

State of Colorado
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

Receive Date:

11/19/2018

Document Number:

401840003

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: 10575 Contact Person: Jeff Rickard
Company Name: 8 NORTH LLC Phone: (720) 737-5144
Address: 370 17TH STREET SUITE 5300 Email: jrickard@extractionog.com
City: DENVER State: CO Zip: 80202
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: Location Type: Production Facilities
Name: MACY #1, 2 Number:
County: BOULDER
Qtr Qtr: SWSW Section: 3 Township: 1N Range: 69W Meridian: 6
Latitude: 40.075197 Longitude: -105.104088

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION**Flowline End Point Riser**

Latitude: 40.075237 Longitude: -105.103972 PDOP: 1.0 Measurement Date: 05/23/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 321265 Location Type: Well Site ☐ No Location ID
Name: MACY-61N69W Number: 3SWSW
County: BOULDER
Qtr Qtr: SWSW Section: 3 Township: 1N Range: 69W Meridian: 6
Latitude: 40.076500 Longitude: -105.107550

Flowline Start Point Riser

Latitude: 40.076490 Longitude: -105.107511 PDOP: 1.0 Measurement Date: 05/23/2017
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: 01/30/1981
Maximum Anticipated Operating Pressure (PSI): 500 Testing PSI: 425
Test Date: 05/05/2017

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION**Flowline End Point Riser**

Latitude: 40.075248 Longitude: -105.103982 PDOP: 1.0 Measurement Date: 05/23/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 321283 Location Type: Well Site ☐ No Location ID
Name: MACY-61N69W Number: 3SENW
County: BOULDER
Qtr Qtr: SENW Section: 3 Township: 1N Range: 69W Meridian: 6
Latitude: 40.081950 Longitude: -105.105300

Flowline Start Point Riser

Latitude: 40.081918 Longitude: -105.105254 PDOP: 0.9 Measurement Date: 05/23/2017
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: 10/30/1981
Maximum Anticipated Operating Pressure (PSI): 500 Testing PSI: 490
Test Date: 05/15/2018

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: 11/19/2018 Email: emartinez@h2eincorporated.com

Print Name: Emily Martinez Title: Environmental Scientist

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**

401840037

PRESSURE TEST

401840038

PRESSURE TEST

Total Attach: 2 Files