

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:

401193265

Date Received:

01/25/2017

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

2 of 3 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10000
Name of Operator: BP AMERICA PRODUCTION COMPANY
Address: 380 AIRPORT RD
City: DURANGO State: CO Zip: 81303

Contact Name and Telephone:
Name:
Phone: () Fax: ()
Email:

Additional Operator Contact:

Contact Name	Phone	Email
Inspections, All		SanJuanCOGCC@bp.com
Beebe, Sabre	970-375-7530	Sabre.Beebe@bp.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 685301997
Inspection Date: 12/20/2016 FIR Submit Date: 12/20/2016 FIR Status:

Inspected Operator Information:

Company Name: BP AMERICA PRODUCTION COMPANY Company Number: 10000
Address: 380 AIRPORT RD
City: DURANGO State: CO Zip: 81303

LOCATION - Location ID: 333707

Location Name: LEMON GAS UNIT J-M34N8W Number: 17NWSE County: LA PLATA
Qtrqtr: NWSE Sec: 17 Twp: 34N Range: 8W Meridian: M
Latitude: 37.188647 Longitude: -107.739895

FACILITY - API Number: 05-067-00 Facility ID: 258267

Facility Name: LEMON J Number: 2
Qtrqtr: NWSE Sec: 17 Twp: 34N Range: 8W Meridian: M
Latitude: 37.188647 Longitude: -107.739895

CORRECTIVE ACTION:

2 CA# 54665

Corrective Action: Remove or install parts to comply with Rule 603.f using the Rule 603.f guidance document for further details.

Date: 01/20/2017

Response: CA COMPLETED

Date of Completion: 01/17/2017

Operator Comment: All unused piping and parts were removed from location at the time of the Storm Water BMP work.

COGCC Decision: _____

COGCC
Representative:

3 CA# 54666

Corrective Action: Repair or install required BMPs to comply with Rule 1002.f. Refer to the 1002.f guidance document for further details.

Date: 01/20/2017

Response: CA COMPLETED

Date of Completion: 01/17/2017

Operator
Comment: Previously closed out with FIRR form on 1/23/17

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Sign is on order for this location and all other CA's have been closed on this and previous FIRR form

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: 1/25/2017 7:48:50 AM

ATTACHMENT LIST

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

Document Number **Description**

401193265	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files