

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:

402906043

Date Received:

12/21/2021

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: 1125 17TH STREET SUITE 550

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

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

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

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

Additional Operator Contact:

Contact Name

Michael Cugnetti

Phone

720-845-6901

Email

mcugnetti@verdadresources.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 697503561

Inspection Date: 12/14/2021

FIR Submit Date: 12/16/2021

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: 461117

Location Name: Rohn Fed Number: 1324 County: \_\_\_\_\_

Qtrqr: SWNE Sec: 13 Twp: 9N Range: 60W Meridian: 6

Latitude: 40.752461 Longitude: -104.036565

FACILITY - API Number: 05-123-00 Facility ID: 461117

Facility Name: Rohn Fed Number: 1324

Qtrqr: SWNE Sec: 13 Twp: 9N Range: 60W Meridian: 6

Latitude: 40.752461 Longitude: -104.036565

CORRECTIVE ACTIONS:

1 ☒ CA# 158734

Corrective Action: Comply with Rule 406.c.

Date: 12/14/2021

Response: CA COMPLETED

Date of Completion: 12/20/2021

Operator

Comment:

A copy of the approved Form 2A, and Form 4 modifying the approved Form 2A, has been posted in a protected and conspicuous place on location. Please see the attached photo documentation of the Corrective Action.

COGCC Decision: Approved via an AMI

Approved via an AMI of this FIR resolution acknowledges the document and attachments were received. Based

COGCC  
Representative: on the attached photos, Operator has completed the corrective action.

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: 12/21/2021 11:16:21 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>
402906043	FIR RESOLUTION SUBMITTED
402906061	Corrective action photo documentation

Total Attach: 2 Files