

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:
402631867

Date Received:
03/22/2021

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: 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: 695104055
Inspection Date: 03/10/2021 FIR Submit Date: 03/10/2021 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: 307821

Location Name: BARBARA-632S67W Number: 23NWSW County: LAS ANIMAS
Qtrqr: NWS Sec: 23 Twp: 32S Range: 67W Meridian: 6
W
Latitude: 37.243110 Longitude: -104.863420

FACILITY - API Number: 05-071-00 Facility ID: 257167

Facility Name: BARBARA Number: 13-23
Qtrqr: NWS Sec: 23 Twp: 32S Range: 67W Meridian: 6
W
Latitude: 37.243110 Longitude: -104.863420

CORRECTIVE ACTIONS:

1 CA# 147277

Corrective Action: Immediately comply with material handling and guidance per MSDS or product data sheet. Submit document, procedures, and waste disposal manifest to COGCC field inspector, COMPLY WITH RULE 906.

Date: 03/13/2021

Response: CA COMPLETED Date of Completion: 03/12/2021

Operator Comment: Complied with Rule 905.f. and 1002.f.(2)f., E&P wastes cannot be dumped on the ground. Cleaned up and disposed of according to SDS, Avoided dust formation. Used personal protective equipment recommended in section 8. Spill was in well ventilated area, general sweeping and shoveling of material.

COGCC Decision: _____

COGCC
Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Please find the attached Photo and SDS information

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: 3/22/2021 2:15:49 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>
402635843	Barbara 13-23
402635845	Barbara 13-23 SDS FRAC Sand

Total Attach: 2 Files