

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:

402258350

Date Received:

12/09/2019

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 2 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

Beebe, Sabre

sabre.beebe@bpx.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693900691

Inspection Date: 08/19/2019

FIR Submit Date: 08/20/2019

FIR Status: _____

Inspected Operator Information:

Company Name: BP AMERICA PRODUCTION COMPANY

Company Number: 10000

Address: 1199 MAIN AVENUE SUITE 101

City: DURANGO State: CO Zip: 81301

LOCATION - Location ID: 326663

Location Name: MARTIN,JOE GAS UNIT-N34N7W Number: 10NWSE County: LA PLATA

Qtrqtr: NWSE Sec: 10 Twp: 34N Range: 7W Meridian: N

Latitude: 37.227926 Longitude: -107.621150

FACILITY - API Number: 05-067- -00 Facility ID: 261666

Facility Name: JOE MARTIN Number: 2

Qtrqtr: NWSE Sec: 10 Twp: 34N Range: 7W Meridian: N

Latitude: 37.227926 Longitude: -107.621150

CORRECTIVE ACTIONS:

1 CA# 129427

Corrective Action: Control weeds no later than August 27, 2019. Musk thistle flowerheads need to be cut, bagged, and properly disposed of to prevent seed dispersal. Revegetation needs to be conducted within the interim reclamation areas within the fall seeding window and no later than November 1, 2019.

Date: 08/27/2019

Response: CA COMPLETED

Date of Completion: 09/16/2019

Weeds and weed debris has been removed see attached.

Operator _____
Comment: _____

COGCC Decision: _____

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: 12/9/2019 3:16:11 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>
402258354	Weed removal closure

Total Attach: 1 Files