

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:

402452819

Date Received:

07/27/2020

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

Hughes, Jim

jimo.hughes@state.co.us

Beebe, Sabre

sabre.beebe@bpx.com

-

SanJuanCOGCC@bp.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693901963

Inspection Date: 06/29/2020

FIR Submit Date: 06/29/2020

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: 333841

Location Name: STATE GAS UNIT CB-N33N6W Number: 18NSW County: LA PLATA

Qtrqtr: NWS Sec: 18 Twp: 33N Range: 6W Meridian: N  
W

Latitude: 37.101439 Longitude: -107.546720

FACILITY - API Number: 05-067- -00 Facility ID: 215596

Facility Name: STATE CB Number: 1

Qtrqtr: NWS Sec: 18 Twp: 33N Range: 6W Meridian: N  
W

Latitude: 37.101439 Longitude: -107.546720

CORRECTIVE ACTIONS:

1 CA# 140079

Corrective Action: -Control and contain spills/releases and clean up per Rule 906.a. Contact area Environmental Protection Specialist Jim Hughes: (970) 903-4072; Corrective action date: 6/30/2020.

Date: 06/30/2020

Response: CA COMPLETED

Date of Completion: 06/29/2020

Operator  
Comment:

Document 402416551 reporting spill and control and containment of spill filed.

COGCC Decision:

COGCC  
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment:

Document 402416551 reporting spill and control and containment of spill filed.

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: 7/27/2020 9:02:44 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

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Total Attach: 0 Files