

State of Colorado Oil and Gas Conservation Commission

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Document Number:

403431770

Date Received:

06/27/2023

Spill report taken by:

Graber, Candice
(Nikki)

Spill/Release Point ID:

484200

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 912.b. for reporting requirements of spills or releases of E&P Waste, produced Fluids, or unauthorized Releases of natural gas. Submit a Site Investigation and Remediation Workplan (Form 27) if Rule 913.c. applies.

OPERATOR INFORMATION

Name of Operator: <u>VERDAD RESOURCES LLC</u>	Operator No: <u>10651</u>	Phone Numbers Phone: <u>(720) 8456901</u> Mobile: <u>()</u> Email: <u>mcugnetti@verdadresources.com</u>
Address: <u>1125 17TH STREET SUITE 550</u>		
City: <u>DENVER</u>	State: <u>CO</u> Zip: <u>80202</u>	
Contact Person: <u>Michael Cugnetti</u>		

☐ Transfer of Operatorship: Pursuant to Rule 912.f, this Supplemental Form 19 is being submitted to designate the Buying Operator as the responsible Operator for this Spill and Release.

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 403374468

Initial Report Date: 04/14/2023 Date of Discovery: 04/03/2023 Spill Type: Historical Release

Spill/Release Point Location:

QTRQTR SWSW SEC 7 TWP 1S RNG 65W MERIDIAN 6Latitude: 39.975794 Longitude: -104.710982Municipality (if within municipal boundaries): _____ County: ADAMS

Enter Lat./long measurement of the actual Spill/Release Point. Lat./Long. Data shall meet standards of Rule 216.

Reference Location:

Facility Type: OIL AND GAS LOCATION☒ Facility/Location ID No 320179Spill/Release Point Name: Green 1☐ Well API No. (Only if the reference facility is well) 05- -☐ No Existing Facility or Location ID No.

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

Estimated Oil Spill Volume(bbl): UnknownEstimated Condensate Spill Volume(bbl): 0Estimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): UnknownEstimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: _____

Has the subject Spill/Release been controlled at the time of reporting? Yes

Land Use:

Current Land Use: OTHEROther(Specify): PastureWeather Condition: ClearSurface Owner: FEE

Other(Specify): _____

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

Historic spill discovered during facility decommissioning. Well is P&A'd, all equipment off site.

List of Agencies and Other Parties Notified Pursuant to Rule 912.b.(7)-(11):

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
4/13/2023	Landowner	Mr. Pierce	-	Spoke with about spill and cleanup
4/13/2023	Adams County	Chane Finkenbinder	-	Inspector on site

REPORT CRITERIA

Rule 912.b.(1) Report to the Director (select all criteria that apply):

- No Rule 912.b.(1).A: A Spill or Release of any size that impacts or threatens to impact any Waters of the State, Public Water System, residence or occupied structure, livestock, wildlife, or publicly-maintained road.
- Waters of the State: _____ Public Water System: _____
- Residence or Occupied Structure: _____ Livestock: _____
- Wildlife: _____ Publicly-Maintained Road: _____
- No Rule 912.b.(1).B: A Spill or Release in which 1 barrel or more of E&P Waste or produced fluids is spilled or released outside of berms or other secondary containment.
- No Rule 912.b.(1).C: A Spill or Release of 5 barrels or more of E&P Waste or produced Fluids regardless of whether the Spill or Release is completely contained within berms or other secondary containment.
- No Rule 912.b.(1).D: Within 6 hours of discovery, a Grade 1 Gas Leak. For a Grade 1 Gas Leak from a Flowline, the Operator also must submit the Form 19 – Initial, document number on a Form 44, Flowline Report, for the Grade 1 Gas Leak
- Enter the approximate time of discovery _____ (HH:MM)
- 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? _____
- Enter the Document Number of the Initial Accident Report, Form 22 _____
- Was there damage during excavation? _____
- Was CO 811 notified prior to excavation? _____
- Yes Rule 912.b.(1).E: The discovery of 10 cubic yards or more of impacted material resulting from a current or historic Spill or Release. Discovery and reporting will not be contingent upon confirmation samples demonstrating exceedance of Table 915-1 standards.
- Estimated Volume of Impacted Solids (cu. yd.): _____ 100
- No Rule 912.b.(1).F: The discovery of impacted Waters of the State, including Groundwater. Discovery and reporting will not be contingent upon confirmation samples demonstrating exceedance of Table 915-1 standards. The presence of free product or hydrocarbon sheen on Groundwater or surface water is reportable. The presence of contaminated soil in contact with Groundwater or surface water is reportable. Check all that apply:
- ☐ The presence of free product or hydrocarbon sheen Surface Water
- ☐ The presence of free product or hydrocarbon sheen on Groundwater
- ☐ The presence of contaminated soil in contact with Groundwater
- ☐ The presence of contaminated soil in contact with Surface water

