

State of Colorado Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date: 09/04/2018

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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: 47120 Contact Person: Mike Holle
Company Name: KERR MCGEE OIL & GAS ONSHORE LP Phone: (720) 9296639
Address: P O BOX 173779 Email: mike.holle@anadarko.com
City: DENVER State: CO Zip: 80217-3779
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 [X] No [ ]

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 306343 Location Type: Production Facilities
Name: STATE-61N68W Number: 16SWNW
County: WELD
Qtr Qtr: SWNW Section: 16 Township: 1N Range: 68W Meridian: 6
Latitude: 40.054211 Longitude: -105.014603

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 457572 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.053345 Longitude: -105.014672 PDOP: 1.5 Measurement Date: 09/13/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 306343 Location Type: Well Site [ ] No Location ID
Name: STATE-61N68W Number: 16SWNW
County: WELD
Qtr Qtr: SWNW Section: 16 Township: 1N Range: 68W Meridian: 6
Latitude: 40.054211 Longitude: -105.014603

Flowline Start Point Riser

Latitude: 40.054210 Longitude: -105.014610 PDOP: 1.3 Measurement Date: 09/13/2017
Equipment at Start Point Riser: Well

**Flowline Description and Testing**

Type of Fluid Transferred: \_\_\_\_\_ Pipe Material: \_\_\_\_\_ Max Outer Diameter:(Inches) \_\_\_\_\_  
Bedding Material: \_\_\_\_\_ Date Construction Completed: 05/11/2009  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OPERATOR COMMENTS AND SUBMITTAL**

Comments STATE 5-16 05-123-24481 FL STATE 5-16  
The State 5-16 P&A is complete. The well head was cut and capped on 8/30/2018 and the entire flow line was removed on 8/30/2018.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.  
Signed: \_\_\_\_\_ Date: 09/04/2018 Email: mike.holle@anadarko.com

Print Name: Mike Holle Title: Spatial Data Analyst

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: 9/24/2018

**Attachment Check List**

Att Doc Num	Name

Total Attach: 0 Files