

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:

12/21/2018

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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: 10459 Contact Person: Jeff Rickard
Company Name: EXTRACTION OIL & GAS INC 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: 417831 Location Type: Production Facilities
Name: Mark PC GK Number: 11-02 Tank
County: WELD
Qtr Qtr: SENE Section: 11 Township: 11N Range: 61W Meridian: 6
Latitude: 40.936580 Longitude: -104.163170

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATIONFlowline End Point Riser

Latitude: 40.937145 Longitude: -104.163278 PDOP: 1.0 Measurement Date: 07/15/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 419904 Location Type: Well Site ☐ No Location ID
Name: Purcell PC Number: GK11-10
County: WELD
Qtr Qtr: NWSE Section: 11 Township: 11N Range: 61W Meridian: 6
Latitude: 40.934320 Longitude: -104.170010

Flowline Start Point Riser

Latitude: 40.934324 Longitude: -104.170043 PDOP: 0.9 Measurement Date: 07/15/2018
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: 01/07/2011
Maximum Anticipated Operating Pressure (PSI): 500 Testing PSI: 100
Test Date: 09/24/2018

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: 12/21/2018 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**

401864192

PRESSURE TEST

Total Attach: 1 Files