

State of Colorado
Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

403525194

Date Received:

09/11/2023

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: 690204456

Inspection Date: 07/24/2023

FIR Submit Date: 07/26/2023

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: 307267

Location Name: HORN SPRING GAS COM- Number: 33SWNE County: LAS ANIMAS
632S66W

Qtrqr: SWNE Sec: 33 Twp: 32S Range: 66W Meridian: 6

Latitude: 37.215410 Longitude: -104.783090

FACILITY - API Number: 05-071- -00 Facility ID: 217324

Facility Name: HORN SPRING GAS COM Number: 1-32-33

Qtrqr: SWNE Sec: 33 Twp: 32S Range: 66W Meridian: 6

Latitude: 37.215410 Longitude: -104.783090

CORRECTIVE ACTIONS:

1 CA# 176377

Corrective Action: Conduct maintenance on equipment, cleanup stained material and review self inspection processes.

Date: 07/24/2023

Response: CA COMPLETED

Date of Completion: 09/08/2023

Operator
Comment:

Skid clean up

COGCC Decision: _____

COGCC
Representative:

2 CA# 176378

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

Date: 07/24/2023

Response: CA COMPLETED

Date of Completion: 09/08/2023

Operator
Comment:

Stormwater clean up per rule 1002.f(2)

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment:

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Tracy Dyke

Signed: _____

Title: Regulatory Technician

Date: 9/11/2023 7:58:32 AM

ATTACHMENT LIST

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

Document Number **Description**

403525253	Stormwater clean up
403525255	Clean skid

Total Attach: 2 Files