

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:  
403077548

Date Received:  
06/13/2022

FIR RESOLUTION FORM

Overall Status:

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: 695105141  
Inspection Date: 11/12/2021 FIR Submit Date: 11/12/2021 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: 308545

Location Name: SUMMERSAULT-631S66W Number: 35NESW County: LAS ANIMAS  
Qtrqtr: NESW Sec: 35 Twp: 31S Range: 66W Meridian: 6  
Latitude: 37.298810 Longitude: -104.754410

FACILITY - API Number: 05-071- -00 Facility ID: 273660

Facility Name: SUMMERSAULT Number: 23-35  
Qtrqtr: NESW Sec: 35 Twp: 31S Range: 66W Meridian: 6  
Latitude: 37.298810 Longitude: -104.754410

CORRECTIVE ACTIONS:

1 CA# 157794

Corrective Action: Install appropriate fittings to allow bradenhead visual inspection as per Rule 419.a.(1), (2). Date: 11/26/2021

Response: CA COMPLETED Date of Completion: 06/13/2022

Operator Comment: Installed appropriate fittings to allow bradenhead visual inspection as per Rule 419.a.(1),

COGCC Decision:

COGCC  
Representative:

2 CA# 157795

Corrective Action: MARK OR REMOVE UNUSED EQUIPEMNT PER RULE 606.

Date: 11/26/2021

Response: CA COMPLETED

Date of Completion: 06/13/2022

Operator  
Comment: Put unused equipment back into use per Rule 606.

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: 6/13/2022 5:17:28 PM

### ATTACHMENT LIST

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

**Document Number**      **Description**

403077552	Summersault 23-35
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Total Attach: 1 Files