

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109



OGCC RECEPTION

Receive Date:

02/22/2019

Document Number:

401948629

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: 327916 Location Type: Production Facilities  
Name: UNIT /A/ GAS UNIT-62N67W Number: 16SWSE  
County: WELD  
Qtr Qtr: SWSE Section: 16 Township: 2N Range: 67W Meridian: 6  
Latitude: 40.134710 Longitude: -104.890830

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462207 Flowline Type: Wellhead Line Action Type: Abandonment

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.134723 Longitude: -104.890835 PDOP: 1.2 Measurement Date: 12/16/2017  
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 462476 Location Type: Well Site [ ] No Location ID  
Name: UNIT /A/ GAS UNIT-62N67W Number: 16SWSE  
County: WELD  
Qtr Qtr: SWSE Section: 16 Township: 2N Range: 67W Meridian: 6  
Latitude: 40.134306 Longitude: -104.890614

Flowline Start Point Riser

Latitude: 40.134325 Longitude: -104.890635 PDOP: 1.3 Measurement Date: 12/16/2017  
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: 12/06/1991  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**OFF LOCATION FLOWLINE ABANDONMENT**

Date: 12/10/2018

**Description of Abandonment**

The Unit A Gas Unit 2 P&A is complete, The well head was cut and capped on 12/6/2018. The entire flow line was removed on 12/10/2018.

**OPERATOR COMMENTS AND SUBMITTAL**

Comments The Unit A Gas Unit 2 P&A is complete, The well head was cut and capped on 12/6/2018. The entire flow line was removed on 12/10/2018.  
UNIT A GAS UNIT 2 05-123-15316 FLOWLINE UNIT A GAS UNIT 2

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

Signed: \_\_\_\_\_ Date: 02/22/2019 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: 3/7/2019

**Attachment Check List**

<b>Att Doc Num</b>	<b>Name</b>
401948629	Form44 Submitted

Total Attach: 1 Files