

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: 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

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: Approved via an AMI

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>
403185490	FIR RESOLUTION SUBMITTED
403185556	Beardon 24-15 WD
403185558	BEARDON 24-15 WD 403062119

Total Attach: 3 Files