

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:

402746368

Date Received:

07/13/2021

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: 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
Beardslee, Tom		tom.beardslee@state.co.us
Inspections, Evergreen		cogcc.evergreen@enrllc.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 700600270
Inspection Date: 06/21/2021 FIR Submit Date: 06/21/2021 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:

Location Name: Number: County:
Qtrqtr: NENW Sec: 32 Twp: 32S Range: 65W Meridian: 6
Latitude: 37.220212 Longitude: -104.697395

FACILITY - API Number: 05-071-00 Facility ID: 112908

Facility Name: RED DOG 21-32 Number:
Qtrqtr: NENW Sec: 32 Twp: 32S Range: 65W Meridian: 6
Latitude: 37.220212 Longitude: -104.697395

CORRECTIVE ACTIONS:

1 CA# 152026

Corrective Action: Operator shall provide COGCC documentation of Rule 905.b.(3) A-F for water removed from pit and pigging wastes. Date: 06/25/2021

Response: CA COMPLETED Date of Completion: 06/21/2021

Operator Comment: Provided COGCC the documentation of Rule 905.b.(3) A-F for water removal from pit and pigging

COGCC Decision: _____

COGCC Representative: _____

2 CA# 152027

Corrective Action: Operator shall document release into produced water pit on a Form 19.

Date: 06/22/2021

Response: CA COMPLETED

Date of Completion: 06/21/2021

Operator Comment:

Documented release into produced water pit on Form 19

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Please find the 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: 7/13/2021 3:44:05 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>
402746376	Red Dog initial Transport
402746379	Red Dog Final Transport
402746381	Red Dog Form 19 Initial
402746384	Red Dog Form 19 Supplemental

Total Attach: 4 Files