

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:

04/24/2019

Document Number:

402019980

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: 464085 Location Type: Production Facilities
Name: SHUR VIEW-65N67W-TANK Number: 3SWNW
County: WELD
Qtr Qtr: SWNW Section: 3 Township: 5N Range: 67W Meridian: 6
Latitude: 40.431956 Longitude: -104.883875

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 464087 Flowline Type: Wellhead Line Action Type: Abandonment

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.431956 Longitude: -104.883875 PDOP: 1.3 Measurement Date: 10/27/2017
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 306134 Location Type: Well Site [] No Location ID
Name: SHUR VIEW-65N67W Number: 3NWNW
County: WELD
Qtr Qtr: NWNW Section: 3 Township: 5N Range: 67W Meridian: 6
Latitude: 40.432760 Longitude: -104.882780

Flowline Start Point Riser

Latitude: 40.432751 Longitude: -104.882784 PDOP: 1.2 Measurement Date: 10/13/2017
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: 09/07/2006
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE ABANDONMENT

Date: 02/28/2019

Description of Abandonment

The Shur View 18-3 P&A is complete. The well head was cut and capped on 2/26/2019. The entire flow line (543 Feet) was removed on 2/28/2019. The separator for this well was removed on 3/4/2019.

OPERATOR COMMENTS AND SUBMITTAL

Comments

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

Signed: _____ Date: 04/24/2019 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: 4/25/2019

Attachment Check List

Att Doc Num	Name
402019980	Form44 Submitted

Total Attach: 1 Files