

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:

401756827

Date Received:

09/07/2018

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: 10651

Name of Operator: VERDAD RESOURCES LLC

Address: 5950 CEDAR SPRINGS ROAD

City: DALLAS State: TX Zip: 75235

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name

Michael Cugnetti

Phone

720-845-6901

Email

mcugnetti@verdadoil.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 687400581

Inspection Date: 08/28/2018

FIR Submit Date: 08/28/2018

FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: VERDAD RESOURCES LLC

Company Number: 10651

Address: 5950 CEDAR SPRINGS ROAD

City: DALLAS State: TX Zip: 75235

LOCATION - Location ID: 320390

Location Name: GREAT WESTERN ADAM "B" U Number: 10 County: \_\_\_\_\_

Qtrqtr: N2SE Sec: 6 Twp: 1S Range: 65W Meridian: 6

Latitude: 39.991160 Longitude: -104.702066

FACILITY - API Number: 05-001- -00 Facility ID: 320390

Facility Name: GREAT WESTERN ADAM "B" U Number: 10

Qtrqtr: N2SE Sec: 6 Twp: 1S Range: 65W Meridian: 6

Latitude: 39.991160 Longitude: -104.702066

CORRECTIVE ACTIONS:

1 CA# 118265

Corrective Action: Comply with Rule 603.f .

Date: 09/24/2018

Response: CA COMPLETED

Date of Completion: 09/04/2018

Operator Comment: Drum removed from location

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

**2** CA# 118266

Corrective Action: Install sign to comply with Rule 210.d.

Date: 10/29/2018

Response: CA COMPLETED

Date of Completion: 09/04/2018

Operator  
Comment: Pit volume labeled on sign

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: all corrective actions completed 9/4/18

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

Print Name: Michael Cugnetti

Signed: \_\_\_\_\_

Title: EH&S Manager

Date: 9/7/2018 11:48:51 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

401756838	corrective action photo
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Total Attach: 1 Files