

# State of Colorado Oil and Gas Conservation Commission

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Document Number:  
403257872

Date Received:  
12/12/2022

## 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: <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: 695106845  
 Inspection Date: 10/07/2022 FIR Submit Date: 10/07/2022 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: 307553

Location Name: ABERT SQUIRREL-634S66W Number: 11SENE County: LAS ANIMAS  
 Qtrqr: SENE Sec: 11 Twp: 34S Range: 66W Meridian: 6  
 Latitude: 37.100600 Longitude: -104.741990

#### FACILITY - API Number: 05-071-00 Facility ID: 217819

Facility Name: ABERT SQUIRREL Number: 42-11  
 Qtrqr: SENE Sec: 11 Twp: 34S Range: 66W Meridian: 6  
 Latitude: 37.100600 Longitude: -104.741990

### CORRECTIVE ACTIONS:

1 CA# 165189

Corrective Action: Install sign to comply with Rule 605.a. Date: 12/07/2022

Response: CA COMPLETED Date of Completion: 12/06/2022

Operator Comment: Installed sign to comply with Rule 605.a.

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

2 CA# 165190

Corrective Action: REMOVE UNUSED EQUIPMENT PER RULE 606.

Date: 12/07/2022

Response: CA COMPLETED

Date of Completion: 10/14/2022

Operator  
Comment: Removed unused equipment 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: 12/12/2022 4:06:48 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

403257874	Abert Squirrel 42-11
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Total Attach: 1 Files