

# ECMC Form 18

(Populated from Complaint Intake Tool)

Note: Please provide as much detail related to location and issue as possible. Without enough detail, the ECMC will not be able to process or investigate the complaint and, therefore, the ECMC will have no choice but to discard the complaint.

File a written complaint via e-mail instead. -- [Email ECMC Complaint](#)

## Document Number

403818399

## Unique ID

403818399

## COMPLAINT INFORMATION



### Date of Complaint

06/10/2024

**\* Indicates a Required Field**

### Type of Complaint \*

Select all that apply

- ☐ Air Quality/ Odor
- ☐ Ground Water/ Water Well
- ☒ Noise
- ☐ Royalties Payment/ Missing Production
- ☐ Traffic
- ☐ Notice Letters

- ☐ Dust
- ☐ Lighting
- ☐ Property Damage
- ☐ Spills/ Soil Contamination
- ☐ Waste Management/ Dumping
- ☒ Other

### Incident County \*

Weld County

### Connection to Incident \*

Select all that apply

- ☒ Land Owner
- ☒ Nearby Resident
- ☐ Other
- ☒ Royalty Owner
- ☒ Observed Incident

### Will you provide your personal information for this complaint? \*

☒ Yes ☐ No

### Your First Name \*

Shane

### Your Last Name \*

Hall

### Your Address \*

120 County Rd. 39

### Your City \*

Brighton

### Your State

CO

**Your Zip Code\***

Maximum of 10 digits. Example 80202

80603

**Email Address\***

Enter a valid email address in this field to receive a confirmation e-mail and copy of your Complaint form.

cattleman70@gmail.com

**Your Phone Number**

Used only to follow up. Please enter phone number in this format: (Example) 123-456-7890

720-935-2851

**Alternate Phone Number**

Used only to follow up. Please enter phone number in this format: (Example) 123-456-7890

**DESCRIPTION OF COMPLAINT**

(Please be as specific as possible)

**Location of Concern\***

Please provide as much detail as possible. It is important to narrow down the location.

Weld County Rd 2 site for Verdad Resources

I-76 County Rd 2

**Detailed description of the issue(s)\* (?)**

Please provide as much detail as possible. It is important to narrow down the issue(s).

Constant backup alarm the past 2 nights lasting more than 5 hours total out of the night.

**Is this an ongoing issue(s)?\***

☒ Yes ☐ No

**Do you know who the oil and gas company is?\***

☒ Yes ☐ No

**Oil and Gas Company Name**

Verdad Resources

**Did you contact the oil and gas company?\***

☒ Yes ☐ No

**Oil and Gas Company Contact Name**

Jeff Berghorn

**Well or Facility Name**

Please provide if known

Road 2

**Well or Facility Number**

Please provide if known

**ADDITIONAL INFORMATION****Are there supporting documents you wish to upload?\***

☐ Yes ☒ No

**What is your preferred method for the ECMC to communicate with you throughout the investigation?**

Select all that apply

☒ Phone ☐ E-mail ☐ US Mail

## ECMC - COMPLAINT TEAM

### Complaint Taken By \*

Adamczyk, Megan

### Method Received \*

☒ Online Tool

☐ Letter

☐ Phone

☐ Paper Form

☐ Email

☐ Other

## Assign Complaint Type

Add as many complaints as submitted from the complaint intake form by clicking on the Add Complaint button. You will be required to enter all required fields for each complaint type.

### Complaint Type \*

Noise

### Is this an ECMC or other State Agency issue? \*

(Routed Outside ECMC)

☒ ECMC ☐ BLM ☐ CDPHE ☐ Law Enforcement ☐ LGD ☐ Other

### Location ID or Unknown \*

☒ Location ID ☐ Unknown

### Location ID \*

474767

### Location Name

County Line

### County

WELD

### Facility Location QtrQtr

SWSE

### Section

31

### Township

1N

### Range

65W

### Latitude

40.00145

### Longitude

-104.70634

### Meridian

6

### Operator Number

10651

### Operator Name

Taylor Onley

### Company Name

VERDAD RESOURCES LLC

### Select Staff \*

Gomez, Jason

### Laserfiche Username

This field is only used for the demo of this form. The user listed here is the user that will be assigned the task. Use this username to log into forms and view the assigned task(s).

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Add as many complaints as submitted from the complaint intake form by clicking on the Add Complaint button. You will be required to enter all required fields for each complaint type.

### Complaint Type \*

\_other

Is this an ECMC or other State Agency issue? \*

(Routed Outside ECMC)

☒ ECMC ☐ BLM ☐ CDPHE ☐ Law Enforcement ☐ LGD ☐ Other

Location ID or Unknown \*

☒ Location ID ☐ Unknown

Location ID \*

474767

Location Name

County Line

County

WELD

Facility Location QtrQtr

SWSE

Section

31

Township

1N

Range

65W

Latitude

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Longitude

-104.70634

Meridian

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