

State of Colorado  
Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:

03/01/2019

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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 [X] No [ ]

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 333010 Location Type: Production Facilities  
Name: UPRR 50 PAN AM-61N66W-TANK Number: 3NENW  
County: WELD  
Qtr Qtr: NENW Section: 3 Township: 1N Range: 66W Meridian: 6  
Latitude: 40.087002 Longitude: -104.760576

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser  
Latitude: 40.087002 Longitude: -104.760576 PDOP: 1.2 Measurement Date: 06/29/2018  
Equipment at End Point Riser: Separator  
Flowline Start Point Location Identification  
Location ID: 333010 Location Type: Well Site [ ] No Location ID  
Name: UPRR 50 PAN AM-61N66W Number: 3NENW  
County: WELD  
Qtr Qtr: NENW Section: 3 Township: 1N Range: 66W Meridian: 6  
Latitude: 40.085554 Longitude: -104.765800  
Flowline Start Point Riser  
Latitude: 40.085933 Longitude: -104.765905 PDOP: 2.0 Measurement Date: 05/08/2018  
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: 05/13/2003  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OPERATOR COMMENTS AND SUBMITTAL**

Comments C&C 5/8/18 and a section of flowline removed on 5/18/18. Remaining section to be left in place due to proximity of other flowlines in the area.  
BURKHARDT 3-3A 05-123-21333 FLOW LINE BURKHARDT 3-3A

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.  
Signed: \_\_\_\_\_ Date: 03/01/2019 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: \_\_\_\_\_

**Attachment Check List**

<b><u>Att Doc Num</u></b>	<b><u>Name</u></b>
401957052	FLOWLINE LAYOUT DRAWING

Total Attach: 1 Files