

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:  
403293170

Date Received:  
01/17/2023

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
Inspections, Evergreen		cogcc.evergreen@enrllc.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 690203517  
Inspection Date: 10/20/2022 FIR Submit Date: 10/21/2022 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: 307659

Location Name: NAOMI-632S65W Number: 16NESE County: LAS ANIMAS  
Qtrqr: NESE Sec: 16 Twp: 32S Range: 65W Meridian: 6  
Latitude: 37.256440 Longitude: -104.669180

FACILITY - API Number: 05-071-00 Facility ID: 89183

Facility Name: NAOMI Number: 43-16  
Qtrqr: NESE Sec: 16 Twp: 32S Range: 65W Meridian: 6  
Latitude: 37.256440 Longitude: -104.669180

CORRECTIVE ACTIONS:

1 CA# 165582

Corrective Action: Clean up and Implement or modify BMPs for improved material handling and spill prevention. Date: 10/24/2022

Response: CA COMPLETED Date of Completion: 01/12/2023

Operator Comment: Cleaned up and Implemented and modified BMPs for improved material handling and spill prevention.

COGCC Decision:

COGCC  
Representative:

2 CA# 165583

Corrective Action: Install or repair required BMPs per Rule 1002.f.(2)C

Date: 08/15/2022

Response: CA COMPLETED

Date of Completion: 01/12/2023

Operator  
Comment: Installed and repaired required BMPs per Rule 1002.f.(2)C

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: 1/17/2023 11:37:20 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

403293172	Naomi 43-16
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Total Attach: 1 Files