

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:

402438388

Date Received:

07/07/2020

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 2 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>SanJuanCOGCC@bp.com</u>
<u>Beebe, Sabre</u>		<u>sabre.beebe@bpx.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 693901895  
Inspection Date: 06/11/2020 FIR Submit Date: 06/12/2020 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: 325675

Location Name: FEDERAL LAND BANK 'D' UT-M34N9W Number: 36SESE County: LA PLATA  
Qtrqtr: SESE Sec: 36 Twp: 34N Range: 9W Meridian: M  
Latitude: 37.143385 Longitude: -107.772720

FACILITY - API Number: 05-067-00 Facility ID: 215214

Facility Name: FEDERAL LAND BANK D Number: 1  
Qtrqtr: SESE Sec: 36 Twp: 34N Range: 9W Meridian: M  
Latitude: 37.143385 Longitude: -107.772720

CORRECTIVE ACTIIONS:

1 CA# 139717

Corrective Action: Control weeds. Corrective action date is shortened to prevent spread of seed from mature thistle plants. Date: 06/30/2020

Response: CA COMPLETED Date of Completion: 06/15/2020

Operator Comment: Noxious weeds treated on 6/15/20 see attached. Previous treatment on location performed on 7/8/2016, 6/28/2017, 6/20/2018, and 5/7/2019.

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

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**OPERATOR COMMENT AND SUBMITTAL**

Comment: Weed CA addressed see attached. Stormwater FIRR will be filed separately when work has been 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: Specialist

Date: 7/7/2020 8:27:10 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

402438390	Weed completion document
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Total Attach: 1 Files