

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:

402278289

Date Received:

01/06/2020

FIR RESOLUTION FORM

Overall Status: CAC

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: 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

Beebe, Sabre

sabre.beebe@bpx.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693900987

Inspection Date: 10/22/2019

FIR Submit Date: 10/28/2019

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: 325238

Location Name: BONDS GAS UNIT-N32N10W Number: 1SENW County: LA PLATA

Qtrqtr: SENW Sec: 1 Twp: 32N Range: 10W Meridian: N

Latitude: 37.046502 Longitude: -107.889131

FACILITY - API Number: 05-067- -00 Facility ID: 214375

Facility Name: BONDS Number: 1

Qtrqtr: SENW Sec: 1 Twp: 32N Range: 10W Meridian: N

Latitude: 37.046502 Longitude: -107.889131

CORRECTIVE ACTIONS:

1 CA# 132063

Corrective Action: Stormwater and erosion controls need to be installed to stabilize erosion within the project area. Stormwater and erosion controls need to be installed using good engineering practices such as those described in CDOT erosion control manuals. Corrective action is back-dated to document original corrective action date and time that location has been out of compliance.

Date: 12/08/2018

Response: CA COMPLETED

Date of Completion: 12/26/2019

Erosion repairs have been completed and BMP's such as armored run downs installed and diversion ditches installed to direct storm water and reduce velocity. See attached.

Operator _____
Comment: _____

COGCC Decision: _____

COGCC
Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: CA completed 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: Sabre Beebe

Signed: _____

Title: Compliance Specialist

Date: 1/6/2020 2:46:56 PM

ATTACHMENT LIST

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

Document Number **Description**

402278292	Work completion photos
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Total Attach: 1 Files