

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

09/12/2018

Document Number:

401760334

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: 336097 Location Type: Production Facilities  
Name: ANDERSON FAMILY TRUST C-63N68W Number: 34SWNE  
County: WELD  
Qtr Qtr: SWNE Section: 34 Township: 3N Range: 68W Meridian: 6  
Latitude: 40.185500 Longitude: -104.984780

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.185300 Longitude: -104.984516 PDOP: Measurement Date: 10/03/2017  
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 311501 Location Type: Well Site [ ] No Location ID  
Name: WATERFRONT-63N68W Number: 34SWNE  
County: WELD  
Qtr Qtr: SWNE Section: 34 Township: 3N Range: 68W Meridian: 6  
Latitude: 40.185628 Longitude: -104.984828

Flowline Start Point Riser

Latitude: 40.185625 Longitude: -104.984978 PDOP: Measurement Date: 10/03/2017  
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: 11/14/2008  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OPERATOR COMMENTS AND SUBMITTAL**

Comments 

The WATERFRONT 7-34X P & A is complete, the well was cut and capped on 1/25/17 and the flow line will remain in place for now due to the proximity of other flow lines.The entire flow line was removed for the Waterfront 7-34X during other work activities. WATERFRONT 2-34 05-123-25728 FL-WATERFRONT 2-34
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I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.  
Signed: \_\_\_\_\_ Date: 09/12/2018 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: \_\_\_\_\_

**Attachment Check List**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
401760352	FLOWLINE LAYOUT DRAWING

Total Attach: 1 Files