

State of Colorado  
Oil and Gas Conservation Commission

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Document Number:  
402909254

Date Received:  
12/27/2021

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 6 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		<a href="mailto:sninspections@ikavenergy.com">sninspections@ikavenergy.com</a>
Fischer, Alex		<a href="mailto:alex.fischer@state.co.us">alex.fischer@state.co.us</a>
Beebe, Sabre	970-769-9523	<a href="mailto:sabre.beebe@ikavenergy.com">sabre.beebe@ikavenergy.com</a>
Heil, John		<a href="mailto:john.heil@state.co.us">john.heil@state.co.us</a>

COGCC INSPECTION SUMMARY:

FIR Document Number: 688800031

Inspection Date: 07/20/2021

FIR Submit Date: 07/22/2021

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: 419311

Location Name: PERINO WATER TRANSFER Number: \_\_\_\_\_ County: \_\_\_\_\_

Qtrqtr: NWSE Sec: 13 Twp: 32N Range: 6W Meridian: N

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

FACILITY - API Number: 05-007- -00 Facility ID: 480299

Facility Name: Perino Water Transfer Number: \_\_\_\_\_

Qtrqtr: NWSE Sec: 13 Twp: 32N Range: 6W Meridian: N

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

CORRECTIVE ACTIONS:

2 CA# 154011

Corrective Action: Control and contain spills/releases and clean up per Rule 912.a.

Date: 08/23/2021

Response: CA COMPLETED

Date of Completion: 12/09/2021

Spill was contained and controlled. Release area remediated with gypsum application on 12/8/2021 during

Operator Comment: complete decommissioning of the transfer station and reclamation activities please refer to form 27 filed with COGCC

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

COGCC Representative: \_\_\_\_\_

**OPERATOR COMMENT AND SUBMITTAL**

Comment: This facility was completely decommissioned and reclaimed. During reclamation impacted soils were treated with gypsum applications. Form 27 filed for decom and reclamation.

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

Print Name: Sabre Beebe

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

Title: Field Env. Coordinator

Date: 12/27/2021 10:53:55 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

<u>Document Number</u>	<u>Description</u>

Total Attach: 0 Files