

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:

402406992

Date Received:

05/27/2020

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

Beebe, Sabre

sabre.beebe@bpx.com

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SanJuanCOGCC@bp.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693901754

Inspection Date: 05/05/2020

FIR Submit Date: 05/07/2020

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: 325534

Location Name: M W JOHNSON GU A-
M34N8W

Number: 16NENE

County: LA PLATA

Qtrqtr: NENE Sec: 16 Twp: 34N Range: 8W Meridian: M

Latitude: 37.194795 Longitude: -107.717799

FACILITY - API Number: 05-067-

-00

Facility ID: 214961

Facility Name: MW JOHNSON A

Number: 2

Qtrqtr: NENE Sec: 16 Twp: 34N Range: 8W Meridian: M

Latitude: 37.194795 Longitude: -107.717799

CORRECTIVE ACTIONS:

1 CA# 138827

Corrective Action: Control weeds before flowering. Continued monitoring and subsequent treatments are needed until weeds are controlled.

Date: 06/01/2020

Response: CA COMPLETED

Date of Completion: 05/20/2020

Operator Comment: Weeds treated to address CA on 5/20/20. Previous treatment dates are 7/10/2017, 6/28/2018 and 6/18/2019. No herbicide applied in 2016 as prior to 2017 this location was designated by the landowner as a no spray site. Therefore, in 2016 manually removal was the method of addressing weeds.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective Action completed 5/20/20 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: Specialist

Date: 5/27/2020 2:55:01 PM

ATTACHMENT LIST

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

Document Number **Description**

402406996	Completion document
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Total Attach: 1 Files