

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:

01/11/2019

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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: 100322 Contact Person: Latrese Ousley  
Company Name: NOBLE ENERGY INC Phone: (832) 6397441  
Address: 1001 NOBLE ENERGY WAY Email: Latrese.Ousley@nblenergy.com  
City: HOUSTON State: TX Zip: 77070  
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: 319247 Location Type: Production Facilities  
Name: RMPCO KISSLER-64N66W Number: 21NENW  
County: WELD  
Qtr Qtr: NENW Section: 21 Township: 4N Range: 66W Meridian: 6  
Latitude: 40.301460 Longitude: -104.784326

**FLOWLINE FACILITY INFORMATION**

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

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

Latitude: 40.301750 Longitude: -104.784381 PDOP: Measurement Date: 05/13/2017  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 327912 Location Type: Well Site ☐ No Location ID  
Name: SCHAFER-64N66W Number: 21SWNE  
County: WELD  
Qtr Qtr: SWNE Section: 21 Township: 4N Range: 66W Meridian: 6  
Latitude: 40.299470 Longitude: -104.780690

**Flowline Start Point Riser**

Latitude: 40.299470 Longitude: -104.780690 PDOP: Measurement Date: 05/13/2017  
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: 12/08/1991  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

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

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

Latitude: 40.301750 Longitude: -104.784381 PDOP: \_\_\_\_\_ Measurement Date: 05/13/2017  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 336620 Location Type: \_\_\_\_\_ Well Site ☐ No Location ID  
Name: KISSLER K-64N66W Number: 21NWNE  
County: WELD  
Qtr Qtr: NWNE Section: 21 Township: 4N Range: 66W Meridian: 6  
Latitude: 40.302520 Longitude: -104.780990

**Flowline Start Point Riser**

Latitude: 40.302520 Longitude: -104.780990 PDOP: \_\_\_\_\_ Measurement Date: 05/13/2017  
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: 12/07/1991  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

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

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

Latitude: 40.301750 Longitude: -104.784381 PDOP: \_\_\_\_\_ Measurement Date: 05/13/2017  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 323486 Location Type: \_\_\_\_\_ Well Site ☐ No Location ID  
Name: SCHAFER-64N66W Number: 21SENE  
County: WELD  
Qtr Qtr: SENE Section: 21 Township: 4N Range: 66W Meridian: 6  
Latitude: 40.298850 Longitude: -104.775510

**Flowline Start Point Riser**

Latitude: 40.298850 Longitude -104.775510 PDOP: Measurement Date: 05/13/2017

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: 12/12/1991

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

### **FLOWLINE FACILITY INFORMATION**

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

### **OFF LOCATION FLOWLINE REGISTRATION**

#### **Flowline End Point Riser**

Latitude: 40.301540 Longitude: -104.784470 PDOP: Measurement Date: 05/13/2017

Equipment at End Point Riser: Separator

#### **Flowline Start Point Location Identification**

Location ID: 309703 Location Type: Well Site ☐ No Location ID

Name: SCHAFER K-64N66W Number: 21SWNE

County: WELD

Qtr Qtr: SWNE Section: 21 Township: 4N Range: 66W Meridian: 6

Latitude: 40.300767 Longitude: -104.778345

#### **Flowline Start Point Riser**

Latitude: 40.300767 Longitude -104.778345 PDOP: Measurement Date: 05/13/2017

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: 08/31/2007

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

### **OPERATOR COMMENTS AND SUBMITTAL**

Comments

We plan on decommissioning these lines and will report back more accurate coordinates at a later date.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.

Signed: \_\_\_\_\_ Date: 01/11/2019 Email: Latrese.Ousley@nblenergy.com

Print Name: Latrese Ousley Title: Regulatory 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>
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Total Attach: 0 Files