

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:

401821313

Date Received:

11/01/2018

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>Baca, Matt</u> | | <u>matthew.baca@bpx.com</u> |

COGCC INSPECTION SUMMARY:

FIR Document Number: 680603147
Inspection Date: 09/25/2018 FIR Submit Date: 10/04/2018 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: 325778

Location Name: LOS PINOS WATER DISPOSAL-N35N6W Number: 31NENE County: LA PLATA
Qtrqtr: NENE Sec: 31 Twp: 35N Range: 6W Meridian: N
Latitude: 37.264746 Longitude: -107.561634

FACILITY - API Number: 05-067-00 Facility ID: 215368

Facility Name: LOS PINOS WATER DISPOSAL Number: 1
Qtrqtr: NENE Sec: 31 Twp: 35N Range: 6W Meridian: N
Latitude: 37.264746 Longitude: -107.561634

CORRECTIVE ACTIIONS:

1 CA# 119291

Corrective Action: Control weeds. Date: 11/02/2018

Response: CA COMPLETED Date of Completion: 10/25/2018

Operator Comment: Actions completed

COGCC Decision: _____

COGCC
Representative:

2 CA# 119292

Corrective Action: Stormwater controls are needed to stabilize erosion within the northeastern project area. Concentrated runoff from the southwestern project area needs to be monitored and stormwater controls applied if needed.

Date: 11/05/2018

Response: CA COMPLETED

Date of Completion: 10/25/2018

Operator
Comment: Actions completed

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Actions Completed

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

Print Name: Matthew Baca

Signed: _____

Title: Construction Specialist

Date: 11/1/2018 2:30:33 PM

ATTACHMENT LIST

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

Document Number **Description**

| | |
|-----------|-----------------|
| 401821326 | Corrective pics |
|-----------|-----------------|

Total Attach: 1 Files