

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:

402577654

Date Received:

01/18/2021

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: 1875 LAWRENCE ST STE 1150

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () _____ Fax: () _____

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

Duran, Alicia

alicia.duran@state.co.us

Distribution, Evergreen

cogcc.evergreen@enrllc.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 695103570

Inspection Date: 11/18/2020

FIR Submit Date: 11/18/2020

FIR Status: _____

Inspected Operator Information:

Company Name: EVERGREEN NATURAL RESOURCES LLC

Company Number: 10705

Address: 1875 LAWRENCE ST STE 1150

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 333428

Location Name: PENCIL-633S66W Number: 20SWNE County: LAS ANIMAS

Qtrqtr: SWNE Sec: 20 Twp: 33S Range: 66W Meridian: 6

Latitude: 37.158920 Longitude: -104.803330

FACILITY - API Number: 05-071- -00 Facility ID: 292137

Facility Name: PENCIL Number: 32-20

Qtrqtr: SWNE Sec: 20 Twp: 33S Range: 66W Meridian: 6

Latitude: 37.158920 Longitude: -104.803330

CORRECTIVE ACTIONS:

1 ☒ CA# 144458

Corrective Action: CONTACT AREA ENGINEER ALICIA DURAN (alicia.duran@state.co.us) FOR DIRECTIVE.

Date: 11/20/2020

Response: CA COMPLETED

Date of Completion: 11/20/2020

Operator Comment: MIT is not need till 07-26-2021, please see attached documentation. Used information from the P&A well the Pencil 32-20 not the information from the Pencil 32-20 TR

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Please see attached documentation

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: 1/18/2021 4:00:23 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>
402577654	FIR RESOLUTION SUBMITTED
402577658	Pencil 32-20 TR

Total Attach: 2 Files