

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:
404520288

Date Received:
01/27/2026

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
MACH EH&S		ehsinspections@machnr.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 719000973
Inspection Date: 11/19/2025 FIR Submit Date: 11/19/2025 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: 325764

Location Name: PICCOLI RANCHES-M34N9W Number: 26NESE County: LA PLATA
Qtrqtr: NESE Sec: 26 Twp: 34N Range: 9W Meridian: M
Latitude: 37.161087 Longitude: -107.790100

FACILITY - API Number: 05-067-00 Facility ID: 215349

Facility Name: PICCOLI RANCHES Number: 1
Qtrqtr: NESE Sec: 26 Twp: 34N Range: 9W Meridian: M
Latitude: 37.161087 Longitude: -107.790100

CORRECTIVE ACTIONS:

1 CA# 209531

Corrective Action: File Form 27 and follow up with SW EPS Jason Kosola about required sampling Date: 12/19/2025

Response: CA COMPLETED Date of Completion: 01/27/2026

Operator Comment: Per Jason Kosola Form 27 and sampling not needed

ECMC Decision:

ECMC
Representative:

2 CA# 209532

Corrective Action: Stormwater management Erosion Control Install or repair required BMPs per Rule 1002.f.(2)C

Date: 12/03/2025

Response: CA COMPLETED

Date of Completion: 01/27/2026

Operator
Comment:

Erosion corrected

ECMC Decision:

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: All corrective actions have been addressed.

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

Print Name: Matthew Baca

Signed: _____

Title: Regulatory/Compliance

Date: 1/27/2026 10:59:35 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>
404520330	Like in Kind Replacement
404520331	Erosion Correction
404520335	Erosion Correction
404520345	Confirmation no Form 27 Required

Total Attach: 4 Files