

State of Colorado  
Energy & Carbon Management Commission



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Document Number:  
403734604

Date Received:  
03/28/2024

## 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

General

[sninspections@ikavenergy.com](mailto:sninspections@ikavenergy.com)

### COGCC INSPECTION SUMMARY:

FIR Document Number: 714000409

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: 306878

Location Name: MCMANUS GAS UNIT 33-22-M34N8W Number: 22SWSW County: \_\_\_\_\_

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

Latitude: 37.172418 Longitude: -107.709754

#### FACILITY - API Number: 05-067-00 Facility ID: 306878

Facility Name: MCMANUS GAS UNIT 33-22-M34N8W Number: 22SWSW

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

Latitude: 37.172418 Longitude: -107.709754

### CORRECTIVE ACTIONS:

1 CA# 192037

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: 03/25/2024

Operator  
Comment:

Cleaned up well head. Repaired secondary muffler and removed stained soil.

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

**2** CA# 192038

Corrective Action: Comply with rule 606.

Date: \_\_\_\_\_

Response: CA COMPLETED

Date of Completion: 03/25/2024

Operator  
Comment:

Removed trash.

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: 3/28/2024 10:50:23 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>
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403734610	McManus 33-22 2; CA completion photos
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Total Attach: 1 Files