

State of Colorado
Oil and Gas Conservation Commission

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Document Number:
401603359
Date Received:
04/11/2018

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 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>Beebe, Sabre</u>	<u>970-779-9398</u>	<u>Sabre.Beebe@bp.com</u>
<u>Inspections, All</u>		<u>SanJuanCOGCC@bp.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 685304401
Inspection Date: 02/23/2018 FIR Submit Date: 02/28/2018 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: 333634

Location Name: JONES, LAURANCE GAS UNIT A-N34N7W Number: 7NWSE County: LA PLATA
Qtrqr: NWSE Sec: 7 Twp: 34N Range: 7W Meridian: M
Latitude: 37.204826 Longitude: -107.646213

FACILITY - API Number: 05-067-00 Facility ID: 216248

Facility Name: LAURANCE JONES A Number: 1
Qtrqr: NWSE Sec: 7 Twp: 34N Range: 7W Meridian: M
Latitude: 37.204826 Longitude: -107.646213

CORRECTIVE ACTIIONS:

1 CA# 114581

Corrective Action: Remove unused equipment to comply with Rule 603.f. Date: 03/31/2018

Response: CA COMPLETED Date of Completion: 03/15/2018

Operator Comment: All unused equipment as well as land owner debris has been removed from location and disposed of properly see attached photos.

COGCC Decision: _____

COGCC Representative: _____

2 CA# 114582

Corrective Action: Remove unused equipment to comply with Rule 603.f.

Date: 03/31/2018

Response: CA COMPLETED

Date of Completion: 03/15/2018

Operator Comment: All unused equipment as well as land owner debris has been removed from location and disposed of properly see attached photos.

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: All corrective actions and comments have been addressed see attached photos

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: 4/11/2018 6:10:50 AM

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>
401603361	Corrective Action Completion photos

Total Attach: 1 Files