

**FORM
INSP**

Rev
X/20

**State of Colorado
Energy and Carbon Management Commission**

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



Inspection Date:

09/18/2025

Submitted Date:

09/18/2025

Document Number:

719000666

FIELD INSPECTION FORM

Loc ID 311993 Inspector Name: GARCIA, CHARLES On-Site Inspection 2A Doc Num: _____

Status Summary:

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

Operator Information:

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

Findings:

- 14 Number of Comments
- 0 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 |
|------------------|-------|-------------------------------|---------------------------------|
| Labowskie, Steve | | steve.labowskie@state.co.us | |
| , General | | sjninspections@ikavenergy.com | All Inspections |

Inspected Facilities:

| Facility ID | Type | Status | Status Date | Well Class | API Num | Facility Name | Insp Status |
|-------------|------|--------|-------------|------------|-----------|----------------|-------------|
| 273355 | WELL | PR | 05/16/2007 | CBM | 067-08962 | POWELL 22-26 2 | PR |
| 292467 | WELL | PR | 01/01/2022 | CBM | 067-09400 | POWELL 22-26 4 | PR |

General Comment:

[Inspection Report Summary](#)
On 09/18/25 I Inspector Charles Garcia conducted an on-site inspection.
Location: POWELL 22-6 #2, 22-6 #4
Operator: Simcoe LLC
API#: 067-08692, API# 067-09400
County: LaPlata

Location

Overall Good:

| | | | |
|----------------------|----------------------------|--|-------|
| Signs/Marker: | | | |
| Type | OTHER | | |
| Comment: | LOCATION SIGN AT ENTERANCE | | |
| Corrective Action: | | | Date: |
| Type | TANK LABELS/PLACARDS | | |
| Comment: | PRODUCED WATER TANKS | | |
| Corrective Action: | | | Date: |

| | | | |
|---------------------------|--|--|-------|
| Emergency Contact Number: | | | |
| Comment: | Contact # 970-247-6916 Emergency #911 | | |
| Corrective Action: | | | Date: |

Overall Good:

| | | | |
|----------------|------|--------|--|
| Spills: | | | |
| Type | Area | Volume | |

In Containment: No

Comment:

Multiple Spills and Releases?

| | | | |
|--------------------|-----------------------------------|--|-------|
| Fencing/: | | | |
| Type | WELLHEAD | | |
| Comment: | CATTLE PANELS | | |
| Corrective Action: | | | Date: |
| Type | OTHER | | |
| Comment: | PRODUCED WATER TANK CATTLE PANELS | | |
| Corrective Action: | | | Date: |
| Type | SEPARATOR | | |
| Comment: | ATTLE PANELS | | |
| Corrective Action: | | | Date: |
| Type | PUMP JACK | | |
| Comment: | CATTLE PANELS | | |
| Corrective Action: | | | Date: |
| Type | OTHER | | |
| Comment: | METER HOUSECATTLE PANELS | | |
| Corrective Action: | | | Date: |

| | | | |
|---------------------------------|-----|--|-----------------|
| Equipment: | | | corrective date |
| Type: Vertical Heated Separator | # 2 | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Gas Meter Run | # 2 | | |

| | | | |
|---------------------------|---|--|-------|
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Prime Mover | # 2 | | |
| Comment: | GAS | | |
| Corrective Action: | | | Date: |
| Type: Flow Line | # 2 | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Pump Jack | # 2 | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Ancillary equipment | # 5 | | |
| Comment: | TELEMETRY EQUIPMENT LUBE OIL CONTAINERS FOR PRIME MOVERS WITH SPILL PREVENTION | | |
| Corrective Action: | | | Date: |
| Type: Bird Protectors | # 1 | | |
| Comment: | | | |
| Corrective Action: | | | Date: |
| Type: Other | # 1 | | |
| Comment: | METER HOUSE CALIBRATION IN COMPLIANCE | | |
| Corrective Action: | | | Date: |
| Type: Other | # 2 | | |
| Comment: | WELLHEADS | | |
| Corrective Action: | | | Date: |
| Type: Bradenhead | # 2 | | |
| Comment: | | | |
| Corrective Action: | | | Date: |

Tanks and Berms:

| Contents | # | Capacity | Type | Tank ID | SE GPS |
|--------------------|---|----------|-----------|---------|-----------------------|
| PRODUCED WATER | 1 | OTHER | PBV STEEL | | 37.162000,-107.695000 |
| Comment: | | | | | |
| Corrective Action: | | | | | Date: |

Paint

| | | |
|------------------|----------|--|
| Condition | Adequate | |
| Other (Content) | | |
| Other (Capacity) | | |
| Other (Type) | | |

