

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:

01/25/2019

Document Number:

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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: 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 ☒ No ☐

## OFF LOCATION FLOWLINE

## FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 459256 Location Type: Production Facilities  
Name: HSR-AILAND-61N63W Number: 24NWNE  
County: WELD  
Qtr Qtr: NWNE Section: 24 Township: 1N Range: 63W Meridian: 6  
Latitude: 40.043891 Longitude: -104.381196

## FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 459710 Flowline Type: Wellhead Line Action Type: Abandonment

## OFF LOCATION FLOWLINE REGISTRATION

## Flowline End Point Riser

Latitude: 40.043891 Longitude: -104.381196 PDOP: 1.5 Measurement Date: 08/05/2017  
Equipment at End Point Riser: Well

## Flowline Start Point Location Identification

Location ID: 330676 Location Type: Well Site ☐ No Location ID  
Name: HSR-AILAND-61N63W Number: 24SENE  
County: WELD  
Qtr Qtr: SENE Section: 24 Township: 1N Range: 63W Meridian: 6  
Latitude: 40.039254 Longitude: -104.378802

## Flowline Start Point Riser

Latitude: 40.039265 Longitude: -104.378793 PDOP: 1.6 Measurement Date: 08/05/2017  
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: 09/26/1997  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OFF LOCATION FLOWLINE ABANDONMENT**

Date: 06/01/2018

**Description of Abandonment**

The HSR-Ailand 8-24 P&A is complete. The well head was cut and capped on 7/18/2018. The pumping unit and motor were removed on 7/12/2018. The Separator was removed on 7/13/2018. The flow line had already been removed at the time of this work.

**OPERATOR COMMENTS AND SUBMITTAL**

Comments The HSR-Ailand 8-24 P&A is complete. The well head was cut and capped on 7/18/2018. The pumping unit and motor were removed on 7/12/2018. The Separator was removed on 7/13/2018. The flow line had already been removed at the time of this work.

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

Signed: \_\_\_\_\_ Date: 01/25/2019 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: 2/22/2019

**Attachment Check List****Att Doc Num****Name**

401917993	Form44 Submitted
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Total Attach: 1 Files