

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:

09/03/2019

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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: 8960 Contact Person: Fred Kayser  
Company Name: BONANZA CREEK ENERGY OPERATING COMPANY Phone: (303) 3356904  
LLC  
Address: 410 17TH STREET SUITE #1400 Email: fkayser@bonanzacrk.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: 305245 Location Type: Production Facilities  
Name: 70 Ranch Number: 11-27  
County: WELD  
Qtr Qtr: NWNW Section: 27 Township: 5N Range: 63W Meridian: 6  
Latitude: 40.375440 Longitude: -104.429500

**FLOWLINE FACILITY INFORMATION**

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

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

Latitude: 40.375180 Longitude: -104.429347 PDOP: Measurement Date: 09/03/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 331058 Location Type: Well Site ☐ No Location ID  
Name: Perkins Number: 12-27  
County: WELD  
Qtr Qtr: SWNW Section: 27 Township: 5N Range: 63W Meridian: 6  
Latitude: 40.372360 Longitude: -104.428750

**Flowline Start Point Riser**

Latitude: 40.372300 Longitude: -104.428630 PDOP: Measurement Date: 09/03/2019  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Crude Oil Emulsion Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000  
Bedding Material: Native Materials Date Construction Completed: 07/10/2012  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

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

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

Latitude: 40.375196 Longitude: -104.429393 PDOP: \_\_\_\_\_ Measurement Date: 09/03/2019  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 331058 Location Type: \_\_\_\_\_ Well Site ☐ No Location ID  
Name: Perkins Number: 12-27  
County: WELD  
Qtr Qtr: SWNW Section: 27 Township: 5N Range: 63W Meridian: 6  
Latitude: 40.372360 Longitude: -104.428750

**Flowline Start Point Riser**

Latitude: 40.372420 Longitude -104.428710 PDOP: \_\_\_\_\_ Measurement Date: 09/03/2019  
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: Crude Oil Emulsion Pipe Material: Carbon Steel Max Outer Diameter:(Inches) 2.000  
Bedding Material: Native Materials Date Construction Completed: 07/10/2012  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**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: 09/03/2019 Email: fkayser@bonanzacrk.com

Print Name: Fred Kayser Title: EHS Specialist

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**

<u>Att Doc Num</u>	<u>Name</u>
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Total Attach: 0 Files