

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:
403185490

Date Received:
10/03/2022

FIR RESOLUTION FORM

Overall Status:

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 | 719-846-7898 | cogcc.evergreen@enrllc.com |

COGCC INSPECTION SUMMARY:

FIR Document Number: 695106787
Inspection Date: 09/29/2022 FIR Submit Date: 09/29/2022 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: 333645

Location Name: BEARDON-632S65W Number: 15SESW County: LAS ANIMAS
Qtrqr: SESW Sec: 15 Twp: 32S Range: 65W Meridian: 6
Latitude: 37.253240 Longitude: -104.662980

FACILITY - API Number: 05-071-00 Facility ID: 257374

Facility Name: BEARDON Number: 24-15 WD
Qtrqr: SESW Sec: 15 Twp: 32S Range: 65W Meridian: 6
Latitude: 37.253240 Longitude: -104.662980

CORRECTIVE ACTIONS:

1 CA# 164866

Corrective Action: Submit Field Inspection Report Resolution form (FIRR) per rule 210.b. & 207. Include photos showing corrective actions resolved if possible. Date:

Response: CA COMPLETED Date of Completion: 05/20/2022

Operator Comment: Removed weeds including root structure and keep inside berms always clear of all vegetation per Rule 606.

COGCC Decision:

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Please find the attached Photo's
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: 10/3/2022 3:56:21 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> |
|-------------------------------|----------------------------|
| 403185556 | Beardon 24-15 WD |
| 403185558 | BEARDON 24-15 WD 403062119 |

Total Attach: 2 Files