FORM 44 Rev 03/18

State of Colorado Oil and Gas Conservation Commission



OGCC RECEPTION

Receive Date:

04/26/2019

Document Number: 401957188

Phone: (303) 894-2100 Fax: (303) 894-2109 Off-Location Flowline

1120 Lincoln Street, Suite 801, Denver, Colorado 80203

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: CANDICE BARBER				
Company Name: KERR MCGEE OIL & GAS ONSHORE LP Phone: (970) 515-1671				
Address: P O BOX 173779 Email: CANDICE.BARBER@ANADARKO.C OM				
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: 311490 Location Type: Production Facilities				
Name: JOHNSON NIVEN U-62N68W Number: 13SENW				
County: WELD				
Qtr Qtr: SENW Section: 13 Township: 2N Range: 68W Meridian: 6				
Latitude: 40.142099 Longitude: -104.955771				
FLOWLINE FACILITY INFORMATION				
Flowline Facility ID: 456010 Flowline Type: Wellhead Line Action Type: Abandonment				
OFF LOCATION FLOWLINE REGISTRATION				
Flowline End Point Riser				
Latitude:40.142310 Longitude:104.955580 PDOP:1.3 Measurement Date:08/19/2017				
Equipment at End Point Riser: Separator				
Flowline Start Point Location Identification				
Location ID: 329372 Location Type: Well Site No Location ID				
Name: JOHNSON-NIVEN U-62N68W Number: 13NENW				
County: WELD				
Qtr Qtr: NENW Section: 13 Township: 2N Range: 68W Meridian: 6				
Latitude: 40.144080 Longitude: -104.953800				
Flowline Start Point Riser				
Latitude: 40.144072 Longitude -104.953790 PDOP: 1.3 Measurement Date: 08/19/2017				
Equipment at Start Point Riser: Well				

Type of Fluid Transferred:		Pipe Material:	Ma	x Outer Diameter:(Inches)
		Date Cons		
		sure (PSI):		il:
Test Date:			-	
OFF LOCATION I	FLOWLINE ABANDONI	MENT		
	6/13/2018	<u>viciai</u>		
	of Abandonment			
were removed The entire tan	l on 7/25/2018. The rem k battery was removed	aining section of flowline w	as cemented in pl	n 6/13/2018. Sections of flow line lace per landowners request.
PERATOR COMM	ENTS AND SUBMITTAL			
		s complete. The well head wa entire tank battery was remo		n 6/13/2018. Sections of flow line
JOHN	SON NIVEN U 13-3 05-123	3-17259		
I hereby certify th Signed:	at the statements made			e, true, correct and complete. E.BARBER@ANADARKO.COM
Print Name: CAN		Title: REGULATOR	Y ANALYST	
Based on the informapproved.	nation provided herein, this	s Flowline Report complies wi	th COGCC Rules ar	nd applicable orders and is hereby
COGCC Approved		Directo	or of COGCC	Date:
		Attachment Chec	k List	
Att Doc Num	Name_			
101957188	Form44 Submitted			
102023226	FLOWLINE LAYOUT	DRAWING		

Att Doc Num	<u>Name</u>
401957188	Form44 Submitted
402023226	FLOWLINE LAYOUT DRAWING

Total Attach: 2 Files