

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:
402296520

Date Received:
01/28/2020

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
<u>Beebe, Sabre</u>		<u>sabre.beebe@bpx.com</u>
		<u>SanJuanCOGCC@bp.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 693901322
Inspection Date: 01/09/2020 FIR Submit Date: 01/10/2020 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: 326341

Location Name: BONAFACIO GALLEGOS GAS UNIT -N33N8W Number: 2NWSE County: LA PLATA
Qtrqr: NWSE Sec: 2 Twp: 33N Range: 8W Meridian: N
Latitude: 37.129961 Longitude: -107.686072

FACILITY - API Number: 05-067-00 Facility ID: 216264

Facility Name: BONIFACIO GALLEGOS A Number: 1
Qtrqr: NWSE Sec: 2 Twp: 33N Range: 8W Meridian: N
Latitude: 37.129961 Longitude: -107.686072

CORRECTIVE ACTIIONS:

1 CA# 135884

Corrective Action: Control weeds. This is the second corrective action for weeds. Corrective action is back-dated to document duration of non-compliance.

Date: 07/06/2018

Response: CA COMPLETED Date of Completion: 01/23/2020

Operator Comment: Historical weed treatment on this location was performed on 5/23/2017, 7/7/2017, 3/12/2018, 5/21/2018, 6/25/2018, 4/29/2019, and 6/18/2019. Weed debris removed from location and disposed of on 1/23/20 see attached. Dates above provided by professional applicator contractor based on required records kept in compliance with

the Colorado Department of Agriculture.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective action addressed and will continue to be addressed through the annual weed program.

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: Specialist

Date: 1/28/2020 1:41:08 PM

ATTACHMENT LIST

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

Document Number **Description**

402296552	documentation
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Total Attach: 1 Files