

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:  
402922378

Date Received:  
01/10/2022

FIR RESOLUTION FORM

Overall Status:

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  
Distribution, Evergreen cogcc.evergreen@enrllc.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 695105263  
Inspection Date: 12/07/2021 FIR Submit Date: 12/07/2021 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: 307803

Location Name: LORENCITO-634S66W Number: 5NESE County: LAS ANIMAS  
Qtrqr: NESE Sec: 5 Twp: 34S Range: 66W Meridian: 6  
Latitude: 37.109860 Longitude: -104.797870

FACILITY - API Number: 05-071-00 Facility ID: 256924

Facility Name: LORENCITO Number: 9-5-34-66  
Qtrqr: NESE Sec: 5 Twp: 34S Range: 66W Meridian: 6  
Latitude: 37.109860 Longitude: -104.797870

CORRECTIVE ACTIONS:

1 CA# 158458

Corrective Action: REPAIR BERM WALL IN FRONT OF TANK. Date: 01/07/2022

Response: CA COMPLETED Date of Completion: 01/06/2022

Operator Comment: Repaired berm wall in front of tank

COGCC Decision:

COGCC  
Representative: \_\_\_\_\_

**2** CA# 158459

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

Date: 12/21/2021

Response: CA COMPLETED

Date of Completion: 01/06/2022

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

COGCC Decision: \_\_\_\_\_

COGCC  
Representative: \_\_\_\_\_

**OPERATOR COMMENT AND SUBMITTAL**

Comment: Please find the attached Photo's

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: 1/10/2022 8:20:48 PM

**ATTACHMENT LIST**

View Attachments in Imaged Documents on COGCC website (<http://ogccweblink.state.co.us/>) - Search by Document Number.

**Document Number**      **Description**

402922380	Lorencito 9-5-34-66
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Total Attach: 1 Files