

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:

402476403

Date Received:

08/27/2020

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 SanJuanCOGCC@bp.com

Beebe, Sabre sabre.beebe@bpx.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693902130

Inspection Date: 08/11/2020

FIR Submit Date: 08/13/2020

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: 326568

Location Name: STATE 1-36/35-8-N35N8W Number: 36NWNE County: LA PLATA

Qtrqr: NWNE Sec: 36 Twp: 35N Range: 8W Meridian: N

Latitude: 37.262651 Longitude: -107.691800

FACILITY - API Number: 05-067- -00 Facility ID: 258098

Facility Name: STATE 01-36; 35-08 Number: 3

Qtrqr: NWNE Sec: 36 Twp: 35N Range: 8W Meridian: N

Latitude: 37.262651 Longitude: -107.691800

CORRECTIVE ACTIONS:

1 ☒ CA# 141218

Corrective Action: -Cut and bag flowering musk thistles and properly dispose, to prevent seed dispersal and control weeds by 8/30/2020.

Date: 08/30/2020

Response: CA COMPLETED

Date of Completion: 08/25/2020

Operator Comment: Thistle seed heads removed and disposed of and additional treatment applied see attached. Previous treatment dates: 7/31/20 7/10/2018 6/27/2019

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective actions 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: Specialist

Date: 8/27/2020 11:47:05 AM

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>
402476403	FIR RESOLUTION SUBMITTED
402476405	Weed removal and treatment documentation

Total Attach: 2 Files