

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: 09/18/2018

Document Number: 401650302

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: LOGAN BOUGHAL
Company Name: NOBLE ENERGY INC Phone: (832) 6397447
Address: 1001 NOBLE ENERGY WAY Email: LOGAN.BOUGHAL@NBLEENERGY.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 [X] No []

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 302194 Location Type: Production Facilities
Name: DUGGAN-65N65W Number: 4SESE
County: WELD
Qtr Qtr: SESE Section: 4 Township: 5N Range: 65W Meridian: 6
Latitude: 40.423760 Longitude: -104.662990

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 460893 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.423780 Longitude: -104.662960 PDOP: 1.8 Measurement Date: 05/13/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 302194 Location Type: Well Site [] No Location ID
Name: DUGGAN-65N65W Number: 4SESE
County: WELD
Qtr Qtr: SESE Section: 4 Township: 5N Range: 65W Meridian: 6
Latitude: 40.423760 Longitude: -104.662990

Flowline Start Point Riser

Latitude: 40.423760 Longitude: -104.662990 PDOP: 1.8 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: 01/16/2008
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL


Comments

FLOWLINE, ALTHOUGH SHORT, IS OFF LOCATION. GPS COORDINATES FOR RISERS ARE ESTIMATES, AND CORRECTED GPS COORDINATES WILL BE REPORTED AFTER PLANNED DECOMMISSIONING OF THE LINE.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.
Signed: _____ Date: 09/18/2018 Email: LOGAN.BOUGHAL@NBLENERGY.CO
M

Print Name: LOGAN BOUGHAL Title: REGULATORY ANALYST II

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: 1/23/2019

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401650302	Form44 Submitted

Total Attach: 1 Files