

State of Colorado Energy & Carbon Management Commission



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Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number:
403375103

Date Received:
05/07/2024

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

ECMC 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>Distribution, Evergreen</u>	<u>719-846-7898</u>	<u>cogcc.evergreen@enrllc.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 695107349
Inspection Date: 01/26/2023 FIR Submit Date: 01/26/2023 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: 334407

Location Name: BRAKE HANDLE Number: 24-22 County: LAS ANIMAS
Qtrqtr: SESW Sec: 22 Twp: 32S Range: 67W Meridian: 6
Latitude: 37.238410 Longitude: -104.877470

FACILITY - API Number: 05-071- -00 Facility ID: 298167

Facility Name: BRAKE HANDLE Number: 24-22
Qtrqtr: SESW Sec: 22 Twp: 32S Range: 67W Meridian: 6
Latitude: 37.238410 Longitude: -104.877470

CORRECTIVE ACTIONS:

1 CA# 167179

Corrective Action: REMOVE UNUSED EQUIPMENT PER RULE 606. Date: 02/27/2023

Response: CA COMPLETED Date of Completion: 04/17/2023

Operator Comment: All unused equipment removed from location per rule 606.

ECMC Decision: _____

ECMC
Representative:

2 CA# 167180

Corrective Action: COMPLY WITH RULE 1002.f.(2)B, Comply with general provisions of the oil and gas act for wildlife protection AND SB-181.

Date: 01/28/2023

Response: CA COMPLETED

Date of Completion: 04/17/2023

Operator
Comment: Skid clean up per rule 1002.f(2)b

ECMC Decision:

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Please use this FIRR to address inspection #695107349

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: 5/7/2024 3:00:27 PM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
403782657	Skid clean up
403782659	Unused equipment

Total Attach: 2 Files