

State of Colorado  
Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:

01/07/2019

Document Number:

401894900

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: 317836 Location Type: Production Facilities  
Name: DOWDY Number: 13-11  
County: WELD  
Qtr Qtr: SWSW Section: 11 Township: 2N Range: 65W Meridian: 6  
Latitude: 40.148690 Longitude: -104.636880

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462219 Flowline Type: Wellhead Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.148711 Longitude: -104.637353 PDOP: 1.5 Measurement Date: 05/25/2018  
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 305456 Location Type: Well Site [ ] No Location ID  
Name: MANN-62N65W Number: 11SESW  
County: WELD  
Qtr Qtr: SESW Section: 11 Township: 2N Range: 65W Meridian: 6  
Latitude: 40.147650 Longitude: -104.632690

Flowline Start Point Riser

Latitude: 40.147640 Longitude: -104.632665 PDOP: 1.5 Measurement Date: 05/25/2018  
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: 06/27/2011  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_


**OPERATOR COMMENTS AND SUBMITTAL**

Comments The Mann 14-11 P&A is complete. The well head was cut and capped on 12/17/2018. The entire flow line was removed on 12/18/2018.  
MANN 14-11 05-123-22997 FLOWLINE MANN 14-11

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.  
Signed: \_\_\_\_\_ Date: 01/07/2019 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>
401894900	Form44 Submitted

Total Attach: 1 Files