

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:

403181102

Date Received:

09/28/2022

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

Labowskie, Steve

steve.labowskie@state.co.us

General

sjninspections@ikavenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 702500416

Inspection Date: 09/08/2022

FIR Submit Date: 09/08/2022

FIR Status: _____

Inspected Operator Information:

Company Name: SIMCOE LLC

Company Number: 10749

Address: 1199 MAIN AVE SUITE 101

City: DURANGO State: CO Zip: 81301

LOCATION - Location ID: 326167

Location Name: THOMAS JACQUEZ GAS
UNIT E-N33N10W

Number: 14NESE

County: LA PLATA

Qtrqr: NESE Sec: 14 Twp: 33N Range: 10W Meridian: N

Latitude: 37.103177 Longitude: -107.898299

FACILITY - API Number: 05-067-

-00

Facility ID: 215984

Facility Name: THOMAS JACQUEZ E

Number: 1

Qtrqr: NESE Sec: 14 Twp: 33N Range: 10W Meridian: N

Latitude: 37.103177 Longitude: -107.898299

CORRECTIVE ACTIONS:

1 CA# 164433

Corrective Action: All unused equipment must be returned to use or stored off location per rule 606.

Date: 09/17/2022

Response: CA COMPLETED

Date of Completion: 09/14/2022

Operator
Comment:

Reset berm crossover stairs. Removed debris from steps and around location.

COGCC Decision: _____

COGCC
Representative:

2 CA# 164434

Corrective Action: Control weeds per rule 606.

Date: 09/17/2022

Ensure within 25' of wellhead, tanks, and separators are free of combustible material per rule 610.k

Response: CA COMPLETED

Date of Completion: 09/14/2022

Operator
Comment:

Removed weeds from tank berm and inside compressor sound walls.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: CA Completed. See attached completion photos.

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

Print Name: Gabby Riley

Signed: _____

Title: Permitting Specialist I

Date: 9/28/2022 2:57:08 PM

ATTACHMENT LIST

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

Document Number **Description**

403181109	Thomas Jacquez E 1; CA Completion Photos
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Total Attach: 1 Files