

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:

402429194

Date Received:

06/23/2020

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

Pesicka, Conor

conor.pesicka@state.co.us

dnr_cogccengineering@state.co.us

Distribution, Evergreen

cogcc.evergreen@enrllc.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 695100636

Inspection Date: 05/10/2019

FIR Submit Date: 05/10/2019

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: 309398

Location Name: Nataly Federal Number: 21-18 County: LAS ANIMAS

Qtrqr: NENW Sec: 18 Twp: 33S Range: 65W Meridian: 6

Latitude: 37.178450 Longitude: -104.713310

FACILITY - API Number: 05-071- -00 Facility ID: 294374

Facility Name: Nataly Federal Number: 21-18

Qtrqr: NENW Sec: 18 Twp: 33S Range: 65W Meridian: 6

Latitude: 37.178450 Longitude: -104.713310

CORRECTIVE ACTIONS:

1 CA# 125047

Corrective Action: Install sign to comply with Rule 210.b.

Date: 07/10/2019

Response: CA COMPLETED

Date of Completion: 07/10/2019

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

COGCC Decision: _____

COGCC
Representative:

2 CA# 125048

Corrective Action:

CONTACT dnr_cogccengineering@state.co.us FOR INSTRUCTION. COPY FIELD INSPECTOR tom.beardslee@state.co.us ALL CORRESPONDENCE WITH ENGINEERING STAFF.

Date: _____

Response: CA COMPLETED

Date of Completion: 04/29/2020

Operator
Comment:

Form 42 document #402384719 was completed

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment:

Please see attached documents

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

Print Name: Susan Wolfram

Signed: _____

Title: Sr. Safety Coordinator

Date: 6/23/2020 5:34:09 PM

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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402429258	Nataly Federal Form 42
402429453	Nataly Federal 21-18

Total Attach: 2 Files