No	Rule 912.b.(1).G: A suspected or actual Spill or Release of any volume where the volume cannot be immediately determined, including a spill or release of any volume that daylights from the subsurface.
No	Rule 912.b.(1).H: Spill or Release resulting in vaporized hydrocarbon mists that leave the Oil and Gas Location or Off-Location Flowline right of way from an Oil and Gas Location and impacts or threatens to impact off-location property. <input type="checkbox"/> Areas offsite of Oil & Gas Location <input type="checkbox"/> Off-Location Flowline right of way
No	Rule 912.b.(1).I: A Release of natural gas that results in an accumulation of soil gas or gas seeps.
No	Rule 912.b.(1).J: A Release that results in natural gas in Groundwater.

CORRECTIVE ACTIONS

#1	Supplemental Report Date: 06/13/2023
Root Cause of Spill/Release: Unknown (Historical)	
Other (specify) _____	
Type of Equipment at Point of Spill/Release: Other	
If "Other" selected above, specify or describe here:	
Unknown. Historical spill. Above impacted area was flowline, tanks, and separation equipment.	
Describe Incident & Root Cause (include specific equipment and point of failure)	
Unknown. Historical spill.	
Describe measures taken to prevent the problem(s) from reoccurring:	
N/A Historical spill	
Volume of Soil Excavated (cubic yards): 10185	
Disposition of Excavated Soil (attach documentation) <input checked="" type="checkbox"/> Offsite Disposal Onsite Treatment	
<input type="checkbox"/> Other (specify) _____	
Volume of Impacted Ground Water Removed (bbls): 0	
Volume of Impacted Surface Water Removed (bbls): 0	

REQUEST FOR CLOSURE

Spill/Release Reports should be closed when impacts have been remediated or when further investigation and corrective actions will take place under an approved Form 27.

- Basis for Closure:
- ☐ Corrective Actions Completed (documentation attached, check all that apply)
 - ☐ Horizontal and Vertical extents of impacts have been delineated.
 - ☐ Documentation of compliance with Table 915-1 is attached.
 - ☐ All E&P Waste has been properly treated or disposed.
 - ☒ Work proceeding under an approved Form 27 (Rule 912.c).
- Form 27 Remediation Project No: 20110
- ☐ SUSPECTED Spill/Release did not occur or was below Rule 912.a.(5) reporting thresholds.

OPERATOR COMMENTS:

Please see the attachments for documentation of all COAs and CAs from initial report and Warning Letter completed. In addition Verdad conducted an environmental awareness meeting for staff, including all contractor supervisors, to discuss spill reporting requirements and emphasizing historical spill reporting requirements.

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: 06/27/2023 Email: mcugnetti@verdadresources.com

COA Type

Description

0 COA	

Attachment List

Att Doc Num

Name

403431770	FORM 19 SUBMITTED
403431799	DISPOSAL MANIFEST
403431826	ANALYTICAL RESULTS
403431827	ANALYTICAL RESULTS
403431918	OTHER
403431919	CORRESPONDENCE
403431920	CORRESPONDENCE
403446083	OTHER

Total Attach: 8 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)