

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:
401170120
Date Received:
12/19/2016

FIR RESOLUTION FORM

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10000
Name of Operator: BP AMERICA PRODUCTION COMPANY
Address: 380 AIRPORT RD
City: DURANGO State: CO Zip: 81303

Contact Name and Telephone:
Name:
Phone: () Fax: ()
Email:

Additional Operator Contact:

Contact Name	Phone	Email
<u>Inspections, All</u>		<u>SanJuanCOGCC@bp.com</u>
<u>Beebe, Sabre</u>	<u>970-375-7530</u>	<u>Sabre.Beebe@bp.com</u>
<u>Fischer, Alex</u>		<u>alex.fischer@state.co.us</u>
<u>Deranleau, Greg</u>		<u>greg.deranleau@state.co.us</u>
<u>Brown, Walter</u>	<u>970-385-1372</u>	<u>wabrown@fs.fed.us</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 674901401
Inspection Date: 12/14/2016 FIR Submit Date: 12/15/2016 FIR Status:

Inspected Operator Information:

Company Name: BP AMERICA PRODUCTION COMPANY Company Number: 10000
Address: 380 AIRPORT RD
City: DURANGO State: CO Zip: 81303

LOCATION - Location ID:

Location Name: Number: County:
Qtrqr: NWN Sec: 4 Twp: 34N Range: 6W Meridian: M
W
Latitude: Longitude:

FACILITY - API Number: 05-067-00 Facility ID: 448730

Facility Name: SPILL/RELEASE POINT Number:
Qtrqr: NWN Sec: 4 Twp: 34N Range: 6W Meridian: M
W
Latitude: Longitude:

CORRECTIVE ACTIONS:

1 CA# 54616

Corrective Action: Contact COGCC EPS staff regarding Rule 906.c.

Date: 12/19/2016

Response: CA COMPLETED

Date of Completion: 12/15/2016

Operator Comment: Discussion between COGCC EPS Staff on 12/15/16 and Andy Hawk BP concluded with agreement that a supplemental form 19 will be submitted on 12/27/2016.

COGCC Decision: Approved

COGCC Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective Action has been addressed and completed as BP has been in contact with COGCC EPS Staff beginning on 12/15/16

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

Print Name: Sabre Beebe

Signed: _____

Title: Compliance Specialist

Date: 12/19/2016 4:13:55 PM

ATTACHMENT LIST

View Attachments in Imaged Documents on COGCC website (<http://ogccweblink.state.co.us/>) - Search by Document Number.

<u>Document Number</u>	<u>Description</u>
401170120	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files