

State of Colorado
Energy & Carbon Management Commission1120 Lincoln Street, Suite 801, Denver, Colorado 80203
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FOR ECMC USE ONLY

Document Number:

403878254

Date Received:

08/06/2024

SOURCE OF PRODUCED WATER FOR DISPOSAL

Per Rule 325.c.(5), this form shall be submitted for any new disposal facility and for any change in source of produced water for an existing disposal facility.

OPERATOR INFORMATION

ECMC 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: Kris Lee

Phone: (303) 884-4229 Fax: ()

Email: krislee@skybeam.com

DISPOSAL FACILITY INFORMATION

UIC Facility ID: 159077

Operator's Disposal Facility Name: SITTON WATER DISPOSAL #2

Operator's Disposal Facility Number:

Location: QtrQtr: SWNW Sec: 15 Twp: 34N Range: 7W Meridian: N

County: LA PLATA

SUBMITTED ITEM SUMMARY TOTALS:

Submitted: 1 Deleted: 1 Added: 0

SOURCE OF PRODUCED WATER

Add Source	API Number: 05-067-10003-00	Well Name & No: STATE MZ 2
<input type="checkbox"/>	Operator Name: SIMCOE LLC	Operator No: 10749
Delete Source	Location: QtrQtr: LOT 4 Section: 7 Township: 34N Range: 6W Meridian: M	
<input checked="" type="checkbox"/>	Producing Formation: FRLD	Analysis Attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Transported to disposal site via <input checked="" type="checkbox"/> Pipeline <input type="checkbox"/> Truck <input type="checkbox"/> Both	TDS: _____ mg/L

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Kris Lee

Signed: _____

Title: Regulatory Consultant

Date: 08/06/2024

ECMC Approved: 

Date: 12/16/2024

CONDITIONS OF APPROVAL, IF ANY LIST**COA Type****Description**

0 COA

ATTACHMENT LIST**Att Doc Num****Name**

403878254

FORM 26 SUBMITTED

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)