

State of Colorado Energy & Carbon Management Commission



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Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number:
403720385

Date Received:
03/14/2024

FIR RESOLUTION FORM

Overall Status:

CA Summary:

3 of 3 CAs from the FIR responded to on this Form

3 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: 714000410

Inspection Date: 02/13/2024

FIR Submit Date: 02/14/2024

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: 326245

Location Name: BLACK-M34N8W Number: 22NENW County: _____

Qtrqtr: NENW Sec: 22 Twp: 34N Range: 8W Meridian: M

Latitude: 37.181408 Longitude: -107.706074

FACILITY - API Number: 05-067-00 Facility ID: 326245

Facility Name: BLACK-M34N8W Number: 22NENW

Qtrqtr: NENW Sec: 22 Twp: 34N Range: 8W Meridian: M

Latitude: 37.181408 Longitude: -107.706074

CORRECTIVE ACTIONS:

1 CA# 192039

Corrective Action: Maintain equipment and clean up impacted material and dispose per Rule 906 and 1002.

Date: 02/19/2024

Response: CA COMPLETED

Date of Completion: 03/09/2024

Operator Comment: Impacted surface materials cleaned and removed.

COGCC Decision: _____

COGCC
Representative:

2 CA# 192040

Corrective Action: Comply with rule 606.

Date: 02/29/2024

Response: CA COMPLETED

Date of Completion: 03/09/2024

Operator
Comment: Fencing reinstalled on location.

COGCC Decision:

COGCC
Representative:

3 CA# 192041

Corrective Action: Comply with Rule 1002f. Install or repair storm water BMPs.

Date: 02/16/2024

Response: CA COMPLETED

Date of Completion: 03/09/2024

Operator
Comment: BMPs repaired and installed.

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: 3/14/2024 5:23:14 PM

ATTACHMENT LIST

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

Document Number	Description
403720388	Black 21-22 1; CA completion photos

Total Attach: 1 Files