FORM
FIRR
Rev 5/16

State of Colorado Oil and Gas Conservation Commission



Document Number: 402039102

Date Received: 05/09/2019

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

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	Contact Name and Telephone:	
Name of Operator: BP AMERICA PRODUCTION COMPANY	Name:	
Address: 1199 MAIN AVENUE SUITE 101	Phone: () Fax: ()	
City: DURANGO State: CO Zip: 81301	Email:	
Additional Operator Contact:		
Contact Name Phone Er	mail	
Inspections, All Sa	anJuanCOGCC@bp.com	
Beebe, Sabre 970-779-9398 Sa	abre.Beebe@bpx.com	
<u>Labowskie, Steve</u> <u>ste</u>	eve.labowskie@state.co.us	
COGCC INSPECTION SUMMARY:		
FIR Document Number: 687904623		
Inspection Date: 04/19/2019 FIR Submit Date: 04/19/2019	FIR Status:	
Inspected Operator Information:		
Company Name: BP AMERICA PRODUCTION COMPANY Company Number: 10000		
Address: 1199 MAIN AVENUE SUITE 101		
City: DURANGO State: CO Zip: 8130	1	
LOCATION - Location ID: 326067		
Location Name: MW JOHNSON G A-M34N8W Number: 16NWNW County: LA PLATA		
Qtrqtr: NWN Sec: 16 Twp: 34N Range: 8W	Meridian: M	
Latitude: 37.195509 Longitude: -107.727750		
FACILITY - API Number: 05-06700 Facility ID:	215812	
Facility Name: MW JOHNSON A Number: 1	_	
Qtrqtr: NWN Sec: 16 Twp: 34N Range: 8W	Meridian: M	
Latitude: 37.195509 Longitude: -107.727750		
CORRECTIVE ACTIIONS:		
1 CA# 124479		
Corrective Action: Stop release immediately. Take necessary steps in engine repair or muffler reconfiguration and comply Rules 906 and 907		
Response: CA COMPLETED Date of	Completion: 04/30/2019	
Exhaust flex hose was found to have been damaged and	d cracked. A new hose was installed to prevent future	

Operator Comment:	leaks.	
COGCC Decision:		
COGCC Representative:		
2 CA# 124480		
	Remove impacted material per Rules 907 and 1002.f., self inspect/take measures to prevent future breakdown of BMPs	
Response:	CA COMPLETED Date of Completion: 04/30/2019	
Operator Comment:		
COGCC Decision:		
COGCC Representative:		
OPERATOR COMM	ENT AND SUBMITTAL	
Comment: All co	prrective actions have been completed on this location see attached.	
I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.		
Print Name: Sab	Print Name: Sabre Beebe Signed:	
Title: Compliance Specialist Date: 5/9/2019 4:48:48 PM		

ATTACHMENT LIST

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

Document Number Description

402039137 Compliance follow up form

Total Attach: 1 Files