

**FORM
INSP**Rev
X/20**State of Colorado
Oil and Gas Conservation Commission**1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Inspection Date:

08/18/2021

Submitted Date:

08/18/2021

Document Number:

695104774

FIELD INSPECTION FORMLoc ID 306795 Inspector Name: Beardslee, Tom On-Site Inspection ☐ 2A Doc Num: _____**Operator Information:**

OGCC Operator Number: 10749

Name of Operator: SIMCOE LLC

Address: THREE ALLEN CENTER, 333 CLAY ST SUITE 3900

City: HOUSTON State: TX Zip: 77002

Status Summary:

- ☒ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED

Findings:

7 Number of Comments

0 Number of Corrective Actions

☐ Corrective Action Response Requested**ANY CORRECTIVE ACTION(S) FROM
PREVIOUS INSPECTIONS THAT HAVE NOT
BEEN ADDRESSED ARE STILL APPLICABLE****Contact Information:**

Contact Name	Phone	Email	Comment
, General		sjninspections@ikavenergy.com	All Inspections
Labowskie, Steve		steve.labowskie@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
266039	WELL	PR	02/06/2003	GW	067-08778	ROBERTSON 19-01 2	PR

General Comment:

LocationOverall Good: ☒

Emergency Contact Number:

Comment:

Corrective Action:

Date: _____

Overall Good: ☒**Spills:**

Type	Area	Volume

In Containment: No

Comment:

☐ Multiple Spills and Releases?**Fencing/:**

Type TANK BATTERY

Comment:

Corrective Action:

Date:

Type WELLHEAD

Comment:

Corrective Action:

Date:

Equipment:

corrective date

Type: Bird Protectors

1

Comment:

Corrective Action:

Date:

Type: Horizontal Heated Separator

1

Comment:

Corrective Action:

Date:

Type: Gas Meter Run

1

Comment: CAL. REPORT INDICATES GAS METER HAS BEEN CALIBRATED WITHIN THE LAST YEAR.

Corrective Action:

Date:

Type: Deadman # & Marked

4

Comment:

Corrective Action:

Date:

Type: Prime Mover

1

Comment: electric generator

Corrective Action:

Date:

Type: Plunger Lift

1

Comment: electric

Corrective Action:

Date:

Type: Ancillary equipment

1

Comment:	telemetry equipment and electric drive equipment		Date:	
Corrective Action:			Date:	
Type: Bradenhead	# 1			
Comment:	is plumbed to surface		Date:	
Corrective Action:			Date:	

Tanks and Berms:

Contents	#	Capacity	Type	Tank ID	SE GPS
PRODUCED WATER	1	OTHER	PBV STEEL		37.086719,-107.546690
Comment:					
Corrective Action:					Date:

Paint

Condition	Adequate	
Other (Content)		
Other (Capacity)	95 BBL	
Other (Type)		

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance
Metal	Adequate	Walls Sufficient	Base Insufficient	Adequate
Comment:				
Corrective Action:				Date:

Venting:

Yes/No	NO	
Comment:		
Corrective Action:		Date:

Flaring:

Type	
Comment:	
Corrective Action:	Date:

Inspected Facilities				
Facility ID: 266039	Type: WELL	API Number: 067-08778	Status: PR	Insp. Status: PR
Producing Well				
Comment:				
Corrective Action:				Date:

Reclamation - Storm Water - Pit**Storm Water:**

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Ditches	Pass	Culverts	Pass			
Gravel	Pass	Gravel	Pass			
Compaction	Pass	Compaction	Pass			

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**COGCC Comments**

Comment	User	Date
THIS IS A FOLLOW UP TO INSP. DOC #688800668. CORRECTIVE ACTIONS HAVE BEEN ADDRESSED SEE PHOTO #3 & #4.	beardslt	08/18/2021

Attached DocumentsYou can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
695104775	INSP. PHOTOS	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5512544