

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:
403437536

Date Received:
06/19/2023

FIR RESOLUTION FORM

Overall Status:

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
Kosola, Jason		jason.kosola@state.co.us
Distribution, Evergreen	719-846-7898	cogcc.evergreen@enrllc.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 695107593
Inspection Date: 02/13/2023 FIR Submit Date: 02/13/2023 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: 309314

Location Name: FOXTROT-633S66W Number: 10SWSE County: LAS ANIMAS
Qtrqtr: SWSE Sec: 10 Twp: 33S Range: 66W Meridian: 6
Latitude: 37.179870 Longitude: -104.764900

FACILITY - API Number: 05-071- -00 Facility ID: 292135

Facility Name: FOXTROT Number: 34-10
Qtrqtr: SWSE Sec: 10 Twp: 33S Range: 66W Meridian: 6
Latitude: 37.179870 Longitude: -104.764900

CORRECTIVE ACTIONS:

1 CA# 167408

Corrective Action: REMOVE OR USE UNUSED EQUIPMENT PER RULE 606. Date: 02/24/2023

Response: CA COMPLETED Date of Completion: 06/19/2023

Operator Comment: Shed removed from location per rule 606

COGCC Decision: _____

COGCC
Representative:

2 CA# 167409

Corrective Action: CONTACT ESP PER RULE 910.

Date: 02/14/2023

Response: CA COMPLETED

Date of Completion: 06/19/2023

Operator
Comment:

Pit closure filed per rule 910. F4 #403196789 approved 11-14-22

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Pit closure F4 document #403196789, approved 11-14-22

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Tracy Dyke

Signed: _____

Title: Production Technician

Date: 6/19/2023 9:54:22 AM

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>
403437550	Shed removal
403437553	Pit closure photos

Total Attach: 2 Files