

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: 07/23/2018 Document Number: 401710713

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: LOGAN BOUGHAL
Company Name: NOBLE ENERGY INC Phone: (832) 6397447
Address: 1001 NOBLE ENERGY WAY Email: LOGAN.BOUGHAL@NBLEENERGY.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: 317709 Location Type: Production Facilities
Name: GUTTERSEN STATE Number: D28-21D TANK
County: WELD
Qtr Qtr: NWSW Section: 28 Township: 3N Range: 64W Meridian: 6
Latitude: 40.192650 Longitude: -104.560860

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 456507 Flowline Type: Production Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.192950 Longitude: -104.561000 PDOP: 1.6 Measurement Date: 12/09/2011
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 328441 Location Type: Well Site [] No Location ID
Name: GUTTERSEN STATE Number: D28-21D
County: WELD
Qtr Qtr: NESW Section: 28 Township: 3N Range: 64W Meridian: 6
Latitude: 40.195190 Longitude: -104.557990

Flowline Start Point Riser

Latitude: 40.195190 Longitude: -104.557990 PDOP: 1.6 Measurement Date: 12/09/2011
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: 10/28/1992
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 456508 Flowline Type: Production Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.192950 Longitude: -104.561000 PDOP: 2.1 Measurement Date: 09/22/2006
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 328442 Location Type: Well Site No Location ID
Name: SPIKE ST. GWS-63N64W Number: 28NWSW
County: WELD
Qtr Qtr: NWSW Section: 28 Township: 3N Range: 64W Meridian: 6
Latitude: 40.194610 Longitude: -104.563960

Flowline Start Point Riser

Latitude: 40.194610 Longitude: -104.563960 PDOP: 2.1 Measurement Date: 09/22/2006
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: 10/10/1992
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 456509 Flowline Type: Production Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.192950 Longitude: -104.561000 PDOP: 2.7 Measurement Date: 09/22/2006
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 317709 Location Type: Well Site No Location ID
Name: GUTTERSEN STATE Number: D28-21D TANK
County: WELD
Qtr Qtr: NWSW Section: 28 Township: 3N Range: 64W Meridian: 6
Latitude: 40.192650 Longitude: -104.560860

Flowline Start Point Riser

Latitude: 40.192650 Longitude -104.560860 PDOP: 2.7 Measurement Date: 09/22/2006

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: 02/05/1973
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 456510 Flowline Type: Production Line Action Type: Registration

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.192950 Longitude: -104.561000 PDOP: 2.3 Measurement Date: 05/22/2008
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 306668 Location Type: _____ Well Site No Location ID
Name: SPIKE STATE D-63N64W Number: 28SWSW
County: WELD
Qtr Qtr: SWSW Section: 28 Township: 3N Range: 64W Meridian: 6
Latitude: 40.190455 Longitude: -104.563433

Flowline Start Point Riser

Latitude: 40.190455 Longitude -104.563433 PDOP: 2.3 Measurement Date: 05/22/2008
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: 11/13/2007
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OPERATOR COMMENTS AND SUBMITTAL

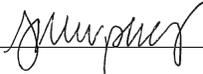
Comments

WE PLAN ON DECOMMISSIONING THESE LINES, AND WILL REPORT MORE ACCURATE GPS DATA AFTER WORK IS PERFORMED.

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete.
Signed: _____ Date: 07/23/2018 Email: LOGAN.BOUGHAL@NBLENERGY.COM

Print Name: LOGAN BOUGHAL Title: REGULATORY ANALYST II

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: 8/6/2018

Attachment Check List

Att Doc Num **Name**

<u>Att Doc Num</u>	<u>Name</u>

Total Attach: 0 Files