

**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 FORM

Loc 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:

Empty text area for general comments.

Location

Overall 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 Documents

You 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