

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:

10/24/2018

Document Number:

401808347

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) 6397441
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: 302476 Location Type: Production Facilities
Name: SHABLE FEDERAL PC AB Number: 15-66-1HN TANK
County: WELD
Qtr Qtr: SENE Section: 14 Township: 7N Range: 64W Meridian: 6
Latitude: 40.575820 Longitude: -104.509560

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION

Flowline End Point Riser

Latitude: 40.575970 Longitude: -104.509430 PDOP: Measurement Date: 09/11/2008
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 302261 Location Type: Well Site [ ] No Location ID
Name: SHABLE-67N64W Number: 14SENV
County: WELD
Qtr Qtr: SENW Section: 14 Township: 7N Range: 64W Meridian: 6
Latitude: 40.575080 Longitude: -104.518960

Flowline Start Point Riser

Latitude: 40.575080 Longitude: -104.518960 PDOP: Measurement Date: 09/11/2008
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: 10/15/2008  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: \_\_\_\_\_ Flowline Type: Production Line Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.575970 Longitude: -104.509430 PDOP: \_\_\_\_\_ Measurement Date: 12/16/2008  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 302260 Location Type: \_\_\_\_\_ Well Site  No Location ID  
Name: SHABLE-67N64W Number: 14SWNW  
County: WELD  
Qtr Qtr: SWNW Section: 14 Township: 7N Range: 64W Meridian: 6  
Latitude: 40.575050 Longitude: -104.523690

**Flowline Start Point Riser**

Latitude: 40.575050 Longitude: -104.523690 PDOP: \_\_\_\_\_ Measurement Date: 12/16/2008  
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: 01/29/2008  
Maximum Anticipated Operating Pressure (PSI): \_\_\_\_\_ Testing PSI: \_\_\_\_\_  
Test Date: \_\_\_\_\_

**FLOWLINE FACILITY INFORMATION**

Flowline Facility ID: \_\_\_\_\_ Flowline Type: Production Line Action Type: Registration

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.575970 Longitude: -104.509430 PDOP: \_\_\_\_\_ Measurement Date: 04/14/2010  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 302250 Location Type: \_\_\_\_\_ Well Site  No Location ID  
Name: SHABLE Number: 14-22  
County: WELD  
Qtr Qtr: NWNW Section: 14 Township: 7N Range: 64W Meridian: 6  
Latitude: 40.578640 Longitude: -104.523730

**Flowline Start Point Riser**

Latitude: 40.578640 Longitude -104.523730 PDOP: Measurement Date: 04/14/2010

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: 11/10/2010  
Maximum Anticipated Operating Pressure (PSI): Testing PSI:  
Test Date:

**FLOWLINE FACILITY INFORMATION**

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

**OFF LOCATION FLOWLINE REGISTRATION**

**Flowline End Point Riser**

Latitude: 40.575970 Longitude: -104.509430 PDOP: Measurement Date: 12/29/2008  
Equipment at End Point Riser: Separator

**Flowline Start Point Location Identification**

Location ID: 302249 Location Type: Well Site  No Location ID  
Name: SHABLE-67N64W Number: 14NWNW  
County: WELD  
Qtr Qtr: NWNW Section: 14 Township: 7N Range: 64W Meridian: 6  
Latitude: 40.576860 Longitude: -104.521340

**Flowline Start Point Riser**

Latitude: 40.576860 Longitude -104.521340 PDOP: Measurement Date: 12/29/2008  
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: 01/29/2009  
Maximum Anticipated Operating Pressure (PSI): Testing PSI:  
Test Date:

**OPERATOR COMMENTS AND SUBMITTAL**

Comments We plan on decommissioning these lines and will report back more accurate coordinates at a later date.

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

Signed: \_\_\_\_\_ Date: 10/24/2018 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**

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

Total Attach: 0 Files