

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:
402173746

Date Received:
09/11/2019

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

2 of 2 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: 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>Inspections, All</u>		<u>SanJuanCOGCC@bp.com</u>
<u>Fischer, Alex</u>		<u>alex.fischer@state.co.us</u>
<u>Beebe, Sabre</u>	<u>970-779-9398</u>	<u>Sabre.Beebe@bpx.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 688800497
Inspection Date: 04/03/2019 FIR Submit Date: 04/04/2019 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: 325804

Location Name: LEROY MCCA W GAS UNIT B- Number: 21SWNE County: LA PLATA
M34N8W
Qtrqtr: SWNE Sec: 21 Twp: 34N Range: 8W Meridian: M
Latitude: 37.179794 Longitude: -107.719070

FACILITY - API Number: 05-067- -00 Facility ID: 215404

Facility Name: LEROY MCCA W B Number: 1
Qtrqtr: SWNE Sec: 21 Twp: 34N Range: 8W Meridian: M
Latitude: 37.179794 Longitude: -107.719070

CORRECTIVE ACTIONS:

1 CA# 123874

Corrective Action: Control and contain spills/releases and clean up per Rule 906.a. Contact COGCC EPS staff. Date: 04/05/2019

Response: CA COMPLETED Date of Completion: 04/17/2019

Initial Report Submitted 4/4/2019
Date of discover 4/2/2019

Operator Comment: Additional Report submitted 4/17/2019 Document#402013123

COGCC Decision: Approved pending re-inspection

COGCC Representative:

2 CA# 123875

Corrective Action: Date: 06/04/2019

Response: CA COMPLETED Date of Completion: 07/12/2019

Operator Comment:

COGCC Decision: Approved via an AMI

COGCC Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment:

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: 9/11/2019 4:52:06 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>
402173746	FIR RESOLUTION SUBMITTED
402173763	sign completion document

Total Attach: 2 Files