

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:
404175098

Date Received:
04/22/2025

FIR RESOLUTION FORM

Overall Status:

CA Summary:

1 of 4 CAs from the FIR responded to on this Form

1 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

General

sjninspections@ikavenergy.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 714001993

Inspection Date: 03/24/2025

FIR Submit Date: 03/25/2025

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: 326109

Location Name: ELDRIDGE-N33N10W Number: 31NWNW County: _____

Qtrqtr: NWN Sec: 31 Twp: 33N Range: 10W Meridian: N
W

Latitude: 37.065818 Longitude: -107.980881

FACILITY - API Number: 05-067-00 Facility ID: 326109

Facility Name: ELDRIDGE-N33N10W Number: 31NWNW

Qtrqtr: NWN Sec: 31 Twp: 33N Range: 10W Meridian: N
W

Latitude: 37.065818 Longitude: -107.980881

CORRECTIVE ACTIONS:

3 CA# 203676

Corrective Action: Manage (i.e. mow) weedy debris to encourage establishment of desirable vegetation and prevent debris dispersal.

Date: 05/15/2025

Conduct revegetation within portions of the interim reclamation area with bare soils and sparse vegetative cover by 5/15/2025.

Response: CA COMPLETED

Date of Completion: 04/22/2025

Reseeding completed.

Operator _____
Comment: _____

ECMC Decision: _____

ECMC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Corrective actions for interim vegetation 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: Lisa Paulek _____ Signed: _____

Title: permitting specialist _____ Date: 4/22/2025 4:03:37 PM _____

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>
404175098	FIR RESOLUTION SUBMITTED
404175106	Completion photos for Eldridge 31-01 1

Total Attach: 2 Files