

State of Colorado
Energy & Carbon Management Commission



1120 Lincoln Street, Suite 801, Denver, Colorado 80203
Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number:
403698208

Date Received:
02/26/2024

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 3 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

sjninspections@ikavenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 714000398

Inspection Date: 02/07/2024

FIR Submit Date: 02/08/2024

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: 326335

Location Name: GIG L SHAPIRO GU "A"-M34N7W Number: 21NWSE County: _____

Qtrqtr: NWSE Sec: 21 Twp: 34N Range: 7W Meridian: M

Latitude: 37.173488 Longitude: -107.609911

FACILITY - API Number: 05-067-00

Facility ID: 326335

Facility Name: GIG L SHAPIRO GU "A"-M34N7W Number: 21NWSE

Qtrqtr: NWSE Sec: 21 Twp: 34N Range: 7W Meridian: M

Latitude: 37.173488 Longitude: -107.609911

CORRECTIVE ACTIONS:

1 CA# 191879

Corrective Action: Maintain equipment and clean up impacted material and dispose per Rule 1002.

Date: 02/13/2024

Response: CA COMPLETED

Date of Completion: 02/22/2024

Operator Comment: Impacted material removed.

COGCC Decision: Approved pending re-inspection

COGCC Representative: Approved pending re-inspection of this FIR resolution acknowledges the document was received. It is not an acknowledgement that the corrective action has been passed. A field inspection will be conducted at a future date to evaluate compliance with ECMC standards.

OPERATOR COMMENT AND SUBMITTAL

Comment: Impacted Material CA Completed. See attached completion photo.

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: 2/26/2024 11:03:28 AM

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>
403698208	FIR RESOLUTION SUBMITTED
403698219	Gigi Shapiro A1; Stain CA Completed

Total Attach: 2 Files