

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:
403556059

Date Received:
10/10/2023

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 |
|-------------------------------|-------|-----------------------------------|
| <u>Inspections, Evergreen</u> | | <u>cogcc.evergreen@enrllc.com</u> |

COGCC INSPECTION SUMMARY:

FIR Document Number: 690203845
Inspection Date: 01/27/2023 FIR Submit Date: 01/27/2023 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: _____

Location Name: _____ Number: _____ County: _____
Qtrqtr: SESE Sec: 32 Twp: 33S Range: 66W Meridian: 6
Latitude: 37.125393 Longitude: -104.797017

FACILITY - API Number: 05-071- -00

Facility ID: 261235

Facility Name: LORENCITO Number: 16-32-33-66
Qtrqtr: SESE Sec: 32 Twp: 33S Range: 66W Meridian: 6
Latitude: 37.125393 Longitude: -104.797017

CORRECTIVE ACTIONS:

1 CA# 167193

Corrective Action: Operator shall provide a Form 15 pit report updating the latitude and longitude of the pit as specified in Rule 909.a.(2). In addition, the operator will complete the Operation Information and Conditions/Design & Construction tabs of the Form 15.

Date: 01/14/2023

Response: CA COMPLETED Date of Completion: 10/10/2023

Operator Comment: F15 filed for pit per rule 909.a

COGCC Decision: Approved

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Please use this FIRr to address inspection 690203576 and 690203845.
Thank you

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: Construction Coordinator

Date: 10/10/2023 2:19:37 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> |
|-------------------------------|---------------------------|
| 403556059 | FIR RESOLUTION SUBMITTED |
| 403556076 | F15 |

Total Attach: 2 Files