

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
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Document Number:  
403027088

Date Received:  
04/25/2022

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
<u>Distribution, Evergreen</u>	<u>719-846-7898</u>	<u>cogcc.evergreen@enrllc.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 695106045  
Inspection Date: 04/12/2022 FIR Submit Date: 04/12/2022 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: 333746

Location Name: DUDE CANYON-632S67W Number: 32SEW County: LAS ANIMAS  
Qtrqr: SEW Sec: 32 Twp: 32S Range: 67W Meridian: 6  
Latitude: 37.217700 Longitude: -104.912210

FACILITY - API Number: 05-071- -00 Facility ID: 278291

Facility Name: DUDE CANYON Number: 22-32TR  
Qtrqr: SEW Sec: 32 Twp: 32S Range: 67W Meridian: 6  
Latitude: 37.217700 Longitude: -104.912210

CORRECTIVE ACTIONS:

1  CA# 160978

Corrective Action: Conduct maintenance on equipment, cleanup stained material and review self inspection processes. COMPLY WITH RULE 1002,.(2).D. (REPAIR LEAKING EQUIPMENT).

Date: 04/23/2022

Response: CA COMPLETED Date of Completion: 04/22/2022

Operator Comment: Conducted Maintenance on equipment, cleaned up stained material and reviewed self-inspection to comply with Rule 1002,.(2).D. (Repaired Leaking Equipment)

COGCC Decision: Approved

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: 4/25/2022 5:24:47 PM

**ATTACHMENT LIST**

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

<b>Document Number</b>	<b>Description</b>
403027088	FIR RESOLUTION SUBMITTED
403027089	Dude Canyon 22-32 TR

Total Attach: 2 Files