

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:
402336265

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>Distribution, Evergreen</u>		<u>cogcc.evergreen@enrllc.com</u>
<u>Pesicka, Conor</u>		<u>conor.pesicka@state.co.us</u>
<u>-</u>		<u>dnr_cogccengineering@state.co.us</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 695101749
Inspection Date: 11/14/2019 FIR Submit Date: 11/14/2019 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: 308685

Location Name: DEMPSEY-632S68W Number: 22NWNE County: LAS ANIMAS
Qtrqr: NWNE Sec: 22 Twp: 32S Range: 68W Meridian: 6
Latitude: 37.250510 Longitude: -104.982040

FACILITY - API Number: 05-071- -00 Facility ID: 278888

Facility Name: DEMPSEY Number: 31-22
Qtrqr: NWNE Sec: 22 Twp: 32S Range: 68W Meridian: 6
Latitude: 37.250510 Longitude: -104.982040

CORRECTIVE ACTIONS:

1 CA# 134570

Corrective Action: REMOVE BEBRIS FROM LOCATION PER FULE 603.f.

Date: 02/14/2020

Response: CA COMPLETED

Date of Completion: 09/24/2019

Operator Comment: Removed debris from location

COGCC Decision: _____

COGCC
Representative:

2 CA# 134571

Corrective Action: Perform successful mechanical integrity test. If a successful MIT can not be performed within 30 day CA time the well must be plugged within 3 months per Rule 326 and 208.

Date: 12/14/2019

Response: CA COMPLETED

Date of Completion: 09/24/2019

Operator
Comment:

Performed sucessful mechanical test

COGCC Decision:

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: No Photos available

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 11:25:24 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>
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Total Attach: 0 Files