

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:
402064062

Date Received:
06/04/2019

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 |
|-------------------------|---------------------|-------------------------------------|
| <u>Sabre Beebe</u> | <u>970-779-9398</u> | <u>sabre.beebe@bpx.com</u> |
| <u>Fischer, Alex</u> | | <u>alex.fischer@state.co.us</u> |
| <u>Murray, Richard</u> | | <u>g.richard.murray@state.co.us</u> |
| <u>Inspections, All</u> | | <u>SanJuanCOGCC@bp.com</u> |

COGCC INSPECTION SUMMARY:

FIR Document Number: 688800387
Inspection Date: 12/10/2018 FIR Submit Date: 12/11/2018 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: _____

Location Name: _____ Number: _____ County: _____
Qtrqtr: SESW Sec: 1 Twp: 34N Range: 8w Meridian: N
Latitude: 37.238919 Longitude: -107.697998

FACILITY - API Number: 05-067- -00 Facility ID: 459307

Facility Name: Richardson G Number: 2
Qtrqtr: SESW Sec: 1 Twp: 34N Range: 8w Meridian: N
Latitude: 37.238919 Longitude: -107.697998

CORRECTIVE ACTIONS:

1 CA# 120917

Corrective Action: Control and contain spills/releases and clean up per Rule 906.a. Contact COGCC EPS staff. Date: 01/11/2019

Response: CA COMPLETED Date of Completion: 01/17/2019

All corrective actions completed for this inspection per COGCC document number 401866521 and 401891117

Operator Comment: submitted to the COGCC on 1/17/2019

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: All corrective actions completed for this inspection per COGCC document number 401866521 and 401891117 submitted to the COGCC on 1/17/2019

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: 6/4/2019 12:32:22 PM

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> |
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Total Attach: 0 Files