

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:

10/31/2018

Document Number:

401819383

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: 416382 Location Type: Production Facilities
Name: BALLINGER TANK BATTERY Number: 31-18
County: WELD
Qtr Qtr: NWNW Section: 18 Township: 3N Range: 67W Meridian: 6
Latitude: 40.230397 Longitude: -104.937987

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 457548 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.230017 Longitude: -104.937769 PDOP: Measurement Date: 01/05/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 332526 Location Type: Well Site [] No Location ID
Name: HSR-ROTH-63N67W Number: 18SEW
County: WELD
Qtr Qtr: SENW Section: 18 Township: 3N Range: 67W Meridian: 6
Latitude: 40.227900 Longitude: -104.934960

Flowline Start Point Riser

Latitude: 40.227900 Longitude: -104.934968 PDOP: Measurement Date: 01/05/2018
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: 05/21/2008
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE REMOVAL FROM SERVICE

Date: _____

Description of Removal from Service

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 457546 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.229979 Longitude: -104.937810 PDOP: 1.2 Measurement Date: 01/05/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 328584 Location Type: _____ Well Site No Location ID

Name: BALLINGER Number: 31-18

County: WELD

Qtr Qtr: SWNW Section: 18 Township: 3N Range: 67W Meridian: 6

Latitude: 40.229050 Longitude: -104.938210

Flowline Start Point Riser

Latitude: 40.228907 Longitude: -104.938169 PDOP: 1.3 Measurement Date: 01/05/2018

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: 09/15/2010
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE REMOVAL FROM SERVICE

Date: _____

Description of Removal from Service

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 457700 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.230028 Longitude: -104.937769 PDOP: 1.2 Measurement Date: 01/05/2018

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 328584 Location Type: Well Site No Location ID
Name: BALLINGER Number: 31-18
County: WELD
Qtr Qtr: SWNW Section: 18 Township: 3N Range: 67W Meridian: 6
Latitude: 40.229050 Longitude: -104.938210

Flowline Start Point Riser

Latitude: 40.228910 Longitude: -104.938226 PDOP: 1.3 Measurement Date: 01/05/2018
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: 02/01/2012
Maximum Anticipated Operating Pressure (PSI): Testing PSI:
Test Date:

OFF LOCATION FLOWLINE REMOVAL FROM SERVICE

Date:

Description of Removal from Service

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 457547 Flowline Type: Wellhead Line Action Type:

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.229972 Longitude: -104.937877 PDOP: Measurement Date: 01/08/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 328584 Location Type: Well Site No Location ID
Name: BALLINGER Number: 31-18
County: WELD
Qtr Qtr: SWNW Section: 18 Township: 3N Range: 67W Meridian: 6
Latitude: 40.229050 Longitude: -104.938210

Flowline Start Point Riser

Latitude: 40.228904 Longitude: -104.938057 PDOP: Measurement Date: 01/08/2018
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: 09/22/2010
Maximum Anticipated Operating Pressure (PSI):

Test Date: _____

OFF LOCATION FLOWLINE REMOVAL FROM SERVICE

Date: _____

Description of Removal from Service

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 457703 Flowline Type: Wellhead Line Action Type: _____

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.229963 Longitude: -104.937883 PDOP: 1.6 Measurement Date: 01/05/2018

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 328584 Location Type: Well Site No Location ID

Name: BALLINGER Number: 31-18

County: WELD

Qtr Qtr: SWNW Section: 18 Township: 3N Range: 67W Meridian: 6

Latitude: 40.229050 Longitude: -104.938210

Flowline Start Point Riser

Latitude: 40.228902 Longitude -104.938112 PDOP: 1.5 Measurement Date: 01/05/2018

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: 09/15/2010

Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____

Test Date: _____

OFF LOCATION FLOWLINE REMOVAL FROM SERVICE

Date: _____

Description of Removal from Service

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 458409 Flowline Type: Wellhead Line Action Type: Abandonment

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.229970 Longitude: -104.937803 PDOP: 1.4 Measurement Date: 01/08/2018

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 331333 Location Type: Well Site No Location ID

Name: HSR-BALLINGER-63N67W

Number: 18NWNW

County: WELD

Qtr Qtr: NWNW

Section: 18

Township: 3N

Range: 67W

Meridian: 6

Latitude: 40.232440

Longitude: -104.938230

Flowline Start Point Riser

Latitude: 40.232440

Longitude: -104.938220

PDOP: 1.3

Measurement Date: 01/05/2018

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: 01/23/2002

Maximum Anticipated Operating Pressure (PSI): Testing PSI:

Test Date:

OFF LOCATION FLOWLINE ABANDONMENT

Date: 08/16/2018

Description of Abandonment

The HSR-Ballinger 4-18 P&A is complete. The well head was cut and capped on 7/19/2018. The entire flow line was removed on 8/16/2018. The entire flow line was also removed for the HSR-Pfister 3-18 on 8/16/2018. We did not have a P&A packet on this well.
HSR-BALLINGER 4-18 05-123-20513 FL-HSR-BALLINGER 4-18

OPERATOR COMMENTS AND SUBMITTAL

Comments The HSR-Ballinger 4-18 P&A is complete. The well head was cut and capped on 7/19/2018. The entire flow line was removed on 8/16/2018. The entire flow line was also removed for the HSR-Pfister 3-18 on 8/16/2018. We did not have a P&A packet on this well.
HSR-BALLINGER 4-18 05-123-20513 FL-HSR-BALLINGER 4-18

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

Signed: Date: 10/31/2018 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:

Attachment Check List

Att Doc Num

Name

Total Attach: 0 Files