

State of Colorado
Energy & Carbon Management Commission



1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number:
403739410

Date Received:
04/02/2024

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

ECMC 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>

ECMC INSPECTION SUMMARY:

FIR Document Number: 696306107
Inspection Date: 03/18/2024 FIR Submit Date: 03/18/2024 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: 434893

Location Name: Castor Number: 4-36-9-59 County: _____
PAD

Qtrqr: NENE Sec: 36 Twp: 9N Range: 59W Meridian: 6

Latitude: 40.713510 Longitude: -103.918960

FACILITY - API Number: 05-123- -00 Facility ID: 434893

Facility Name: Castor Number: 4-36-9-59
PAD

Qtrqr: NENE Sec: 36 Twp: 9N Range: 59W Meridian: 6

Latitude: 40.713510 Longitude: -103.918960

CORRECTIVE ACTIONS:

1 CA# 193231

Corrective Action: Install sign to comply with Rule 605.h. Date: 04/19/2024

Response: CA COMPLETED Date of Completion: 03/28/2024

Operator Comment: All faded or missing labels replaced. See attached photo documentation of corrective actions.

ECMC Decision: Approved

ECMC Representative: Approved

2 CA# 193232

Corrective Action: Comply with Rule 606

Date: 04/01/2024

Response: CA COMPLETED

Date of Completion: 03/28/2024

Operator Comment: Belt debris removed. See attached photo documentation of corrective action.

ECMC Decision: Approved

ECMC Representative: Approved

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: 4/2/2024 11:44:18 AM

ATTACHMENT LIST

View Attachments in Imaged Documents on ECMC website (<http://ecmcweblink.state.co.us/>) - Search by Document Number.

<u>Document Number</u>	<u>Description</u>
403739410	FIR RESOLUTION SUBMITTED
403739425	Corrective Action Photo Documentation

Total Attach: 2 Files