

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:

402335748

Date Received:

03/08/2020

Spill report taken by:

YOUNG, ROB

Spill/Release Point ID:

472977

SPILL/RELEASE REPORT (INITIAL)

This form is to be submitted by the party responsible for the oil and gas spill or release. Refer to COGCC Rule 906.b. for reporting requirements of spills or releases of E&P Waste or produced fluids. Submit a Site Investigation and Remediation Workplan (Form 27) when requested by the Director.

OPERATOR INFORMATION

Name of Operator: <u>VERDAD RESOURCES LLC</u>	Operator No: <u>10651</u>	Phone Numbers
Address: <u>5950 CEDAR SPRINGS ROAD</u>		Phone: <u>(720) 8456901</u>
City: <u>DALLAS</u> State: <u>TX</u> Zip: <u>75235</u>		Mobile: <u>()</u>
Contact Person: <u>Michael Cugnetti</u>		Email: <u>mcugnetti@verdadresources.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 402335748

Initial Report Date: 03/08/2020 Date of Discovery: 03/08/2020 Spill Type: Recent Spill

Spill/Release Point Location:

QTRQTR W2SW SEC 8 TWP 9N RNG 59W MERIDIAN 6

Latitude: 40.761695 Longitude: -104.009524

Municipality (if within municipal boundaries): _____ County: WELD

Reference Location:

Facility Type: TANK BATTERY Facility/Location ID No 456879

Spill/Release Point Name: Timbro 9-59 8B Pad Well API No. (Only if the reference facility is well) 05- -

No Existing Facility or Location ID No.

Fluid(s) Spilled/Released (please answer Yes/No):

Was one (1) barrel or more spilled outside of berms or secondary containment? Yes

Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.

Were Five (5) barrels or more spilled? No

Estimated Total Spill Volume: use same ranges as others for values

Estimated Oil Spill Volume(bbl): >=1 and <5 Estimated Condensate Spill Volume(bbl): 0

Estimated Flow Back Fluid Spill Volume(bbl): 0 Estimated Produced Water Spill Volume(bbl): 0

Estimated Other E&P Waste Spill Volume(bbl): 0 Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: _____

Land Use:

Current Land Use: NON-CROP LAND Other(Specify): _____

Weather Condition: Clear

Surface Owner: FEE Other(Specify): _____

Check if impacted or threatened by spill/Release (please answer Yes/No to all that apply):

Waters of the State Residence/Occupied Structure Livestock Public Byway Surface Water Supply Area

As defined in COGCC 100-Series Rules

Describe what is known about the spill/release event (what happened -- including how it was stopped, contained, and recovered):

Valve on recirculation pump was left open. Valve was closed and liquid was cleaned up immediately.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

<u>Date</u>	<u>Agency/Party</u>	<u>Contact</u>	<u>Phone</u>	<u>Response</u>
3/8/2020	Weld County	Weld OEM Spill Report	-	received
3/8/2020	Land owner	Timbro Ranch and CattleCo	-	none yet

Was there a Grade 1 Gas Leak? Yes No

If YES, enter the Document Number of the Grade 1 Gas Leak Report Form 44: _____

Was there a reportable accident associated with either a Grade 1 Gas Leak or an E&P waste spill or release? Yes No

If YES, enter the Document Number of the Initial Accident Report, Form 22: _____

Was there damage during excavation? Yes No

If YES, was CO 811 notified prior to excavation? Yes No

OPERATOR COMMENTS:

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

Signed: _____ Print Name: Michael Cugnetti

Title: Director of EHS&R Date: 03/08/2020 Email: mcugnetti@verdadresources.com

COA Type

Description

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Attachment Check List

Att Doc Num

Name

402335748	SPILL/RELEASE REPORT(INITIAL)
402335841	FORM 19 SUBMITTED

Total Attach: 2 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)