

State of Colorado
Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:

01/25/2019

Document Number:

401917993

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: 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 a 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 a 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

| <u>Att Doc Num</u> | <u>Name</u> |
|--------------------|------------------|
| 401917993 | Form44 Submitted |

Total Attach: 1 Files