

State of Colorado
Energy & Carbon Management Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:

403525185

Date Received:

09/11/2023

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

Distribution, Evergreen

719-846-7898

cogcc.evergreen@enrllc.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 695108511

Inspection Date: 08/03/2023

FIR Submit Date: 08/03/2023

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: 308342

Location Name: GOODE-633S65W Number: 17SWSW County: LAS ANIMAS

Qtrqr: SWS Sec: 17 Twp: 33S Range: 65W Meridian: 6
W

Latitude: 37.166580 Longitude: -104.701890

FACILITY - API Number: 05-071- -00 Facility ID: 267908

Facility Name: GOODE Number: 14-17

Qtrqr: SWS Sec: 17 Twp: 33S Range: 65W Meridian: 6
W

Latitude: 37.166580 Longitude: -104.701890

CORRECTIVE ACTIONS:

1 ☒ CA# 177201

Corrective Action: REMOVE UNUSED EQUIPMENT PER RULE 606.

Date: 09/03/2023

Response: CA COMPLETED

Date of Completion: 09/01/2023

Operator
Comment: Equipment removed per rule 606

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

2 ☒ CA# 177202

Corrective Action: INSTALL STORMWATER PREVENTION AND MAINTAIN ACCORDING TO RULE 1002.

Date: 09/03/2023

Response: CA COMPLETED

Date of Completion: 09/01/2023

Operator
Comment: Stormwater repairs per rule 1002

COGCC Decision: Approved pending re-inspection

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment:

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: Regulatory Technician

Date: 9/11/2023 7:17:43 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>
403525185	FIR RESOLUTION SUBMITTED
403525191	Equipment and stormwater
403525192	Equipment and stormwater

Total Attach: 3 Files