

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:
404427623

Date Received:
11/07/2025

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

Labowskie, Steve

steve.labowskie@state.co.us

.General

sjninspections@ikavenergy.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 719000749

Inspection Date: 10/21/2025

FIR Submit Date: 10/22/2025

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: 325972

Location Name: DAVIES GAS UNIT A PLA-6- N33N10W Number: 13NENW County: LA PLATA

Qtrqr: NENW Sec: 13 Twp: 33N Range: 10W Meridian: N

Latitude: 37.108402 Longitude: -107.888199

FACILITY - API Number: 05-067-00 Facility ID: 215660

Facility Name: DAVIES A Number: 1

Qtrqr: NENW Sec: 13 Twp: 33N Range: 10W Meridian: N

Latitude: 37.108402 Longitude: -107.888199

CORRECTIVE ACTIONS:

1 CA# 208836

Corrective Action: INSTALL CORRECT SIGNAGE PER RULE 605

Date: 10/28/2025

Response: CA COMPLETED

Date of Completion: 11/07/2025

Operator Comment: Signage replaced.

ECMC Decision: _____

ECMC
Representative:

2 CA# 208837

Corrective Action: INSTALL CORRECT SIGNAGE PER RULE 605

Date: 10/28/2025

Response: CA COMPLETED

Date of Completion: 11/07/2025

Operator
Comment: Signage replaced.

ECMC Decision: _____

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: CA complete. See attached 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 II

Date: 11/7/2025 10:32:28 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>
404427623	FIR RESOLUTION SUBMITTED
404427639	Davies A1, CA Photos

Total Attach: 2 Files