

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:

402039009

Date Received:

05/09/2019

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

-

SanJuanCOGCC@bp.com

Sabre Beebe

970-779-9398

sabre.beebe@bpx.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 680603340

Inspection Date: 11/09/2018

FIR Submit Date: 12/05/2018

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: 325792

Location Name: LEMON GAS UNIT G-M34N8W Number: 8SWNW County: LA PLATA

Qtrqtr: SWN Sec: 8 Twp: 34N Range: 8W Meridian: M  
W

Latitude: 37.209139 Longitude: -107.747158

FACILITY - API Number: 05-067- -00 Facility ID: 215386

Facility Name: LEMON G Number: 1

Qtrqtr: SWN Sec: 8 Twp: 34N Range: 8W Meridian: M  
W

Latitude: 37.209139 Longitude: -107.747158

CORRECTIVE ACTIONS:

1 CA# 120772

Corrective Action: Control weeds at the appropriate time but no later than June 1, 2019.

Date: 06/01/2019

Response: CA COMPLETED

Date of Completion: 04/29/2019

Operator Comment: Noxious weeds treated with herbicide by certified contractor. All BPX locations are on an annual treatment program. See attached

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

COGCC  
Representative:

**OPERATOR COMMENT AND SUBMITTAL**

Comment: Noxious weeds treated with herbicide by certified contractor. All BPX locations are on an annual treatment program. 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: Compliance Specialist

Date: 5/9/2019 4:10:40 PM

**ATTACHMENT LIST**

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

<b><u>Document Number</u></b>	<b><u>Description</u></b>
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402039010	CA completion document
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Total Attach: 1 Files