

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:  
403027092

Date Received:  
04/25/2022

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>719-846-7898</u>	<u>cogcc.evergreen@enrllc.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 695106069  
Inspection Date: 04/13/2022 FIR Submit Date: 04/13/2022 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: 308841

Location Name: AVIATOR-633S67W Number: 4SWNW County: LAS ANIMAS  
Qtrqr: SWN Sec: 4 Twp: 33S Range: 67W Meridian: 6  
W  
Latitude: 37.202360 Longitude: -104.899240

FACILITY - API Number: 05-071-00 Facility ID: 283267

Facility Name: AVIATOR Number: 12-4  
Qtrqr: SWN Sec: 4 Twp: 33S Range: 67W Meridian: 6  
W  
Latitude: 37.202360 Longitude: -104.899240

CORRECTIVE ACTIONS:

1  CA# 161032

Corrective Action: Conduct maintenance on equipment, cleanup stained material and review self inspection processes. COMPLY WITH RULE 1002,.(2).D.

Date: 04/25/2022

Response: CA COMPLETED Date of Completion: 04/25/2022

Operator Comment: Conducted Maintenance on equipment, cleaned up stained material and reviewed self-inspection to comply with Rule 1002,.(2)D. (Repaired Leaking Equipment)

COGCC Decision: Approved via an AMI

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: 4/25/2022 5:32:06 PM

**ATTACHMENT LIST**

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

<b>Document Number</b>	<b>Description</b>
403027092	FIR RESOLUTION SUBMITTED
403027094	Aviator 12-4

Total Attach: 2 Files