

State of Colorado
Energy & Carbon Management Commission

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ECMC RECEPTION

Receive Date:

06/28/2024

Document Number:

403790288

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

ECMC Operator Number: 10633 Contact Person: James Miller
Company Name: CRESTONE PEAK RESOURCES OPERATING LLC Phone: (720) 984-7460
Address: 555 17TH STREET SUITE 3700 Email: jmiller@civiresources.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: 323245 Location Type: Production Facilities
Name: ARISTOCRAT ANGUS-63N65W Number: 3SESE
County: WELD
Qtr Qtr: SESE Section: 3 Township: 3N Range: 65W Meridian: 6
Latitude: 40.248897 Longitude: -104.642056

Description of Corrosion Protection

Crestone pipelines are covered in a protective external coating. Flowlines are subject to thorough inspections and fabrication standards during installation to minimize coating and pipe defects. Crestone maintains a chemical program to reduce internal corrosion. If a flowline is found to lack integrity, Crestone will investigate, report, and remediate any spills in accordance with the 900 series rules.

Description of Integrity Management Program

Crestone flowlines are pressure tested prior to placing flowlines into service. Flowlines are tested on an annual basis in accordance with COGCC 1104 series rules. If a flowline is found to lack integrity, Crestone will investigate the root cause, as well as report and remediate any spills in accordance with the 900 series rules. All repairs will be completed in accordance with COGCC 1102 Series rules.

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: 473125 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 332745 Location Type: Well Site
Name: ARISTOCRAT ANGUS 63N65W 3NESE Number: MULTI WELL PAD
County: WELD No Location ID
Qtr Qtr: NESE Section: 3 Township: 3N Range: 65W Meridian: 6
Latitude: 40.251060 Longitude: -104.644260

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: 01/17/2005
Maximum Anticipated Operating Pressure (PSI): Testing PSI:
Test Date:

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

Date: 06/09/2023

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

The flowline serving the ARISTOCRAT ANGUS 7-6-3 (05-123-22533) will be removed in its entirety via the open trench method. Once the flowline is removed, the trench will be backfilled and the land surface will be graded.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 473124 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 332745 Location Type: Well Site
Name: ARISTOCRAT ANGUS 63N65W 3NESE Number: MULTI WELL PAD
County: WELD No Location ID
Qtr Qtr: NESE Section: 3 Township: 3N Range: 65W Meridian: 6
Latitude: 40.251060 Longitude: -104.644260

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: 11/25/2011
Maximum Anticipated Operating Pressure (PSI): Testing PSI:
Test Date:

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

Date: 06/09/2023

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

The flowline serving the ARISTOCRAT ANGUS 6-8-3 (05-123-33507) will be removed in its entirety via the open trench method. Once the flowline is removed, the trench will be backfilled and the land surface will be graded.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 473126 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 332745 Location Type: Well Site
Name: ARISTOCRAT ANGUS 63N65W 3NESE Number: MULTI WELL PAD
County: WELD No Location ID
Qtr Qtr: NESE Section: 3 Township: 3N Range: 65W Meridian: 6
Latitude: 40.251060 Longitude: -104.644260

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: 08/03/2004
Maximum Anticipated Operating Pressure (PSI): Testing PSI:
Test Date:

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

Date: 03/30/2023

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

Flowline is co-located located in the same trench as the Aristocrat Angus 7-6-3 (12322533_FL) and Aristocrat Angus 6-8-3 (12333507_FL). Flowline will be abandoned in place as per Rule 1105.d and verified by a third party. See attached exhibit for flowline path.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 473127 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: 323244 Location Type: Well Site
Name: ARISTOCRAT-63N65W Number: 3NESE
County: WELD No Location ID
Qtr Qtr: NESE Section: 3 Township: 3N Range: 65W Meridian: 6
Latitude: 40.252527 Longitude: -104.642076

Latitude:

Longitude:

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: Native Materials Date Construction Completed: 01/08/1987

Maximum Anticipated Operating Pressure (PSI): 80 Testing PSI: _____

Test Date: _____

OFF LOCATION FLOWLINE Abandonment Verification

Date: 04/24/2024

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:

The flowline serving the ARISTOCRAT 43-3C was removed in its entirety. Bellholes were dug on average every 80 feet and the line pulled. Once the flowline is removed, any areas that need it will be backfilled and the land surface will be graded.

OPERATOR COMMENTS AND SUBMITTAL

Comments

Form 44 filed to report POST-ABANDONMENT verification. The following flowline(s) were removed:
12312761_FL: previously abandoned in place, serviced Aristocrat 43-3C(05-123-12761)
Updated GIS data attached.
All other related flowlines will remain as previously reported.

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

Signed: _____ Date: 06/28/2024 Email: flowlines@civiresources.com

Print Name: Stephany Olsen Title: Sr. Regulatory Analyst

Based on the information provided herein, this Flowline Report complies with ECMC Rules and applicable orders and is hereby approved.

ECMC Approved: _____ Director of ECMC Date: _____

CONDITIONS OF APPROVAL, IF ANY LIST

COA Type

Description

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ATTACHMENT LIST

Att Doc Num

Name

403809469	OFF-LOCATION FLOWLINE GIS SHP
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Total Attach: 1 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)