

State of Colorado Oil and Gas Conservation Commission

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OGCC RECEPTION

Receive Date:

08/27/2019

Document Number:

402156765

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 [X] No []

OFF LOCATION FLOWLINE

FLOWLINE ENDPOINT LOCATION IDENTIFICATION

Location ID: 420050 Location Type: Production Facilities
Name: DECHANT STATE H Number: 36-18D
County: WELD
Qtr Qtr: NWNW Section: 36 Township: 3N Range: 65W Meridian: 6
Latitude: 40.185900 Longitude: -104.617510

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 465053 Flowline Type: Production Line Action Type: Abandonment

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.185910 Longitude: -104.617520 PDOP: Measurement Date: 04/25/2011
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 420050 Location Type: Well Site [] No Location ID
Name: DECHANT STATE H Number: 36-18D
County: WELD
Qtr Qtr: NWNW Section: 36 Township: 3N Range: 65W Meridian: 6
Latitude: 40.185900 Longitude: -104.617510

Flowline Start Point Riser

Latitude: 40.185900 Longitude: -104.617510 PDOP: Measurement Date: 04/25/2011
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: 06/22/2011
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE ABANDONMENT

Date: 08/31/2018

Description of Abandonment

Purged fluids, abandoned in place, cut risers below ground and plugged both ends.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 465054 Flowline Type: Production Line Action Type: Abandonment

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.185920 Longitude: -104.617610 PDOP: _____ Measurement Date: 04/25/2011

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 420050 Location Type: _____ Well Site No Location ID

Name: DECHANT STATE H Number: 36-18D

County: WELD

Qtr Qtr: NWNW Section: 36 Township: 3N Range: 65W Meridian: 6

Latitude: 40.185900 Longitude: -104.617510

Flowline Start Point Riser

Latitude: 40.185900 Longitude: -104.617510 PDOP: _____ Measurement Date: 04/25/2011

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: 06/22/2011
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE ABANDONMENT

Date: 06/18/2019

Description of Abandonment

Purged fluids, abandoned in place, cut risers below ground and plugged both ends.

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 465055 Flowline Type: Production Line Action Type: Abandonment

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.185940 Longitude: -104.617690 PDOP: Measurement Date: 04/25/2011

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 420050 Location Type: Well Site No Location ID

Name: DECHANT STATE H Number: 36-18D

County: WELD

Qtr Qtr: NWNW Section: 36 Township: 3N Range: 65W Meridian: 6

Latitude: 40.185900 Longitude: -104.617510

Flowline Start Point Riser

Latitude: 40.185900 Longitude: -104.617510 PDOP: Measurement Date: 04/25/2011

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: 06/22/2011

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

OFF LOCATION FLOWLINE ABANDONMENT

Date: 06/18/2019

Description of Abandonment

Purged fluids, abandoned in place, cut risers below ground and plugged both ends.

OPERATOR COMMENTS AND SUBMITTAL

Comments Noble respectfully submits this form to report flowlines that were abandoned.

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

Signed: Date: 08/27/2019 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:

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files