

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:

402457847

Date Received:

08/03/2020

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

COGCC INSPECTION SUMMARY:

FIR Document Number: 693901956

Inspection Date: 06/24/2020

FIR Submit Date: 06/26/2020

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: 333828

Location Name: KRAJACK-M34N8W Number: 27NESE County: LA PLATA

Qtrqtr: NESE Sec: 27 Twp: 34N Range: 8W Meridian: M

Latitude: 37.159786 Longitude: -107.699831

FACILITY - API Number: 05-067- -00 Facility ID: 216107

Facility Name: KRAJACK Number: 43-27 1

Qtrqtr: NESE Sec: 27 Twp: 34N Range: 8W Meridian: M

Latitude: 37.159786 Longitude: -107.699831

CORRECTIVE ACTIONS:

1 ☒ CA# 140001

Corrective Action: Erosion controls and revegetation need to be installed to stabilize erosion on the well pad cut-slopes. Erosion controls need to be maintained in place until stabilized with desirable perennial vegetation.

Date: 09/01/2020

Response: CA COMPLETED

Date of Completion: 07/23/2020

Operator Comment: Seeding with application of biodegradable blanket for erosion control and revegetation. See attached.

COGCC Decision: Approved pending re-inspection

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: 8/3/2020 9:43:25 AM

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>
402457847	FIR RESOLUTION SUBMITTED
402457859	Work completion photos

Total Attach: 2 Files