

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:
403519747

Date Received:
09/05/2023

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: <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>Morgan, John</u>		<u>john.morgan@state.co.us</u>
<u>Distribution, Evergreen</u>	<u>719-846-7898</u>	<u>cogcc.evergreen@enrllc.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 695108531
 Inspection Date: 08/07/2023 FIR Submit Date: 08/09/2023 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: 309579

Location Name: POLLY-632S65W Number: 29NESW County: LAS ANIMAS
 Qtrqtr: NESW Sec: 29 Twp: 32S Range: 65W Meridian: 6
 Latitude: 37.227410 Longitude: -104.698440

FACILITY - API Number: 05-071-00 Facility ID: 300603

Facility Name: POLLY Number: 23-29 WD R
 Qtrqtr: NESW Sec: 29 Twp: 32S Range: 65W Meridian: 6
 Latitude: 37.227410 Longitude: -104.698440

CORRECTIVE ACTIONS:

1 CA# 178249

Corrective Action: Perform MIT per Rule 417.a. (1). WELL IS IN VIOLATION IMMEDIATE ACTION IS REQUIRED.
A FORM 42 10 DAY NOTICE TO PERFORM AN MIT STILL APPLIES. Date: _____

Response: CA COMPLETED Date of Completion: 08/31/2023

Operator Comment: MIT completed per rule 417.a(1)

COGCC Decision: Approved via an AMI

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Form 42 inspector notice #403495183
Tom Beardslee inspection #69108630

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: 9/5/2023 9:17:36 AM

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>
403519747	FIR RESOLUTION SUBMITTED
403519752	MIT Form 21
403519753	MIT chart

Total Attach: 3 Files