

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:
404092325

Date Received:
02/13/2025

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

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: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

SIMCOE

sjninspections@ikavenergy.co

ECMC INSPECTION SUMMARY:

FIR Document Number: 714001416

Inspection Date: 10/28/2024

FIR Submit Date: 10/31/2024

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: 325823

Location Name: SPANISH FORK GAS UNIT B-N33N7W Number: 34NWSE County: _____

Qtrqr: NWSE Sec: 34 Twp: 33N Range: 7W Meridian: N

Latitude: 37.057141 Longitude: -107.592179

FACILITY - API Number: 05-067-00 Facility ID: 325823

Facility Name: SPANISH FORK GAS UNIT B-N33N7W Number: 34NWSE

Qtrqr: NWSE Sec: 34 Twp: 33N Range: 7W Meridian: N

Latitude: 37.057141 Longitude: -107.592179

CORRECTIVE ACTIONS:

1 CA# 200197

Corrective Action: Maintain equipment and clean up small spill and dispose per Rule 906 and 1002.

Date: 11/05/2024

Response: CA COMPLETED

Date of Completion: 02/12/2025

Operator Comment: Secondary muffler relocated and concrete scrubbed.

ECMC Decision: _____

ECMC
Representative:

2 CA# 200198

Corrective Action: Comply with rule 606, remove and properly dispose of weedy debris.

Date: 11/07/2024

Response: CA COMPLETED

Date of Completion: 02/12/2025

Operator
Comment:

Weeds removed.

ECMC Decision: _____

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective actions completed. See attachment for photos.

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

Print Name: Grace Bryson

Signed: _____

Title: permitting specialist

Date: 2/13/2025 10:27:12 AM

ATTACHMENT LIST

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

<u>Document Number</u>	<u>Description</u>
404092331	Spanish Fork B1 completion photos

Total Attach: 1 Files