

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:  
402915486

Date Received:  
01/03/2022

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>Distribution, Evergreen</u>		<u>cogcc.evergreen@enrllc.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 695105091  
Inspection Date: 11/04/2021 FIR Submit Date: 11/04/2021 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: 334227

Location Name: JALAPENO-632S65W Number: 19SWSE County: LAS ANIMAS  
Qtrqtr: SWSE Sec: 19 Twp: 32S Range: 65W Meridian: 6  
Latitude: 37.239280 Longitude: -104.709660

FACILITY - API Number: 05-071-00 Facility ID: 89160

Facility Name: JALAPENO Number: 34-19 TR  
Qtrqtr: SWSE Sec: 19 Twp: 32S Range: 65W Meridian: 6  
Latitude: 37.239280 Longitude: -104.709660

CORRECTIVE ACTIONS:

1  CA# 157564

Corrective Action: Install sign to comply with Rule 605.a. Date: 12/04/2021

Response: CA COMPLETED Date of Completion: 12/07/2021

Operator Comment: Installed sign to comply with Rule 605.a.

COGCC Decision: Approved via an AMI

THE CORRECTIVE ACTION ON THE ORIGINAL INSPECTION DOC #695105091 IS THAT THE JALAPENO 34-

COGCC Representative: 19 DOES NOT HAVE A SIGN POSTED, BOTH SIGNS POSTED ON LOCATION ARE FOR THE JALAPENO 34-19 TR. THE PHOTO ATTACHED TO THIS FIR IS A PHOTO OF THE JALAPENO 34-19 TR. I AM SUBMITTING ANOTHER INSPECTION WITH THE SAME CORRECTIVE ACTION.

OPERATOR COMMENT AND SUBMITTAL

Comment: Please find the attached Photo

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: 1/3/2022 6:28:33 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>
402915486	FIR RESOLUTION SUBMITTED
402915487	Jalapeno 34-19 TR

Total Attach: 2 Files