

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:

08/27/2018

Document Number:

401745510

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: 327388 Location Type: Production Facilities
Name: LUHMAN UPRR 31-13-63N66W Number: 13NWNE
County: WELD
Qtr Qtr: NWNE Section: 13 Township: 3N Range: 66W Meridian: 6
Latitude: 40.230720 Longitude: -104.722590

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 458408 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser
Latitude: 40.230855 Longitude: -104.722429 PDOP: 1.6 Measurement Date: 04/09/2018
Equipment at End Point Riser: Separator
Flowline Start Point Location Identification
Location ID: 327388 Location Type: Well Site [] No Location ID
Name: LUHMAN UPRR 31-13-63N66W Number: 13NWNE
County: WELD
Qtr Qtr: NWNE Section: 13 Township: 3N Range: 66W Meridian: 6
Latitude: 40.230720 Longitude: -104.722590
Flowline Start Point Riser
Latitude: 40.230717 Longitude: -104.722584 PDOP: 1.7 Measurement Date: 04/09/2018
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: 10/05/2009
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL

Comments The Luhman UPRR 31-13 3 P&A is complete. The well head was cut and capped on 8/15/2018. The entire flow line was removed on 8/7/2018. The entire tank battery removal was completed on 8/7/2018. There is still a DCP meter on location.
LUHMAN UPRR 31-13 3 05-123-14607 FL-LUHMAN UPRR 31-13 3

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.
Signed: _____ Date: 08/27/2018 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: 10/26/2018

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files