

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:

402406992

Date Received:

05/27/2020

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
Beebe, Sabre		sabre.beebe@bpx.com
.		SanJuanCOGCC@bp.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693901754
Inspection Date: 05/05/2020 FIR Submit Date: 05/07/2020 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: 325534

Location Name: M W JOHNSON GU A-M34N8W Number: 16NENE County: LA PLATA
Qtrqr: NENE Sec: 16 Twp: 34N Range: 8W Meridian: M
Latitude: 37.194795 Longitude: -107.717799

FACILITY - API Number: 05-067-00 Facility ID: 214961

Facility Name: MW JOHNSON A Number: 2
Qtrqr: NENE Sec: 16 Twp: 34N Range: 8W Meridian: M
Latitude: 37.194795 Longitude: -107.717799

CORRECTIVE ACTIIONS:

1 CA# 138827

Corrective Action: Control weeds before flowering. Continued monitoring and subsequent treatments are needed until weeds are controlled. Date: 06/01/2020

Response: CA COMPLETED Date of Completion: 05/20/2020

Operator Comment: Weeds treated to address CA on 5/20/20. Previous treatment dates are 7/10/2017, 6/28/2018 and 6/18/2019. No herbicide applied in 2016 as prior to 2017 this location was designated by the landowner as a no spray site. Therefore, in 2016 manually removal was the method of addressing weeds.

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective Action completed 5/20/20 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: Specialist

Date: 5/27/2020 2:55:01 PM

ATTACHMENT LIST

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

Document Number	Description
402406992	FIR RESOLUTION SUBMITTED
402406996	Completion document

Total Attach: 2 Files