

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:

402969862

Date Received:

03/01/2022

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: 690202012

Inspection Date: 08/27/2021

FIR Submit Date: 08/30/2021

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: 307748

Location Name: LORENCITO-634S66W Number: 4NWNE County: LAS ANIMAS

Qtrqr: NWNE Sec: 4 Twp: 34S Range: 66W Meridian: 6

Latitude: 37.117660 Longitude: -104.781610

FACILITY - API Number: 05-071-

-00

Facility ID: 256502

Facility Name: LORENCITO Number: 2-4-34-66

Qtrqr: NWNE Sec: 4 Twp: 34S Range: 66W Meridian: 6

Latitude: 37.117660 Longitude: -104.781610

CORRECTIVE ACTIONS:

1 ☒ CA# 155305

Corrective Action: Comply with Rule 1003.f.

Date: 09/10/2021

Response: CA COMPLETED

Date of Completion: 03/01/2022

Operator
Comment: Complied with Rule 1003.f.

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

2 ☒ CA# 155306

Corrective Action: Install or repair required BMPs per Rule 1002.f.(2)C

Date: 09/30/2021

Response: CA COMPLETED

Date of Completion: 03/01/2022

Operator
Comment: Installed and Repaired required BMPs per Rule 1002.f.(2)C

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Please find the attached documentation

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: 3/1/2022 7:55:30 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>
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402969862	FIR RESOLUTION SUBMITTED
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Total Attach: 2 Files