

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:
402962991

Date Received:
02/22/2022

FIR RESOLUTION FORM

Overall Status: CAC

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

COGCC INSPECTION SUMMARY:

FIR Document Number: 695104593
Inspection Date: 07/19/2021 FIR Submit Date: 07/19/2021 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: 308484

Location Name: CASPER-632S65W Number: 16SWSW County: LAS ANIMAS
Qtrqr: SWS Sec: 16 Twp: 32S Range: 65W Meridian: 6
W
Latitude: 37.252570 Longitude: -104.684950

FACILITY - API Number: 05-071-00 Facility ID: 272742

Facility Name: CASPER Number: 14-16
Qtrqr: SWS Sec: 16 Twp: 32S Range: 65W Meridian: 6
W
Latitude: 37.252570 Longitude: -104.684950

CORRECTIVE ACTIONS:

1 CA# 153898

Corrective Action: Comply with general provisions of the oil and gas act for wildlife protection AND SB-181. Date: 07/26/2021

Response: CA COMPLETED Date of Completion: 12/22/2021

Operator Comment: Complied with Rule 1002.f.(2)B, Complying with general provisions of the oil and gas act for wildlife protection and SB-181

COGCC Decision: Approved via an AMI

COGCC Representative:

[Empty text box for COGCC Representative]

2 CA# 153899

Corrective Action: COMPLY WITH RULE 606, REMOVE UNUSED EQUIPEMNT AND REMOVE OR MARK UNUSED RIZER.

Date: 08/02/2021

Response: CA COMPLETED

Date of Completion: 12/22/2021

Operator Comment: Marked unused riser

[Empty text box for Operator Comment]

COGCC Decision: Approved via an AMI

COGCC Representative:

[Empty text box for COGCC Representative]

OPERATOR COMMENT AND SUBMITTAL

Comment: Please find the attached Photo's

[Empty text box for Comment]

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: 2/22/2022 5:54:16 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>
402962991	FIR RESOLUTION SUBMITTED
402962993	Casper 14-16

Total Attach: 2 Files