

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:

402484439

Date Received:

09/09/2020

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

-

SanJuanCOGCC@bp.com

Nygren, Tanner

tnygren@blm.gov

COGCC INSPECTION SUMMARY:

FIR Document Number: 693902114

Inspection Date: 08/05/2020

FIR Submit Date: 08/10/2020

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: 325888

Location Name: DRY CREEK FEDERAL GU- Number: 12SESE County: LA PLATA  
N34N8W

Qtrqtr: SESE Sec: 12 Twp: 34N Range: 8W Meridian: N

Latitude: 37.225221 Longitude: -107.691265

FACILITY - API Number: 05-067- -00 Facility ID: 215519

Facility Name: DRY CREEK FEDERAL Number: 1

Qtrqtr: SESE Sec: 12 Twp: 34N Range: 8W Meridian: N

Latitude: 37.225221 Longitude: -107.691265

CORRECTIVE ACTIONS:

1 CA# 141106

Corrective Action: Stormwater controls need to be installed to stabilize erosion within the project area by 9/10/2020.

Date: 09/10/2020

Response: CA COMPLETED

Date of Completion: 08/27/2020

Armoring installed in channels to reduce velocity of stormwater and silt travel. See attached.

Operator \_\_\_\_\_  
Comment: \_\_\_\_\_

COGCC Decision: \_\_\_\_\_

COGCC  
Representative: \_\_\_\_\_

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective action complete 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: 9/9/2020 8:49:38 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

402484449	Work completion documentation
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Total Attach: 1 Files