

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:
402640309

Date Received:
03/25/2021

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: 1125 17TH STREET SUITE 550
City: DENVER State: CO Zip: 80202

Contact Name and Telephone:
Name: _____
Phone: () _____ Fax: () _____
Email: _____

Additional Operator Contact:

Contact Name	Phone	Email
<u>Michael Cugnetti</u>	<u>720-845-6901</u>	<u>mcugnetti@verdadresources.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 700900504
Inspection Date: 01/13/2021 FIR Submit Date: 03/10/2021 FIR Status: _____

Inspected Operator Information:

Company Name: VERDAD RESOURCES LLC Company Number: 10651
Address: 1125 17TH STREET SUITE 550
City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 320390

Location Name: GREAT WESTERN ADAM "B" U Number: 10 County: ADAMS
Qtrqtr: NESE Sec: 6 Twp: 1S Range: 65W Meridian: 6
Latitude: 39.991304 Longitude: -104.701912

FACILITY - API Number: 05-001- -00

Facility ID: 203628

Facility Name: ADAM 10 'B' UNIT Number: 1
Qtrqtr: NESE Sec: 6 Twp: 1S Range: 65W Meridian: 6
Latitude: 39.991304 Longitude: -104.701912

CORRECTIVE ACTIONS:

1 CA# 147258

Corrective Action: Paint tanks per Rule 804. Corrective action date 9/3/2021
See photos 4 through 9

Date: 09/03/2021

Response: CA COMPLETED Date of Completion: 03/25/2021

Operator Comment: Tank painted. See attached corrective action photo documentation.

COGCC Decision: _____

COGCC
Representative:

2 CA# 147259

Corrective Action: Paint tanks per Rule 804. Corrective action date 9/3/2021
See photos 4 through 9

Date: 09/03/2021

Response: CA COMPLETED

Date of Completion: 03/25/2021

Operator
Comment:

separator painted. See attached corrective action photo documentation.

COGCC Decision:

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: Michael Cugnetti

Signed:

Title: Director of EHS&R

Date: 3/25/2021 4:46:33 PM

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>
402640315	Corrective action photo documentation
402640316	Corrective action photo documentation

Total Attach: 2 Files