

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:
403442941

Date Received:
06/22/2023

FIR RESOLUTION FORM

Overall Status: CAC

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

Labowskie, Steve

steve.labowskie@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 712700219

Inspection Date: 05/25/2023

FIR Submit Date: 05/26/2023

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: 306848

Location Name: PAYNE,EVELYN GAS UNIT A- N35N6W Number: 32NWSW County: LA PLATA

Qtrqtr: NWS Sec: 32 Twp: 35N Range: 6W Meridian: N
W

Latitude: 37.254841 Longitude: -107.555990

FACILITY - API Number: 05-067-00 Facility ID: 269649

Facility Name: EVELYN PAYNE A Number: 2

Qtrqtr: NWS Sec: 32 Twp: 35N Range: 6W Meridian: N
W

Latitude: 37.254841 Longitude: -107.555990

CORRECTIVE ACTIONS:

1 ☒ CA# 171512

Corrective Action: Install sign to comply with Rule 605.g.

Date: 07/26/2023

Response: CA COMPLETED

Date of Completion: 06/15/2023

Operator
Comment:

Installed produced water tank sign.

COGCC Decision: Approved

COGCC
Representative:

2  CA# 171513

Corrective Action: Comply with Rule 1002.f.(2).d. Conduct maintenance on equipment, cleanup stained material and review self inspection processes.

Date: 05/31/2023

Response: CA COMPLETED

Date of Completion: 06/22/2023

Operator
Comment:

Cleaned impacted material.

COGCC Decision: Approved

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: 6/22/2023 3:21:14 PM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
403442941	FIR RESOLUTION SUBMITTED
403442944	Evelyn Payne A2; CA Completion Photos

Total Attach: 2 Files