

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:

402852729

Date Received:

10/25/2021

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

-

dnr_cogccengineering@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 695104269

Inspection Date: 04/21/2021

FIR Submit Date: 04/21/2021

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: 307484

Location Name: MARY ANN-633S66W Number: 24NESW County: LAS ANIMAS

Qtrqr: NESW Sec: 24 Twp: 33S Range: 66W Meridian: 6

Latitude: 37.155370 Longitude: -104.733270

FACILITY - API Number: 05-071- -00 Facility ID: 217721

Facility Name: MARY ANN Number: 23-24

Qtrqr: NESW Sec: 24 Twp: 33S Range: 66W Meridian: 6

Latitude: 37.155370 Longitude: -104.733270

CORRECTIVE ACTIONS:

1 CA# 149946

Corrective Action: Install appropriate fittings to allow bradenhead visual inspection as per Rule 419.a.(1), (2)

Date: 05/21/2021

Response: CA COMPLETED

Date of Completion: 10/18/2021

Installed appropriate fittings to allow bradenhead visual inspection as per Rule 419.a.(1), (2)

Operator _____
Comment: _____

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: 10/25/2021 6:44:07 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>
402852730	Mary Ann 23-24

Total Attach: 1 Files