

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:

01/31/2019

Document Number:

401925172

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: Latrese Ousley
Company Name: NOBLE ENERGY INC Phone: (832) 6397441
Address: 1001 NOBLE ENERGY WAY Email: Latrese.Ousley@nblenergy.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 ☒ No ☐

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 431235 Location Type: Production Facilities
Name: Leffler Number: I21-75HN Multi
County: WELD
Qtr Qtr: NENW Section: 21 Township: 6N Range: 66W Meridian: 6
Latitude: 40.478960 Longitude: -104.784020

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462483 Flowline Type: Production Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.478480 Longitude: -104.784110 PDOP: Measurement Date: 05/16/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 305669 Location Type: Well Site ☐ No Location ID
Name: LEFFLER I-66N66W Number: 21SENV
County: WELD
Qtr Qtr: SENW Section: 21 Township: 6N Range: 66W Meridian: 6
Latitude: 40.475970 Longitude: -104.785710

Flowline Start Point Riser

Latitude: 40.475970 Longitude: -104.785710 PDOP: Measurement Date: 05/16/2017
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: 12/23/2005
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462484 Flowline Type: Production Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION**Flowline End Point Riser**

Latitude: 40.478490 Longitude: -104.784100 PDOP: _____ Measurement Date: 05/16/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 305668 Location Type: Well Site ☐ No Location ID
Name: LEFFLER 1-66N66W Number: 21NWNE
County: WELD
Qtr Qtr: NWNE Section: 21 Township: 6N Range: 66W Meridian: 6
Latitude: 40.479253 Longitude: -104.780185

Flowline Start Point Riser

Latitude: 40.479253 Longitude: -104.780185 PDOP: _____ Measurement Date: 05/16/2017
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: 12/19/2005
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL

Comments We plan on decommissioning these lines and will report back more accurate coordinates at a later date.

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

Signed: _____ Date: 01/31/2019 Email: Latrese.Ousley@nblenergy.com

Print Name: Latrese Ousley Title: Regulatory Analyst

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: 2/25/2019

Attachment Check List

Att Doc Num**Name**

401925172

Form44 Submitted

Total Attach: 1 Files