

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:

402470440

Date Received:

08/19/2020

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 SanJuanCOGCC@bp.com

Beebe, Sabre sabre.beebe@bpx.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693901936

Inspection Date: 06/19/2020

FIR Submit Date: 06/23/2020

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: 306896

Location Name: GOEGLEIN GAS UNIT-N35N7W Number: 22SESW County: LA PLATA

Qtrqr: SESW Sec: 22 Twp: 35N Range: 7W Meridian: N

Latitude: 37.283228 Longitude: -107.624495

FACILITY - API Number: 05-067- -00 Facility ID: 274639

Facility Name: GOEGLEIN Number: 2

Qtrqr: SESW Sec: 22 Twp: 35N Range: 7W Meridian: N

Latitude: 37.283228 Longitude: -107.624495

CORRECTIVE ACTIONS:

1 ☒ CA# 139915

Corrective Action: Stormwater controls need to be installed to stabilize erosion within the project area.

Date: 07/24/2020

Response: CA COMPLETED

Date of Completion: 08/11/2020

Operator Comment: Stormwater BMP's installed are diversion ditch with compacted berming for additional depth and strength, rock rundown with check dams. See attached documentation.

COGCC Decision: Approved pending re-inspection

COGCC  
Representative:

**OPERATOR COMMENT AND SUBMITTAL**

Comment: Corrective action completed with additional work identified while on location and documented in attached form.

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: 8/19/2020 8:51:34 AM

**ATTACHMENT LIST**

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

<b><u>Document Number</u></b>	<b><u>Description</u></b>
402470440	FIR RESOLUTION SUBMITTED
402470445	Work completion documentation

Total Attach: 2 Files