

**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:

11/03/2022

Submitted Date:

11/03/2022

Document Number:

702500714**FIELD INSPECTION FORM**Loc ID 325762 Inspector Name: Klink, Alex On-Site Inspection ☐ 2A Doc Num: \_\_\_\_\_**Operator Information:**OGCC Operator Number: 10749Name of Operator: SIMCOE LLCAddress: 1199 MAIN AVE SUITE 101City: DURANGO State: CO Zip: 81301**Status Summary:**

- ☐ THIS IS A FOLLOW UP INSPECTION
- ☐ FOLLOW UP INSPECTION REQUIRED
- ☒ NO FOLLOW UP INSPECTION REQUIRED

**Findings:**9 Number of Comments0 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
Labowskie, Steve		steve.labowskie@state.co.us	
, General		sjninspections@ikavenergy.com	All SW field inspections

**Inspected Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
215346	WELL	PR	09/15/2021	GW	067-06951	ALICE LORENZ 1	PR

**General Comment:**

Inspector Alex Klink on site to conduct routine inspection. Any corrective actions from previous inspections are still applicable. See link at end of report for inspection photos.

**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 PUMP JACK

Comment: Pump jack motor enclosed on 3 sides by sound panel.

Corrective Action:

Date:

**Equipment:**

corrective date

Type: Prime Mover

# 1

Comment: Gas powered.

Corrective Action:

Date:

Type: Other

# 1

Comment: Separation equipment cabinet.

Corrective Action:

Date:

Type: Flow Line

# 4

Comment: 3" and 2" line from wellhead to separator cabinet, 2" produced water line from separator cabinet to produced water off location, 1" gas supply line from wellhead to gas powered prime mover.

Corrective Action:

Date:

Type: Ancillary equipment

# 1

Comment: Telemetry

Corrective Action:

Date:

Type: Gas Meter Run

# 1

Comment: Gas meter calibration is within the last year.

Corrective Action:

Date:

Type: Deadman # &amp; Marked

# 5

Comment:

Corrective Action:

Date:

Type: Bradenhead

# 1

Comment: Bradenhead is accessible.

Corrective Action:

Date:

Type: Pump Jack

# 1



<b>Inspected Facilities</b>				
Facility ID: 215346	Type: WELL	API Number: 067-06951	Status: PR	Insp. Status: PR
<b>Producing Well</b>				
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
		Gravel	Pass			
		Compaction	Pass			
Compaction	Pass					
Gravel	Pass					

Comment: Corrective Action: Date: **Pits:** ☒ NO SURFACE INDICATION OF PIT**Attached Documents**You can go to COGCC Images (<https://cogcc.state.co.us/weblink/>) and search by document number:

Document Num	Description	URL
702500715	Photo doc	<a href="http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5905376">http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=5905376</a>