

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:
403446792

Date Received:
06/27/2023

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

SIMCOE

sjninspections@ikavenergy.co

COGCC INSPECTION SUMMARY:

FIR Document Number: 690204125

Inspection Date: 04/18/2023

FIR Submit Date: 04/25/2023

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: 312083

Location Name: Tiffany Number: 5 County: _____

Qtrqtr: SWSE Sec: 20 Twp: 33N Range: 6W Meridian: N

Latitude: 37.085058 Longitude: -107.519749

FACILITY - API Number: 05-067-00 Facility ID: 312083

Facility Name: Tiffany Number: 5

Qtrqtr: SWSE Sec: 20 Twp: 33N Range: 6W Meridian: N

Latitude: 37.085058 Longitude: -107.519749

CORRECTIVE ACTIONS:

1 CA# 170059

Corrective Action: To comply with Rule 1002.b. Operator needs to identify the additional topsoil required per the amount shown in the topsoil protection plan and and previous corrective action.

Date: 10/07/2022

Response: CA COMPLETED

Date of Completion: 05/24/2023

Operator Comment: Topsoil area of disturbance measures approx. 3.51 acres, average of 6-inches of topsoil removed at the start of the wellsite construction. Areas are stabilized with hydro-mulched seed.

COGCC Decision: _____

COGCC
Representative:

2 CA# 170060

Corrective Action: Install or repair required BMPs per Rule 1002.f.(2)

Date: 05/12/2023

Response: CA COMPLETED

Date of Completion: 06/05/2023

Operator
Comment: BMPs have been addressed. See attached completion photos.

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: 6/27/2023 1:08:58 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>
403446808	Tiffany 5-3 & 5-2; CA completion photos
403446811	Tiffany 5-3 & 5-2; CA completion photos

Total Attach: 2 Files