testing

Type of Fluid Transferred: Multiphase Pipe Material: HDPE Max Outer Diameter:(Inches) 6.000
 Bedding Material: Native Materials Date Construction Completed: 11/15/2019
 Maximum Anticipated Operating Pressure (PSI): 150 Testing PSI: 307
 Test Date: 11/15/2019

OPERATOR COMMENTS AND SUBMITTAL

Comments

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

Signed: _____ Date: 11/22/2019 Email: doverbey@sandridgeenergy.com

Print Name: Diane Overbey Title: Regulatory Analyst II

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

Att Doc Num	Name
402246632	PRESSURE TEST
402246638	FLOWLINE LAYOUT DRAWING

Total Attach: 2 Files