

State of Colorado Oil and Gas Conservation Commission

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FOR OGCC USE ONLY

Document Number:

402920689

Date Received:

01/07/2022

SOURCE OF PRODUCED WATER FOR DISPOSAL

Per Rule 325.c(5), this form shall be submitted for any new disposal facility and for any change in source of produced water for an existing disposal facility.

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: Mackenzie Smith

Phone: (303) 2848820 Fax: ()

Email: mackenzie.smith@enrllc.com

DISPOSAL FACILITY INFORMATION

UIC Facility ID: 150429

Operator's Disposal Facility Name: SAWTOOTH 34-4 WD

Operator's Disposal Facility Number:

Location: QtrQtr: NWSE Sec: 4 Twp: 33S Range: 65W Meridian: 6

County: LAS ANIMAS

SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 12 Deleted: 0 Added: 12

SOURCE OF PRODUCED WATER

Add Source	API Number: 05-071-06228-00	Well Name & No: ROYBAL 13-9
<input checked="" type="checkbox"/>	Operator Name: EVERGREEN NATURAL RESOURCES LL	Operator No: 10705
Delete Source	Location: QtrQtr: NWSW Section: 9 Township: 33S Range: 65W Meridian: 6	
<input type="checkbox"/>	Producing Formation: VRMJ Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source	API Number: 05-071-06558-00	Well Name & No: MULLIGAN CANYON 23-3
<input checked="" type="checkbox"/>	Operator Name: EVERGREEN NATURAL RESOURCES LL	Operator No: 10705
Delete Source	Location: QtrQtr: NESW Section: 3 Township: 33S Range: 65W Meridian: 6	
<input type="checkbox"/>	Producing Formation: VRMJ Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source	API Number: 05-071-06936-00	Well Name & No: LUDLOW 43-34
<input checked="" type="checkbox"/>	Operator Name: EVERGREEN NATURAL RESOURCES LL	Operator No: 10705
Delete Source	Location: QtrQtr: NESE Section: 34 Township: 32S Range: 65W Meridian: 6	
<input type="checkbox"/>	Producing Formation: VRMJ Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	
Add Source	API Number: 05-071-07257-00	Well Name & No: SHANNON 43-9
<input checked="" type="checkbox"/>	Operator Name: EVERGREEN NATURAL RESOURCES LL	Operator No: 10705
Delete Source	Location: QtrQtr: NESE Section: 9 Township: 33S Range: 65W Meridian: 6	
<input type="checkbox"/>	Producing Formation: VRMJ Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L	

Add Source <input checked="" type="checkbox"/>	API Number: <u>05-071-07625-00</u> Well Name & No: <u>FRANVILO 22-35</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u> Operator No: <u>10705</u>
	Location: QtrQtr: <u>SENW</u> Section: <u>35</u> Township: <u>32S</u> Range: <u>65W</u> Meridian: <u>6</u>
	Producing Formation: <u>VRMJ</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-071-08008-00</u> Well Name & No: <u>BOMBAY 14-27</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u> Operator No: <u>10705</u>
	Location: QtrQtr: <u>SWSW</u> Section: <u>27</u> Township: <u>32S</u> Range: <u>65W</u> Meridian: <u>6</u>
	Producing Formation: <u>VRMJ</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-071-08013-00</u> Well Name & No: <u>FRONT RANGE 44-10</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u> Operator No: <u>10705</u>
	Location: QtrQtr: <u>SESE</u> Section: <u>10</u> Township: <u>33S</u> Range: <u>65W</u> Meridian: <u>6</u>
	Producing Formation: <u>VRMJ</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-071-08075-00</u> Well Name & No: <u>HAINLEN 12-11</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u> Operator No: <u>10705</u>
	Location: QtrQtr: <u>SWNW</u> Section: <u>11</u> Township: <u>33S</u> Range: <u>65W</u> Meridian: <u>6</u>
	Producing Formation: <u>VRMJ</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-071-08131-00</u> Well Name & No: <u>DREWMEISTER 34-34</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u> Operator No: <u>10705</u>
	Location: QtrQtr: <u>SWSE</u> Section: <u>34</u> Township: <u>32S</u> Range: <u>65W</u> Meridian: <u>6</u>
	Producing Formation: <u>VRMJ</u> Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: _____ mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-071-08745-00</u> Well Name & No: <u>HOYT 21-3</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u> Operator No: <u>10705</u>
	Location: QtrQtr: <u>NENW</u> Section: <u>3</u> Township: <u>33S</u> Range: <u>65W</u> Meridian: <u>6</u>
	Producing Formation: <u>VRMJ</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: <u>1400</u> mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-071-08904-00</u> Well Name & No: <u>RAFAEL 33-11</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u> Operator No: <u>10705</u>
	Location: QtrQtr: <u>NWSE</u> Section: <u>11</u> Township: <u>33S</u> Range: <u>65W</u> Meridian: <u>6</u>
	Producing Formation: <u>VRMJ</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: <u>1360</u> mg/L
Add Source <input checked="" type="checkbox"/>	API Number: <u>05-071-09043-00</u> Well Name & No: <u>NAPOLEON 12-10</u>
Delete Source <input type="checkbox"/>	Operator Name: <u>EVERGREEN NATURAL RESOURCES LL</u> Operator No: <u>10705</u>
	Location: QtrQtr: <u>SENW</u> Section: <u>10</u> Township: <u>33S</u> Range: <u>65W</u> Meridian: <u>6</u>
	Producing Formation: <u>VRMJ</u> Analysis Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both TDS: <u>1850</u> mg/L

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

Print Name: Mackenzie Smith

Signed: _____

Title: Production Engineer

Date: 01/07/2022

COGCC Approved: 

Date: 01/10/2022

CONDITIONS OF APPROVAL, IF ANY:

Condition of Approval

COA Type

Description

0 COA

Attachment List

Att Doc Num

Name

402920689	FORM 26 SUBMITTED
402920690	Source of Produced Water Import
402920691	WATER ANALYSIS

Total Attach: 3 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)