

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:
402810418

Date Received:
11/16/2021

FIR RESOLUTION FORM

Overall Status:

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 |
|-------------------------|-------|----------------------------------|
| Distribution, Evergreen | | cogcc.evergreen@enrllc.com |
| . | | dnr_cogccengineering@state.co.us |
| Duran, Alicia | | alicia.duran@state.co.us |

COGCC INSPECTION SUMMARY:

FIR Document Number: 695104265
Inspection Date: 04/21/2021 FIR Submit Date: 04/21/2021 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: 307485

Location Name: ANN-633S66W Number: 25SENE County: LAS ANIMAS
Qtrqr: SENE Sec: 25 Twp: 33S Range: 66W Meridian: 6
Latitude: 37.144150 Longitude: -104.724070

FACILITY - API Number: 05-071-00 Facility ID: 217723

Facility Name: ANN Number: 42-25
Qtrqr: SENE Sec: 25 Twp: 33S Range: 66W Meridian: 6
Latitude: 37.144150 Longitude: -104.724070

CORRECTIVE ACTIONS:

1 CA# 149945

Corrective Action: Install appropriate fittings to allow bradenhead visual inspection as per Rule 419.a.(1), (2)

Date: 05/21/2021

Response: CA COMPLETED Date of Completion: 11/15/2021

Operator Comment: Installed appropriate fittings to allow bradenhead visual inspection as per Rule 419.a

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: 11/16/2021 4:40:05 PM

ATTACHMENT LIST

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

Document Number **Description**

| | |
|-----------|-----------|
| 402872550 | Ann 42-25 |
|-----------|-----------|

Total Attach: 1 Files