

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
<u>Duran, Alicia</u>		<u>alicia.duran@state.co.us</u>
<u>Distribution, Evergreen</u>		<u>cogcc.evergreen@enrllc.com</u>
<u>.</u>		<u>dnr_cogccengineering@state.co.us</u>

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: Approved

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>
402852729	FIR RESOLUTION SUBMITTED
402852730	Mary Ann 23-24

Total Attach: 2 Files