

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:

401505494

Date Received:

01/08/2018

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: 380 AIRPORT RD
City: DURANGO State: CO Zip: 81303

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

Additional Operator Contact:

Contact Name	Phone	Email
-		SanJuanCOGCC@bp.com
Beebe, Sabre		Sabre.Beebe@bp.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 680602382
Inspection Date: 12/19/2017 FIR Submit Date: 01/03/2018 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: 333472

Location Name: COUCH GAS UNIT 01-16U- M34N7W Number: 16NWSE County: LA PLATA
Qtrqr: NWSE Sec: 16 Twp: 34N Range: 7W Meridian: M
Latitude: 37.190312 Longitude: -107.610957

FACILITY - API Number: 05-067- -00 Facility ID: 289442

Facility Name: COUCH 01-16U Number: 3
Qtrqr: NWSE Sec: 16 Twp: 34N Range: 7W Meridian: M
Latitude: 37.190312 Longitude: -107.610957

CORRECTIVE ACTIIONS:

1 CA# 113695

Corrective Action: Control weeds at the appropriate time but no later than June 15, 2018. Date: 06/15/2018

Response: CA COMPLETED Date of Completion: 01/04/2018

Operator Comment: Weeds and weed debris was manually removed on 1/4/18 and this location has been placed on the priority treatment list for 2018 in the weed management program. See attached photos of work completed.

COGCC Decision: _____

COGCC
Representative:

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OPERATOR COMMENT AND SUBMITTAL

Comment: Weeds and weed debris was manually removed on 1/4/18 and this location has been placed on the priority treatment list for 2018 in the weed management program. See attached photos of work 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: Construction Specialist

Date: 1/8/2018 6:53:02 AM

ATTACHMENT LIST

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

Document Number **Description**

401505495	Manual removal photos for weeds
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Total Attach: 1 Files