Berms

| Type | Capacity | Permeability (Wall) | Permeability (Base) | Maintenance |
|-------|----------|---------------------|---------------------|-------------|
| Metal | Adequate | Walls Sufficient | Base Sufficient | Adequate |

| | | |
|--------------------|--|-------|
| Comment: | | |
| Corrective Action: | | Date: |

Venting:

| | | | |
|--------------------|----|-------|--|
| Yes/No | NO | | |
| Comment: | | | |
| Corrective Action: | | Date: | |

Flaring:

| | | |
|--------------------|--|-------|
| Type | | |
| Comment: | | |
| Corrective Action: | | Date: |

Inspected Facilities

Facility ID: 273355 Type: WELL API Number: 067-08962 Status: PR Insp. Status: PR

Producing Well

| | | |
|--------------------|--|---|
| Comment: | | |
| Corrective Action: | | Date: |

BradenHead

Date of Last Brhd Test: 09/04/2024 Annual Brhd Completed? Yes

Last Brhd Test Results Initial Surf Csg Pressure: 0 Fluid Type: _____

End Surf Csg Pressure: 0

Comment:

Corrective Action: Date:

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

Facility ID: 292467 Type: WELL API Number: 067-09400 Status: PR Insp. Status: PR

Producing Well

| | | |
|--------------------|--|---|
| Comment: | | |
| Corrective Action: | | Date: |

BradenHead

Date of Last Brhd Test: 09/04/2024 Annual Brhd Completed? Yes

Last Brhd Test Results Initial Surf Csg Pressure: 6 Fluid Type: _____

End Surf Csg Pressure: 0

Comment:

Corrective Action: Date:

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

Reclamation - Storm Water - Pit

Interim Reclamation:

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: _____

Comment: _____

1002 SITE PREPARATION AND STABILIZATION

1002a. FENCING _____

Comment _____

Corrective Action _____

Date _____

1002b. SOIL REMOVAL AND SEGREGATION _____

Comment _____

Corrective Action _____

Date _____

1002c. PROTECTION OF SOILS _____

Comment _____

Corrective Action _____

Date _____

1002E. SURFACE DISTURBANCE MINIMIZATION _____

Comment _____

Corrective Action _____

Date _____

1003a. Waste and Debris removed? _____

Comment _____

Corrective Action _____

Date _____

Unused or unneeded equipment onsite? _____

Comment _____

Corrective Action _____

Date _____

Pit, cellars, rat holes and other bores closed? _____

Comment _____

Corrective Action _____

Date _____

Guy line anchors marked? _____

Comment _____

Corrective Action _____

Date _____

1003b. Area no longer in use? _____ Production areas stabilized ? _____
 1003c. Compacted areas have been cross ripped? _____
 1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____
 Cuttings management: _____
 1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? _____
 Production areas have been stabilized? _____ Segregated soils have been replaced? _____

RESTORATION AND REVEGETATION

Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003e. INTERIM VEGETATION TRANSECT
 TRANSECT RESULTS OF DISTURBED AREA% _____
 TRANSECT RESULTS OF REFERENCE AREA% _____
 TOTAL % OF DESIRABLE VEGETATION COVER _____
 VEGETATIVE COVER _____

1003 f. Weeds Noxious weeds? _____
 Comment
 Corrective Action Date _____

Overall Interim Reclamation

Final Reclamation/ Abandoned Location:

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: _____

Reminder: _____

Comment:

Well plugged _____ Pit mouse/rat holes, cellars backfilled _____

Debris removed _____ No disturbance /Location never built _____

Access Roads Regraded _____ Contoured _____ Culverts removed _____

Gravel removed _____

Location and associated production facilities reclaimed _____ Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____ Cropland: perennial forage _____

Weeds present _____ Subsidence _____

1004.d. FINAL VEGETATION TRANSECT
 TRANSECT RESULTS OF DISTURBED AREA% _____
 TRANSECT RESULTS OF REFERENCE AREA% _____
 TOTAL % OF DESIRABLE VEGETATION COVER _____
 VEGETATIVE COVER _____

Comment:

Corrective Action: Date _____

Overall Final Reclamation _____ Well Release on Active Location Multi-Well Location

Storm Water:

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

Comment:

Corrective Action:

Date: _____

Pits: NO SURFACE INDICATION OF PIT

Attached Documents

You can go to ECMC Images (<https://ecmc.state.co.us/weblink/>) and search by document number:

| Document Num | Description | URL |
|--------------|-------------------|---|
| 719000670 | location pictures | http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7244139 |