

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

402530285

Date Received:

11/11/2020

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: 693902189

Inspection Date: 08/25/2020

FIR Submit Date: 08/26/2020

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: 326612

Location Name: MONTGOMERY FEDERAL Number: 28SESW County: LA PLATA
GU-N35N7W

Qtrqtr: SESW Sec: 28 Twp: 35N Range: 7W Meridian: N

Latitude: 37.267988 Longitude: -107.644601

FACILITY - API Number: 05-067- -00 Facility ID: 258940

Facility Name: MONTGOMERY FEDERAL Number: 2

Qtrqtr: SESW Sec: 28 Twp: 35N Range: 7W Meridian: N

Latitude: 37.267988 Longitude: -107.644601

CORRECTIVE ACTIONS:

1 ☒ CA# 141490

Corrective Action: Stormwater and erosion controls are needed to stabilize erosion on the well pad cutslope. Stormwater controls need to be selected, sized, installed, and maintained using good engineering practices such as those described in CDOT manuals for erosion control. These controls need to be maintained in good condition until the cut-slope is stabilized with desirable perennial vegetation.

Date: 09/30/2020

Response: CA COMPLETED

Date of Completion: 10/27/2020

Seeding of bare soils, installation of ECB on slopes and installation of shrubs. see attached.

Operator
Comment:

COGCC Decision: Approved

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective action completed

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: 11/11/2020 8:26:09 AM

ATTACHMENT LIST

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

Document Number **Description**

402530285	FIR RESOLUTION SUBMITTED
402530289	Work completion photos

Total Attach: 2 Files