

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:
402842833

Date Received:
10/14/2021

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
Distribution, Evergreen		cogcc.evergreen@enrllc.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 695104922
Inspection Date: 10/07/2021 FIR Submit Date: 10/07/2021 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: 307341

Location Name: JACKS-633S65W Number: 6SESW County: LAS ANIMAS
Qtrqr: SESW Sec: 6 Twp: 33S Range: 65W Meridian: 6
Latitude: 37.195830 Longitude: -104.716680

FACILITY - API Number: 05-071-00 Facility ID: 217510

Facility Name: JACKS Number: 24-6
Qtrqr: SESW Sec: 6 Twp: 33S Range: 65W Meridian: 6
Latitude: 37.195830 Longitude: -104.716680

CORRECTIVE ACTIONS:

1 CA# 156538

Corrective Action: Lower fluid level so at least two feet of freeboard exists per Rule 902.b. MAINTAIN A MINIMUM OF 2' FREEBOARD MEASURED FROM GROUND LEVEL (NOT THE TOP OF BURM) IN PRODUCED WATER PIT. NOTE: WATER PULLED ON LOCATION AS I WAS CONDUCTING MY INSPECTION AND STARTED PULLING THE PIT.

Date: 10/08/2021

Response: CA COMPLETED Date of Completion: 10/14/2021

Operator Comment: Lowered fluid level so at least two feet of freeboard exists per Rule 902.b

COGCC Decision: Approved via an AMI

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: 10/14/2021 4:04:08 PM

ATTACHMENT LIST

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

Document Number	Description
402842833	FIR RESOLUTION SUBMITTED
402842845	Jacks 24-6

Total Attach: 2 Files