

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:

402255134

Date Received:

12/05/2019

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

Distribution, Evergreen

cogcc.evergreen@enrllc.com

Tom Beardslee

tom.beardslee@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 695101126

Inspection Date: 07/25/2019

FIR Submit Date: 07/29/2019

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: 307653

Location Name: WILD BOAR-633S65W Number: 32NENW County: LAS ANIMAS

Qtrqtr: NENW Sec: 32 Twp: 33S Range: 65W Meridian: 6

Latitude: 37.133130 Longitude: -104.697080

FACILITY - API Number: 05-071- -00 Facility ID: 89162

Facility Name: WILD BOAR Number: 21-32 WD

Qtrqtr: NENW Sec: 32 Twp: 33S Range: 65W Meridian: 6

Latitude: 37.133130 Longitude: -104.697080

CORRECTIVE ACTIONS:

1 CA# 128642

Corrective Action: REMOVE EQUIPMENT COMPLY WITH RULE 603.

Date: 08/29/2019

Response: CA COMPLETED

Date of Completion: 07/08/2019

Operator Comment: Removed equipment and complied with rule 603.

COGCC Decision: _____

COGCC
Representative:

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2 CA# 128643

Corrective Action: COMPLY WITH RULE 603.

Date: 08/08/2019

Response: CA COMPLETED

Date of Completion: 07/08/2019

Operator
Comment:

Complied with rule 603.

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COGCC Decision: _____

COGCC
Representative:

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OPERATOR COMMENT AND SUBMITTAL

Comment: No photos of the CA are available currently

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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: 12/5/2019 12:38:45 PM

ATTACHMENT LIST

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

Document Number **Description**

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Total Attach: 0 Files