

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:

403695178

Date Received:

02/22/2024

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

Inspections, Evergreen

cogcc.evergreen@enrllc.com

Schwarz, Stephen

stephen.schwarz@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 713600007

Inspection Date: 07/24/2023

FIR Submit Date: 08/04/2023

FIR Status: _____

Inspected Operator Information:

Company Name: EVERGREEN NATURAL RESOURCES LLC

Company Number: 10705

Address: _____

City: _____ State: _____ Zip: _____

LOCATION - Location ID: 309046

Location Name: LOBO-633S66W Number: 4NWSW County: LAS ANIMAS

Qtrqr: NWS Sec: 4 Twp: 33S Range: 66W Meridian: 6
W

Latitude: 37.198550 Longitude: -104.789300

FACILITY - API Number: 05-071- -00 Facility ID: 287509

Facility Name: LOBO Number: 13-4

Qtrqr: NWS Sec: 4 Twp: 33S Range: 66W Meridian: 6
W

Latitude: 37.198550 Longitude: -104.789300

CORRECTIVE ACTIONS:

1 ☒ CA# 177235

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

Date: _____

Response: CA COMPLETED

Date of Completion: 02/21/2024

Operator
Comment: Variance approved, please see attached document

COGCC Decision: Approved

COGCC Representative: The corrective action to "Install or repair required BMPs per Rule 1002.f." was not completed but instead a variance has been approved by the Commission. Therefore, this FIRR is only approved based on the variance approval but corrective actions for stormwater management were not addressed.

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: Construction Technician

Date: 2/22/2024 11:34:47 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>
403695178	FIR RESOLUTION SUBMITTED
403695188	Final variance hearing

Total Attach: 2 Files