

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:  
402873222

Date Received:  
11/17/2021

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

1 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: 693903709

Inspection Date: 09/20/2021

FIR Submit Date: 10/05/2021

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: 306796

Location Name: SOUTHERN UTE GAS UNIT Number: 7SWSW County: LA PLATA  
P-N33N7W

Qtrqr: SWS Sec: 7 Twp: 33N Range: 7W Meridian: N  
W

Latitude: 37.114568 Longitude: -107.655677

FACILITY - API Number: 05-067- -00 Facility ID: 266640

Facility Name: SOUTHERN UTE P Number: 2

Qtrqr: SWS Sec: 7 Twp: 33N Range: 7W Meridian: N  
W

Latitude: 37.114568 Longitude: -107.655677

CORRECTIVE ACTIONS:

1 CA# 156454

Corrective Action: -Stormwater controls need to be installed to stabilize erosion along the access roadway by 11/5/2021. Stormwater controls need to be selected, sized, installed, and maintained according to good engineering practices such as those described by CDOT in their erosion control manuals.

Date: 11/05/2021

Response: CA COMPLETED

Date of Completion: 10/29/2021

Cleaned out cattle guard, reestablished ditch, and repaired erosion along the road. see photos attached

Operator  
Comment:

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: 11/17/2021 12:25:09 PM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

402873230	work completed
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Total Attach: 1 Files