

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:  
402249317

Date Received:  
11/26/2019

**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: 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>Tom Beardslee</u>		<u>tom.beardslee@state.co.us</u>
<u>Distribution, Evergreen</u>		<u>cogcc.evergreen@enrllc.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 695100349  
Inspection Date: 03/15/2019 FIR Submit Date: 03/15/2019 FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: PIONEER NATURAL RESOURCES USA INC Company Number: 10084  
Address: 5205 N O'CONNOR BLVD STE 200  
City: IRVING State: TX Zip: 75039

LOCATION - Location ID: 333871

Location Name: BOUNCER-633S67W Number: 27NENE County: LAS ANIMAS  
Qtrqtr: NENE Sec: 27 Twp: 33S Range: 67W Meridian: 6  
Latitude: 37.148880 Longitude: -104.866350

FACILITY - API Number: 05-071- -00 Facility ID: 263137

Facility Name: BOUNCER Number: 41-27  
Qtrqtr: NENE Sec: 27 Twp: 33S Range: 67W Meridian: 6  
Latitude: 37.148880 Longitude: -104.866350

CORRECTIVE ACTIONS:

1 CA# 123253

Corrective Action: Lower fluid level so at least two feet of freeboard exists per Rule 902.b. PROPERLY INSTALL FREEBOARD MARKER AT PITS POINT OF LOWEST ELEVATION. PER RULE 902. b.

Date: 03/16/2019

Response: CA COMPLETED Date of Completion: 03/16/2019

Operator Comment: FIXED PRODUCED WATER LEVEL IS ABOVE THE 2' FREEBOARD MARKER. ALSO THE FREEBOARD MARKER IS IMPROPERLY INSTALLED ON THE HIGHEST ELEVATION SIDE OF PIT.

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Please see attached Photo

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: 11/26/2019 2:04:51 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

402249323	BOUNCER
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Total Attach: 1 Files