

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:

402852734

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

Distribution, Evergreen

cogcc.evergreen@enrllc.com

Duran, Alicia

alicia.duran@state.co.us

dnr_cogccengineering@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 695104263

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: 307759

Location Name: TERESA-633S66W Number: 25NESE County: LAS ANIMAS

Qtrqr: NESE Sec: 25 Twp: 33S Range: 66W Meridian: 6

Latitude: 37.141400 Longitude: -104.723940

FACILITY - API Number: 05-071- -00 Facility ID: 256680

Facility Name: TERESA Number: 43-25

Qtrqr: NESE Sec: 25 Twp: 33S Range: 66W Meridian: 6

Latitude: 37.141400 Longitude: -104.723940

CORRECTIVE ACTIONS:

1 ☒ CA# 149944

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: 10/21/2021

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

COGCC Decision: Approved pending re-inspection

COGCC
Representative: CANNOT APPROVE WITHOUT PHOTOS

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 6:49:41 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> |
|------------------------|--------------------------|
| 402852734 | FIR RESOLUTION SUBMITTED |
| 402852736 | Teresa 43-25 |

Total Attach: 2 Files