

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:
402433364

Date Received:
06/29/2020

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>Tom Beardslee</u>		<u>tom.beardslee@state.co.us</u>
<u>Distribution, Evergreen</u>		<u>cogcc.evergreen@enrllc.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 695101752
Inspection Date: 11/18/2019 FIR Submit Date: 11/18/2019 FIR Status: _____

Inspected Operator Information:

Company Name: EVERGREEN NATURAL RESOURCES LLC Company Number: 10705
Address: 1801 BROADWAY SUITE 350
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 308642

Location Name: FIREHAWK Number: 34-26 TR County: LAS ANIMAS
Qtrqtr: SWSE Sec: 26 Twp: 32S Range: 66W Meridian: 6
Latitude: 37.225290 Longitude: -104.745540

FACILITY - API Number: 05-071- -00 Facility ID: 277849

Facility Name: FIREHAWK Number: 34-26
Qtrqtr: SWSE Sec: 26 Twp: 32S Range: 66W Meridian: 6
Latitude: 37.225290 Longitude: -104.745540

CORRECTIVE ACTIONS:

1 CA# 134686

Corrective Action: Remove and dispose impacted material in approved manner, service and maintain equipment and self inspect to prevent recurrence of conditions per 1002.f(2) and 907. (THIS IS SECOND WARNING OF IMPACTED SOIL AROUND COMPRESSOR SKID, ENFORCEMENT WILL BE CONSIDERED IF CORRECTIVE ACTION IS NOT ADDRESSED PRIOR TO NEXT INSPECTION).

Date: 12/03/2019

Response: CA COMPLETED Date of Completion: 12/03/2019

Removed and disposed of impacted material and will prevent recurrence of conditions per 1002.f(2) and 907

Operator
Comment:

COGCC Decision: Approved via an AMI

COGCC
Representative:

CA ADDRESSED BASED ON PHOTOS SUBMITTED BY OPERATOR.

OPERATOR COMMENT AND SUBMITTAL

Comment: Please see attached Photos

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: 6/29/2020 10:35:35 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>
402433364	FIR RESOLUTION SUBMITTED
402433370	FIREHAWK 34-26 Compressor
402433374	FIREHAWK 34-26 II

Total Attach: 3 Files