

**FORM
INSP**

Rev
X/20

**State of Colorado
Oil and Gas Conservation Commission**

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



Inspection Date:

08/26/2024

Submitted Date:

09/04/2024

Document Number:

715200817

FIELD INSPECTION FORM

Loc ID 333401 Inspector Name: Welsh, Brian On-Site Inspection 2A Doc Num: _____

Operator Information:

ECMC Operator Number: 10749
Name of Operator: SIMCOE LLC
Address: 1199 MAIN AVE SUITE 101
City: DURANGO State: CO Zip: 81301

Status Summary:

- THIS IS A FOLLOW UP INSPECTION
- FOLLOW UP INSPECTION REQUIRED
- NO FOLLOW UP INSPECTION REQUIRED

Findings:

6 Number of Comments
1 Number of Corrective Actions
 Corrective Action Response Requested

ANY CORRECTIVE ACTION(S) FROM PREVIOUS INSPECTIONS THAT HAVE NOT BEEN ADDRESSED ARE STILL APPLICABLE

Contact Information:

Contact Name	Phone	Email	Comment
, General	970-749-4139	sjninspections@ikavenergy.com	All SW Inspections
Labowskie, Steve		steve.labowskie@state.co.us	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
215007	WELL	PR	01/12/1983	CBM	067-06612	HANSTEDT 07U-01 1	PR

General Comment:

[SE Compliance Specialist Brian Welsh conducted a routine field inspection of the wellhead.](#)
[Associated equipment for the well is listed on Hanstedt 07U-01 3 inspection](#)

Location			
Lease Road:			
Type	Access		
comment:	Gravel road off of CR 222 through scrap yard		
Corrective Action:		Date:	
Overall Good: <input checked="" type="checkbox"/>			
Signs/Marker:			
Type	WELLHEAD		
Comment:	Lease sign by gate at entrance		
Corrective Action:		Date:	
Emergency Contact Number:			
Comment:	<input style="width: 100%;" type="text"/>		
Corrective Action:	<input style="width: 100%;" type="text"/>		Date: _____
Overall Good: <input checked="" type="checkbox"/>			
Spills:			
Type	Area	Volume	
In Containment: No			
Comment:	<input style="width: 100%;" type="text"/>		
<input type="checkbox"/> Multiple Spills and Releases?			
Fencing/:			
Type	PUMP JACK		
Comment:	Metal panels around unit and wellhead. Metal cage around gearbox		
Corrective Action:		Date:	
Venting:			
Yes/No			
Comment:			
Corrective Action:		Date:	
Flaring:			
Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 215007 Type: WELL API Number: 067-06612 Status: PR Insp. Status: PR

Producing Well

Comment: Well is PR at time of inspection

Corrective Action:

Date:

BradenHead

Date of Last Brhd Test: 05/05/2023 Annual Brhd Completed? No

Last Brhd Test Results Initial Surf Csg Pressure: 4 Fluid Type: _____

End Surf Csg Pressure: 0

Comment:

09/26/2024

Corrective Action:

Make bradenhead monthly monitoring reports available to COGCC per Rule 419.b.(5)

Date:

The subreport 'InspWellFlowline' could not be found at the specified location \\10.14.12

Reclamation - Storm Water - Pit

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Compaction	Pass	Compaction	Pass			
Gravel	Pass	Gravel	Pass			

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT