

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:
402521719

Date Received:
10/29/2020

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10705
Name of Operator: EVERGREEN NATURAL RESOURCES LLC
Address: 1875 LAWRENCE ST STE 1150
City: DENVER State: CO Zip: 80202

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Distribution, Evergreen</u>		<u>cogcc.evergreen@enrllc.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 690200502
Inspection Date: 08/03/2020 FIR Submit Date: 08/05/2020 FIR Status: _____

Inspected Operator Information:

Company Name: EVERGREEN NATURAL RESOURCES LLC Company Number: 10705
Address: 1875 LAWRENCE ST STE 1150
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 308623

Location Name: ELMO-633S66W Number: 21SWSW County: LAS ANIMAS
Qtrqr: SWS Sec: 21 Twp: 33S Range: 66W Meridian: 6
W
Latitude: 37.150130 Longitude: -104.792070

FACILITY - API Number: 05-071-00 Facility ID: 277021

Facility Name: ELMO Number: 14-21
Qtrqr: SWS Sec: 21 Twp: 33S Range: 66W Meridian: 6
W
Latitude: 37.150130 Longitude: -104.792070

CORRECTIVE ACTIIONS:

1 CA# 141018

Corrective Action: Comply with 1004 Rules and COA's. Date: 10/31/2020

Response: CA COMPLETED Date of Completion: 10/20/2020

Operator Comment: Complied with 1004 Rules and COA's

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

2 CA# 141019

Corrective Action: Install or repair required BMPs per Rule 1002.f.(2)C

Date: 10/31/2020

Response: CA COMPLETED

Date of Completion: 10/20/2020

Operator
Comment: Repaired required BMP's per Rule 1002.f.(2)C

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Please see attached photo's

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Susan Wolfram

Signed: _____

Title: Sr. Safety Coordinator

Date: 10/29/2020 12:23:36 PM

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>
402521719	FIR RESOLUTION SUBMITTED
402521731	Elmo 14-21

Total Attach: 2 Files