

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:

402646513

Date Received:

04/28/2021

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

Distribution, Evergreen

cogcc.evergreen@enrllc.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 695103037

Inspection Date: 07/28/2020

FIR Submit Date: 07/28/2020

FIR Status: _____

Inspected Operator Information:

Company Name: EVERGREEN NATURAL RESOURCES LLC

Company Number: 10705

Address: 1801 BROADWAY SUITE 350

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 333891

Location Name: NEWPORT-633S66W Number: 6NWNW County: LAS ANIMAS

Qtrqr: NWN Sec: 6 Twp: 33S Range: 66W Meridian: 6
W

Latitude: 37.206040 Longitude: -104.825760

FACILITY - API Number: 05-071- -00 Facility ID: 258918

Facility Name: NEWPORT Number: 11-6 TR

Qtrqr: NWN Sec: 6 Twp: 33S Range: 66W Meridian: 6
W

Latitude: 37.206040 Longitude: -104.825760

CORRECTIVE ACTIONS:

1 CA# 140784

Corrective Action: POST SIGN, COMPLY WITH RULE 210.b.
NOT THIS CA WAS NOTED ON INSPECTION FROM 2018 DOC# 687902224, THIS
IS SECOND NOTICE FOR THIS CA.

Date: 10/28/2020

Response: CA COMPLETED

Date of Completion: 03/22/2021

Operator Comment: Posted correct sing information to comply with Rule 210.b

COGCC Decision: _____

COGCC
Representative:

2 CA# 140785

Corrective Action: REMOVE ALL UNUSED EQUIPMENT, COMPLY WITH RULE603.f.

Date: 10/28/2020

Response: CA COMPLETED

Date of Completion: 03/22/2021

Operator
Comment:

Removed all unused equipment to comply with Rule 603.f.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Please find the 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: 4/28/2021 11:48:36 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>
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402673721	Newport 11-6 & TR
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Total Attach: 1 Files