

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:
402173180

Date Received:
09/11/2019

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: 1199 MAIN AVENUE SUITE 101
City: DURANGO State: CO Zip: 81301

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

Additional Operator Contact:

Contact Name	Phone	Email
-		SanJuanCOGCC@bp.com
<u>Beebe, Sabre</u>		sabre.beebe@bpx.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693900354
Inspection Date: 05/23/2019 FIR Submit Date: 05/29/2019 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: 81301

LOCATION - Location ID: 311889

Location Name: FORD GAS UNIT D-N33N8W Number: 3SESW County: LA PLATA
Qtrqtr: SESW Sec: 3 Twp: 33N Range: 8W Meridian: N
Latitude: 37.128603 Longitude: -107.708566

FACILITY - API Number: 05-067- -00 Facility ID: 215148

Facility Name: FORD D Number: 1A
Qtrqtr: SESW Sec: 3 Twp: 33N Range: 8W Meridian: N
Latitude: 37.128603 Longitude: -107.708566

CORRECTIVE ACTION:

1 CA# 125693

Corrective Action: Control weeds. Date: 06/21/2019

Response: CA COMPLETED Date of Completion: 06/25/2019

Operator Comment: Bareground weed treatment performed in April and noxious selective treatment performed in June of 2019 as part of annual weed treatment program.

COGCC Decision: _____

COGCC
Representative:

2 CA# 125694

Corrective Action: Stormwater controls need to be installed to stabilize erosion within the project area.

Date: 06/30/2019

Response: CA COMPLETED

Date of Completion: 06/20/2019

Operator Comment: Erosion BMP's installed in the form of armored silt trap with rock run down and berming to direct stormwater to the armoring. See attached.

COGCC Decision:

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: All corrective 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: Sabre Beebe

Signed:

Title: Compliance Specialist

Date: 9/11/2019 1:41:56 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>
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402173247	Completion form
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Total Attach: 1 Files