FORM
FIRR
Rev 5/16

## State of Colorado Oil and Gas Conservation Commission



Document Number: 402827130

Date Received: 09/29/2021

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

## FIR RESOLUTION FORM

Overall Status: <u>CAC</u>	
CA Summary:	
1 of 1 CAs from the FIR responded to on this Form	
1 CA Completed 0 Factual Review Request	
OPERATOR INFOR	MATION
OGCC Operator Number: 10705	Contact Name and Telephone:
Name of Operator: EVERGREEN NATURAL RESOURCES LLC	Name:
Address: 1875 LAWRENCE ST STE 1150	Phone: ( ) Fax: ( )
City: DENVER State: CO Zip: 80202	Email:
Additional Operator Contact:	
Contact Name Phone E	≣mail
<u>Distribution, Evergreen</u>	cogcc.evergreen@enrllc.com
COGCC INSPECTION SUMMARY:	
FIR Document Number: 690201914	
Inspection Date: 08/04/2021 FIR Submit Date: 08/05/202	1 FIR Status:
<del></del>	
Inspected Operator Information:	Company Number 40705
Company Name: EVERGREEN NATURAL RESOURCES LLC	Company Number:10705
Address: 1875 LAWRENCE ST STE 1150  City: DENI/ER State: CO 7in: 803	202
City: DENVER State: CO Zip: 802	<u> </u>
LOCATION - Location ID: 309093	0 / 140 41
Location Name: KENNEDY-632S68W Number: 28NESE	County: LAS ANIMAS
Qtrqtr:         NESE         Sec:         28         Twp:         32S         Range:         68W           Latitude:         37.225410         Longitude:         -104.996160	Meridian:6
<del></del>	
FACILITY - API Number: 05-07100 Facility ID:	
Facility Name: KENNEDY Number: 43-28	
Qtrqtr:         NESE         Sec:         28         Twp:         32S         Range:         68W	Meridian: 6
Latitude: 37.225410 Longitude: -104.996160	
<u>`CORRECTIVE ACTIONS</u> :	
1 CA# 154591	
Corrective Action: Install or repair required BMPs per Rule 1002.f.(2)C	Date: <u>09/17/2021</u>
Response: CA COMPLETED Date of	of Completion: 09/17/2021
Operator Comment: Installed and repaired required BMPs per Rule 1002.f.(	(2)C
COGCC Decision:	

COGCC Representative:		
OPERATOR COMME	NT AND SUBMITTAL	
Comment: Pleas	find the attached Photo's	
I hereby certify th complete.	at the statements made in this form are, to the best of my knowledge, true, correct, and	
Print Name: Susa	Wolfram Signed:	
Title: Sr. Safety Co	Date: 9/29/2021 7:48:38 PM	

## **ATTACHMENT LIST**

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

Document NumberDescription402827131Kennedy 43-28

Total Attach: 1 Files