

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:  
401983658

Date Received:  
03/26/2019

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

1 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

Phone

Email

Michael Cugnetti

7208456901

mcugnetti@verdadoil.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 682504597

Inspection Date: 03/18/2019

FIR Submit Date: 03/18/2019

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: 462872

Location Name: PEGGY Number: 2501 PAD County: \_\_\_\_\_

Qtrqr: SESW Sec: 25 Twp: 9N Range: 60W Meridian: 6

Latitude: 40.714774 Longitude: -104.040842

FACILITY - API Number: 05-123-00 Facility ID: 462872

Facility Name: PEGGY Number: 2501 PAD

Qtrqr: SESW Sec: 25 Twp: 9N Range: 60W Meridian: 6

Latitude: 40.714774 Longitude: -104.040842

CORRECTIVE ACTIONS:

1 CA# 123280

Corrective Action: A disturbance area of 6.64 acres was mapped on 03/18/2019 via Trimble Juno 3B GPS unit; this exceeds the permitted disturbance area of 6 acres per the approved Form 2A.

Date: \_\_\_\_\_

Response: CA COMPLETED

Date of Completion: 03/25/2019

Operator Comment: We had our survey company go back out to verify. They verified the location of the pad extent stakes and that the pad was built within the stakes they put down. The verified locations reflect the locations in the attached drawing that was used for the 2A.

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: EH&S Manager

Date: 3/26/2019 8:00:05 AM

**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>
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401984646	Pad Location Drawing
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Total Attach: 1 Files