

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:

02/19/2019

Document Number:

401752315

## 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) 639-7441  
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: 460801 Location Type: Production Facilities  
Name: Hambert Number: \_\_\_\_\_  
County: WELD  
Qtr Qtr: NWNW Section: 32 Township: 4N Range: 65W Meridian: 6  
Latitude: 40.275870 Longitude: -104.694000

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 462542 Flowline Type: Production Line Action Type: Registration

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

Latitude: 40.275870 Longitude: -104.694000 PDOP: \_\_\_\_\_ Measurement Date: 05/15/2017  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 311349 Location Type: Well Site ☐ No Location ID  
Name: HAMBERT R G-64N65W Number: 32NENW  
County: WELD  
Qtr Qtr: NENW Section: 32 Township: 4N Range: 65W Meridian: 6  
Latitude: 40.274160 Longitude: -104.689300

**Flowline Start Point Riser**

Latitude: 40.274160 Longitude: -104.689300 PDOP: \_\_\_\_\_ Measurement Date: 05/15/2017  
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: 08/02/1987  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 462543 Flowline Type: Production Line Action Type: Registration

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

Latitude: 40.275870 Longitude: -104.694000 PDOP: \_\_\_\_\_ Measurement Date: 05/15/2017  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 311500 Location Type: \_\_\_\_\_ Well Site ☐ No Location ID  
Name: HAMBERT G-64N65W Number: 32NWNW  
County: WELD  
Qtr Qtr: NWNW Section: 32 Township: 4N Range: 65W Meridian: 6  
Latitude: 40.273805 Longitude: -104.693565

**Flowline Start Point Riser**

Latitude: 40.273805 Longitude: -104.693565 PDOP: \_\_\_\_\_ Measurement Date: 05/15/2017  
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: 02/26/2008  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 462544 Flowline Type: Production Line Action Type: Registration

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

Latitude: 40.275870 Longitude: -104.694000 PDOP: \_\_\_\_\_ Measurement Date: 05/15/2017  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 332862 Location Type: \_\_\_\_\_ Well Site ☐ No Location ID  
Name: MUSICK-MCCLINTOCK-64N65W Number: 32NWNE  
County: WELD  
Qtr Qtr: NWNE Section: 32 Township: 4N Range: 65W Meridian: 6  
Latitude: 40.274318 Longitude: -104.684554

**Flowline Start Point Riser**

Latitude: 40.274318 Longitude -104.684554 PDOP: Measurement Date: 05/15/2017

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: 07/04/1987

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

### **FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: 462545 Flowline Type: Production Line Action Type: Registration

### **OFF LOCATION FLOWLINE REGISTRATION**

#### **Flowline End Point Riser**

Latitude: 40.275870 Longitude: -104.694000 PDOP: Measurement Date: 05/15/2017

Equipment at End Point Riser: Separator

#### **Flowline Start Point Location Identification**

Location ID: 323736 Location Type: Well Site ☐ No Location ID

Name: HAMBERT R G-64N65W Number: 32NENE

County: WELD

Qtr Qtr: NENE Section: 32 Township: 4N Range: 65W Meridian: 6

Latitude: 40.274466 Longitude: -104.680481

#### **Flowline Start Point Riser**

Latitude: 40.274466 Longitude -104.680481 PDOP: Measurement Date: 05/15/2017

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: 08/13/1987

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: 02/19/2019 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: 2/26/2019

### **Attachment Check List**

**Att Doc Num**

**Name**

401752315

Form44 Submitted

Total Attach: 1 Files