

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:
403551025

Date Received:
10/05/2023

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

Inspections, Evergreen

cogcc.evergreen@enrllc.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 690204449

Inspection Date: 07/20/2023

FIR Submit Date: 07/21/2023

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: 307646

Location Name: JULIEANNA-632S65W Number: 22SENE County: LAS ANIMAS

Qtrqr: SENE Sec: 22 Twp: 32S Range: 65W Meridian: 6

Latitude: 37.244810 Longitude: -104.653310

FACILITY - API Number: 05-071- -00 Facility ID: 217942

Facility Name: JULIEANNA Number: 42-22

Qtrqr: SENE Sec: 22 Twp: 32S Range: 65W Meridian: 6

Latitude: 37.244810 Longitude: -104.653310

CORRECTIVE ACTIONS:

1 ☒ CA# 176259

Corrective Action: Comply with Rule 1004 for stabilization and noxious weed control.

Date: 07/20/2023

Response: CA COMPLETED

Date of Completion: 10/05/2023

Operator
Comment:

Noxious weeds clean up

COGCC Decision: Approved

COGCC Representative:			
2	<input checked="" type="checkbox"/> CA# 176260		
Corrective Action:	Install or repair required BMPs per Rule 1002.f.(2)		Date: <u>07/20/2023</u>
Response:	CA COMPLETED		Date of Completion: <u>10/04/2023</u>
Operator Comment:	F27 Filed for pit closure		
COGCC Decision:	Approved		
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: <u>Tracy Dyke</u>	Signed: _____
Title: <u>Regulatory Technician</u>	Date: <u>10/5/2023 2:48:30 PM</u>

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>
403551025	FIR RESOLUTION SUBMITTED
403551910	Noxious weeds removed
403551921	Approved per variance

Total Attach: 3 Files