

State of Colorado  
Oil and Gas Conservation Commission

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



Document Number:  
402862038

Date Received:  
11/04/2021

FIR RESOLUTION FORM

Overall Status:

CA Summary:

2 of 2 CAs from the FIR responded to on this Form

2 CA Completed  
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 10749

Name of Operator: SIMCOE LLC

Address: 1199 MAIN AVE SUITE 101

City: DURANGO State: CO Zip: 81301

Contact Name and Telephone:

Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

Additional Operator Contact:

Contact Name

Phone

Email

General

sjninspections@ikavenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693903711

Inspection Date: 10/06/2021

FIR Submit Date: 10/07/2021

FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: SIMCOE LLC

Company Number: 10749

Address: THREE ALLEN CENTER, 333 CLAY ST SUITE 3900

City: HOUSTON State: TX Zip: 77002

LOCATION - Location ID: 326095

Location Name: THOMAS JACQUEZ GU B Number: 15NESE County: LA PLATA  
PLA-6-N33N10W

Qtrqr: NESE Sec: 15 Twp: 33N Range: 10W Meridian: N

Latitude: 37.100938 Longitude: -107.916367

FACILITY - API Number: 05-067-00 Facility ID: 215859

Facility Name: THOMAS JACQUEZ B Number: 1

Qtrqr: NESE Sec: 15 Twp: 33N Range: 10W Meridian: N

Latitude: 37.100938 Longitude: -107.916367

CORRECTIVE ACTIONS:

1 CA# 156569

Corrective Action: -Spot seeding needs to be applied in portions of the project area with poor revegetation by 11/7/2021.

Date: 11/07/2021

Response: CA COMPLETED

Date of Completion: 11/03/2021

Operator Comment: reseeded area of concern - see photos

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

**2** CA# 156570

Corrective Action: -Stormwater and erosion controls need to be installed to prevent erosion and sediment discharge within the project area by 11/7/2021.

Date: 11/07/2021

Response: CA COMPLETED

Date of Completion: 11/03/2021

Operator  
Comment: installed waddles on affected areas - see photos

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

**OPERATOR COMMENT AND SUBMITTAL**

Comment: CA completed

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Karin Rhodes

Signed: \_\_\_\_\_

Title: admin asst

Date: 11/4/2021 9:06:37 AM

**ATTACHMENT LIST**

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

**Document Number      Description**

402862052	work completed at site
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Total Attach: 1 Files