

# State of Colorado Oil and Gas Conservation Commission

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Document Number:

402345942

Date Received:

03/18/2020

Spill report taken by:

YOUNG, ROB

Spill/Release Point ID:

472977

## SPILL/RELEASE REPORT (SUPPLEMENTAL)

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>	<b>Phone Numbers</b>
Address: <u>5950 CEDAR SPRINGS ROAD</u>		Phone: <u>(720) 8456901</u>
City: <u>DALLAS</u>	State: <u>TX</u>	Zip: <u>75235</u>
Contact Person: <u>Michael Cugnetti</u>		Mobile: <u>( )</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 6Latitude: 40.761695 Longitude: -104.009524Municipality (if within municipal boundaries): \_\_\_\_\_ County: WELD

#### Reference Location:

Facility Type: TANK BATTERY☒ Facility/Location ID No 456879Spill/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 <5Estimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): 0Estimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: \_\_\_\_\_

#### Land Use:

Current Land Use: NON-CROP LAND

Other(Specify): \_\_\_\_\_

Weather Condition: ClearSurface 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

Date	Agency/Party	Contact	Phone	Response
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 ☐

### SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 03/18/2020		
<b>FLUIDS</b>	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	1	1	<input type="checkbox"/>
CONDENSATE	0	0	<input type="checkbox"/>
PRODUCED WATER	0	0	<input type="checkbox"/>
DRILLING FLUID	0	0	<input type="checkbox"/>
FLOW BACK FLUID	0	0	<input type="checkbox"/>
OTHER E&P WASTE	0	0	<input type="checkbox"/>

specify: \_\_\_\_\_

Was spill/release completely contained within berms or secondary containment? NO Was an Emergency Pit constructed? NO

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

**A Form 15 Pit Report shall be submitted within 30 calendar days after the construction of an emergency pit**

Impacted Media (Check all that apply) ☒ Soil ☐ Groundwater ☐ Surface Water ☐ Dry Drainage Feature

Surface Area Impacted: Length of Impact (feet): 20 Width of Impact (feet): 10

Depth of Impact (feet BGS): 0 Depth of Impact (inches BGS): 2

How was extent determined?

Extent was determined visually and with a PID. Soil sample was taken to confirm extent was reached during cleanup.

Soil/Geology Description:

Spill occurred entirely on constructed well pad surface. The pad surface is one foot of compacted roadbase course.

Depth to Groundwater (feet BGS) 105 Number Water Wells within 1/2 mile radius: 0

Additional Spill Details Not Provided Above:

## Attachment Check List

**Att Doc Num**      **Name**

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Total Attach: 0 Files

**General Comments**

**User Group**      **Comment**      **Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)