

State of Colorado
Oil and Gas Conservation Commission

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



Document Number:
402245352

Date Received:
11/21/2019

FIR RESOLUTION FORM

Overall Status: CAC

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: 1801 BROADWAY SUITE 350
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>cogcc.evergreen@enrllc.com</u>
<u>Tom Beardslee</u>		<u>tom.beardslee@state.co.us</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 695100744
Inspection Date: 05/29/2019 FIR Submit Date: 05/29/2019 FIR Status: _____

Inspected Operator Information:

Company Name: EVERGREEN NATURAL RESOURCES LLC Company Number: 10705
Address: 1801 BROADWAY SUITE 350
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 308076

Location Name: WHISTLE PIG-634S65W Number: 30SWNW County: LAS ANIMAS
Qtrqr: SWN Sec: 30 Twp: 34S Range: 65W Meridian: 6
W
Latitude: 37.057410 Longitude: -104.718960

FACILITY - API Number: 05-071- -00 Facility ID: 260972

Facility Name: WHISTLE PIG Number: 12-30
Qtrqr: SWN Sec: 30 Twp: 34S Range: 65W Meridian: 6
W
Latitude: 37.057410 Longitude: -104.718960

CORRECTIVE ACTIIONS:

1 CA# 125703

Corrective Action: REMOVE UNUSED EQUIPMENT IN ACCORDANCE WITH 603.f. Date: 06/29/2019

Response: CA COMPLETED Date of Completion: 06/12/2019

Operator Comment: Removed unused equipment

COGCC Decision: _____

COGCC
Representative:

2 CA# 125704

Corrective Action: CHANGE OPERATOR NAME TO CURRENT OPERATOR IN ACCORDANCE WITH
RULE 210.

Date: 07/29/2019

Response: CA COMPLETED

Date of Completion: 06/06/2019

Operator
Comment: Installed sign to comply with Rule 210.b

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Please see attached photos

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

Print Name: Cheri Morgan

Signed: _____

Title: Regulatory Specialist

Date: 11/21/2019 9:10:09 AM

ATTACHMENT LIST

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

Document Number **Description**

402245377	Whistle Pig 12-30
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Total Attach: 1 Files