

State of Colorado Oil and Gas Conservation Commission

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



Document Number:
402336027

Date Received:
03/09/2020

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>Tom Beardslee</u>		<u>tom.beardslee@state.co.us</u>
<u>Kosola, Jason</u>		<u>jason.kosola@state.co.us</u>
<u>Distribution, Evergreen</u>		<u>cogcc.evergreen@enrllc.com</u>
<u>Pesicka, Conor</u>		<u>conor.pesicka@state.co.us</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 695100782
Inspection Date: 05/30/2019 FIR Submit Date: 06/06/2019 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: 307681

Location Name: ANTELOPE-634S65W Number: 32NWSW County: LAS ANIMAS
Qtrqr: NWS Sec: 32 Twp: 34S Range: 65W Meridian: 6
W
Latitude: 37.040790 Longitude: -104.702140

FACILITY - API Number: 05-071-00 Facility ID: 89208

Facility Name: ANTELOPE Number: 13-32
Qtrqr: NWS Sec: 32 Twp: 34S Range: 65W Meridian: 6
W
Latitude: 37.040790 Longitude: -104.702140

CORRECTIVE ACTIIONS:

1 CA# 125858

Corrective Action: POST WELL SIGN TO COMPLY WITH210 SERIES RULES.

Date: _____

Response: CA COMPLETED

Date of Completion: 06/25/2019

Operator Comment: Well sign corrected o comply with 210 Rules

COGCC Decision: _____

COGCC Representative: _____

2 CA# 125859

Corrective Action: CONTACT COGCC EPS STAFF REGARDING FUTURE USE OF PIT.15 DAYS TO CONTACT EPS.

Date: _____

Response: CA COMPLETED _____

Date of Completion: 06/25/2019

Operator Comment: Contacted COGCC EPS staff regarding the future use of pit

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Please see attached pictures

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: 3/9/2020 10:00:59 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>
402336044	ANTELOPE 13-32 #1
402336049	ANTELOPE 13-32 #2

Total Attach: 2 Files