

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:

403218914

Date Received:

11/03/2022

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: <u>10705</u> | Contact Name and Telephone: |
| Name of Operator: <u>EVERGREEN NATURAL RESOURCES LLC</u> | Name: _____ |
| Address: <u>1875 LAWRENCE ST STE 1150</u> | Phone: () _____ Fax: () _____ |
| City: <u>DENVER</u> State: <u>CO</u> Zip: <u>80202</u> | 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: 695106806
 Inspection Date: 10/04/2022 FIR Submit Date: 10/04/2022 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: 333714

Location Name: FLYING HORSE-632S66W Number: 11SWNW County: LAS ANIMAS
 Qtrqr: SWN Sec: 11 Twp: 32S Range: 66W Meridian: 6
W
 Latitude: 37.273270 Longitude: -104.757700

FACILITY - API Number: 05-071-00 Facility ID: 279338

Facility Name: FLYING HORSE Number: 12-11 TR
 Qtrqr: SWN Sec: 11 Twp: 32S Range: 66W Meridian: 6
W
 Latitude: 37.273270 Longitude: -104.757700

CORRECTIVE ACTIONS:

1 CA# 164969

Corrective Action: Conduct maintenance on equipment, cleanup stained material and review self inspection processes. COMPLY WITH RULE 1002,.(2).D. Date: 11/06/2022

Response: CA COMPLETED Date of Completion: 11/03/2022

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: _____

COGCC
Representative:

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OPERATOR COMMENT AND SUBMITTAL

Comment: Please find the attached Photo's

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| |
|--|

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: 11/3/2022 3:46:54 PM

ATTACHMENT LIST

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

Document Number **Description**

| | |
|-----------|-----------------------|
| 403218917 | Flying Horse 12-11 TR |
|-----------|-----------------------|

Total Attach: 1 Files