

State of Colorado
Oil and Gas Conservation Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

OGCC RECEPTION

Receive Date:

02/19/2019

Document Number:

401752294

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 ☒ No ☐

OFF LOCATION FLOWLINE**FLOWLINE ENDPOINT LOCATION IDENTIFICATION**

Location ID: 306637 Location Type: Production Facilities
Name: WELLS RANCH-USX AA-66N63W Number: 15NENE
County: WELD
Qtr Qtr: NENE Section: 15 Township: 6N Range: 63W Meridian: 6
Latitude: 40.490520 Longitude: -104.417790

FLOWLINE FACILITY INFORMATION

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

OFF LOCATION FLOWLINE REGISTRATION**Flowline End Point Riser**

Latitude: 40.490530 Longitude: -104.418000 PDOP: Measurement Date: 09/18/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 310805 Location Type: Well Site ☐ No Location ID
Name: WELLS RANCH USX AA-66N63W Number: 15SENE
County: WELD
Qtr Qtr: SENE Section: 15 Township: 6N Range: 63W Meridian: 6
Latitude: 40.488430 Longitude: -104.415854

Flowline Start Point Riser

Latitude: 40.488430 Longitude: -104.415854 PDOP: Measurement Date: 09/18/2018
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: 10/20/2008
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: 40.490420 Longitude: -104.418227 PDOP: _____ Measurement Date: 09/18/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 306637 Location Type: _____ Well Site ☐ No Location ID
Name: WELLS RANCH-USX AA-66N63W Number: 15NENE
County: WELD
Qtr Qtr: NENE Section: 15 Township: 6N Range: 63W Meridian: 6
Latitude: 40.490520 Longitude: -104.417790

Flowline Start Point Riser

Latitude: 40.490520 Longitude: -104.417790 PDOP: _____ Measurement Date: 09/18/2018
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: 05/25/2007
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: 40.490530 Longitude: -104.418000 PDOP: _____ Measurement Date: 09/18/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 309707 Location Type: _____ Well Site ☐ No Location ID
Name: WELLS RANCH-USX AA-66N63W Number: 15SWNE
County: WELD
Qtr Qtr: SWNE Section: 15 Township: 6N Range: 63W Meridian: 6
Latitude: 40.488500 Longitude: -104.420540

Flowline Start Point Riser

Latitude: 40.488500 Longitude -104.420540 PDOP: Measurement Date: 09/18/2018

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: 07/15/2007

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: 40.490530 Longitude: -104.418000 PDOP: Measurement Date: 09/18/2018

Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 310803 Location Type: Well Site ☐ No Location ID

Name: WELLS RANCH USX AA-66N63W Number: 15NWNE

County: WELD

Qtr Qtr: NWNE Section: 15 Township: 6N Range: 63W Meridian: 6

Latitude: 40.492032 Longitude: -104.420493

Flowline Start Point Riser

Latitude: 40.492032 Longitude -104.420493 PDOP: Measurement Date: 11/08/2009

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: 10/20/2008

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: 02/19/2019 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

401752294

Form44 Submitted

Total Attach: 1 Files