

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:

12/14/2018

Document Number:

401875291

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: 436962 Location Type: Production Facilities
Name: REYNOLDS CATTLE TANK BATTERY Number: 6C-19HZ
County: WELD
Qtr Qtr: NWNW Section: 24 Township: 3N Range: 68W Meridian: 6
Latitude: 40.217003 Longitude: -104.956490

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462177 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.216863 Longitude: -104.956704 PDOP: 2.2 Measurement Date: 08/24/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 336251 Location Type: Well Site [] No Location ID
Name: REYNOLDS-63N68W Number: 24SWNW
County: WELD
Qtr Qtr: SWNW Section: 24 Township: 3N Range: 68W Meridian: 6
Latitude: 40.213060 Longitude: -104.959120

Flowline Start Point Riser

Latitude: 40.212856 Longitude: -104.959175 PDOP: 1.8 Measurement Date: 08/24/2018
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: 02/05/2007
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462178 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.216871 Longitude: -104.956709 PDOP: 2.6 Measurement Date: 08/24/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 336251 Location Type: Well Site No Location ID
Name: REYNOLDS-63N68W Number: 24SWNW
County: WELD
Qtr Qtr: SWNW Section: 24 Township: 3N Range: 68W Meridian: 6
Latitude: 40.213060 Longitude: -104.959120

Flowline Start Point Riser

Latitude: 40.213090 Longitude: -104.959059 PDOP: 1.6 Measurement Date: 08/24/2018
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: 02/21/2007
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462179 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.216911 Longitude: -104.956688 PDOP: 2.5 Measurement Date: 08/24/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 336170 Location Type: Well Site No Location ID
Name: REYNOLDS CATTLE CO. GU TRUE-63N68W Number: 24NWNW
County: WELD
Qtr Qtr: NWNW Section: 24 Township: 3N Range: 68W Meridian: 6
Latitude: 40.216110 Longitude: -104.957330

Flowline Start Point Riser

Latitude: 40.216104 Longitude -104.957306 PDOP: 1.9 Measurement Date: 08/24/2018

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: 01/15/2010
Maximum Anticipated Operating Pressure (PSI): Testing PSI:
Test Date:

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462180 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.216869 Longitude: -104.956666 PDOP: 1.6 Measurement Date: 08/24/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 336251 Location Type: Well Site No Location ID
Name: REYNOLDS-63N68W Number: 24SWNW
County: WELD
Qtr Qtr: SWNW Section: 24 Township: 3N Range: 68W Meridian: 6
Latitude: 40.213060 Longitude: -104.959120

Flowline Start Point Riser

Latitude: 40.212954 Longitude -104.959046 PDOP: 1.7 Measurement Date: 08/24/2018
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: 01/29/2003
Maximum Anticipated Operating Pressure (PSI): Testing PSI:
Test Date:

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462181 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.216860 Longitude: -104.956672 PDOP: 2.3 Measurement Date: 08/24/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 336251 Location Type: Well Site No Location ID
Name: REYNOLDS-63N68W Number: 24SWNW
County: WELD

Qtr Qtr: SWNW Section: 24 Township: 3N Range: 68W Meridian: 6
Latitude: 40.213060 Longitude: -104.959120

Flowline Start Point Riser

Latitude: 40.212843 Longitude -104.958994 PDOP: 3.1 Measurement Date: 08/20/2018
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: 01/31/2007
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462182 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.216913 Longitude: -104.956705 PDOP: 1.8 Measurement Date: 08/24/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 336170 Location Type: Well Site No Location ID
Name: REYNOLDS CATTLE CO. GU TRUE-63N68W Number: 24NWNW
County: WELD
Qtr Qtr: NWNW Section: 24 Township: 3N Range: 68W Meridian: 6
Latitude: 40.216110 Longitude: -104.957330

Flowline Start Point Riser

Latitude: 40.216240 Longitude -104.957307 PDOP: 1.6 Measurement Date: 08/24/2018
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: 02/23/1997
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL

Comments

The Reynolds 32-24 P&A is complete. The well head was cut and capped on 11/12/2018. The entire flow line was removed on 11/29/2018.

The Reynolds 5-24A P&A is complete. The well head was cut and capped on 11/13/2018. The entire flow line was removed on 11/29/2018.

The Reynolds 22-24 P&A is complete. The well head was cut and capped on 11/12/2018. The entire flow line was removed on 11/29/2018.

The Reynolds 41-23 P&A is complete. The well head was cut and capped on 11/13/2018. The entire flow line and separator were removed on 11/29/2018.

The Reynolds Cattle CO GU True 1 P&A is complete. The well head was cut and capped on 11/28/2018. The entire flow line was removed on 11/29/2018.

The Reynolds 6-24 P&A is complete. The well head was cut and capped on 11/28/2018. The entire flow line was removed on 11/29/2018.

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

Signed: _____ Date: 12/14/2018 Email: mike.holle@anadarko.com

Print Name: Mike Holle Title: SDA

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: 2/19/2019

Attachment Check List

<u>Att Doc Num</u>	<u>Name</u>
401875291	Form44 Submitted

Total Attach: 1 Files