

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:

02/25/2019

Document Number:

401950580

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 ☒ No ☐

OFF LOCATION FLOWLINE**FLOWLINE ENDPOINT LOCATION IDENTIFICATION**

Location ID: 317729 Location Type: Production Facilities
Name: JOHN A KUNZMAN-62N66W Number: 5SESW
County: WELD
Qtr Qtr: SESW Section: 5 Township: 2N Range: 66W Meridian: 6
Latitude: 40.161690 Longitude: -104.803225

FLOWLINE FACILITY INFORMATION

Flowline Facility ID: 462382 Flowline Type: Wellhead Line Action Type:

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

Latitude: 40.162310 Longitude: -104.803057 PDOP: 2.0 Measurement Date: 08/31/2018
Equipment at End Point Riser: Separator

Flowline Start Point Location Identification

Location ID: 330767 Location Type: Well Site ☐ No Location ID
Name: HSR-KUNZMAN-62N66W Number: 5NESW
County: WELD
Qtr Qtr: NESW Section: 5 Township: 2N Range: 66W Meridian: 6
Latitude: 40.165330 Longitude: -104.803360

Flowline Start Point Riser

Latitude: 40.165327 Longitude: -104.803372 PDOP: 2.5 Measurement Date: 08/31/2018
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: 09/04/2008
Maximum Anticipated Operating Pressure (PSI): _____ Testing PSI: _____
Test Date: _____

OFF LOCATION FLOWLINE REMOVAL FROM SERVICE

Date: _____

Description of Removal from Service

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OPERATOR COMMENTS AND SUBMITTAL

Comments The HSR-Kunzman 11-5A P&A is completed. The well head was cut and capped on 1/21/2019. The entire flow line (1,329 Feet) was removed on 1/24/2019.
HSR-KUNZMAN 11-5A 05-123-19592 FL HSR-KUNZMAN 11-5A

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

Signed: _____ Date: 02/25/2019 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: 3/8/2019

Attachment Check List

Att Doc Num	Name
401950580	Form44 Submitted

Total Attach: 1 Files