

**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:

05/27/2026

Submitted Date:

05/28/2026

Document Number:

719002084

FIELD INSPECTION FORM

Loc ID 333590 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:

- 10 Number of Comments
- 1 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	
Beasley, Nolan		nolan.beasley@state.co.us	
		ehsinspections@machnr.com	

Inspected Facilities:

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status
215777	WELL	SI	05/01/2025	DSPW	067-07382	WALLACE GULCH DISPOSAL 1	SI

General Comment:

Inspection Report Summary
On 5/28/26 | Inspector Charles Garcia conducted an ON SITE 5 YEAR UIC MIT Location: WALLACE GULCH DISPOSAL 1 Operator: Simcoe LLC API#: 067-07382 County: LaPlata THE FIR is only for the injection well and MIT.

Location			
Overall Good: <input checked="" type="checkbox"/>			
Signs/Marker:			
Type	OTHER		
Comment:	WELL SIGN ON WELL HOUSE DAMAGED SIMCO STICKER NOT LEGIBLE SEE LOCATION PICTURES		
Corrective Action:	Install sign or correct sign per rule 605		Date: 05/30/2026
Emergency Contact Number:			
Comment:	970-247-07867 911 EMERGENCY		
Corrective Action:			Date:
Overall Good: <input checked="" type="checkbox"/>			
Spills:			
Type	Area	Volume	
In Containment: No			
Comment:			
<input type="checkbox"/> Multiple Spills and Releases?			
Fencing/:			
Type	WELLHEAD		
Comment:	Wellhead inside housing		
Corrective Action:			Date:
Type	LOCATION		
Comment:	Security fence		
Corrective Action:			Date:
Equipment:			
			corrective date
Type: Prime Mover	# 1		
Comment:	Pump inside housing		
Corrective Action:			Date:
Type: Flow Line	# 1		
Comment:			
Corrective Action:			Date:
Type: Bradenhead	# 1		
Comment:			
Corrective Action:			Date:
Type: Other	# 1		
Comment:	WELLHEAD		
Corrective Action:			Date:
Type: Other	# 1		
Comment:	WELL HOUSE		
Corrective Action:			Date:
Venting:			

Yes/No			
Comment:			
Corrective Action:		Date:	

Flaring:

Type			
Comment:			
Corrective Action:		Date:	

Inspected Facilities

Facility ID: 215777 Type: WELL API Number: 067-07382 Status: SI Insp. Status: SI

Underground Injection Control

UIC Violation: _____ Maximum Injection Pressure: _____

UIC Routine

Inj./Tube: Pressure or inches of Hg _____ Previous Test Pressure _____ MPP _____
 (e.g. 30 psig or -30" Hg) Inj Zone: MVRD
 TC: Pressure or inches of Hg _____ Previous Test Pressure _____ Last MIT: 07/15/2021
 Brhd: Pressure or inches of Hg _____ Previous Test Pressure _____ AnnMTReq: _____

Comment: _____

Corrective Action: _____ Date: _____

Method of Injection: _____

Test Type: 5 Year Tbg psi: 201 Csg psi: 0 BH psi: 0

Insp. Status: Pass

Comment: ARRIVED TO LOCATION AT 7:30 AM CREW RIGGED IN FOR MIT TEST.TUBING DEPTH 4271 FT PACKER AT 4250 FT PERFORATED INTERVAL 4300 FT 4536FT. LOADED HOLE 20 GAL H2O STARTED TEST AT 8:35 AM STARTING PRESSURE 610 PSI
 5 MIN 605 PSI
 10 MIN 605 PSI
 15 MIN 600 PSI

Corrective Action: _____ Date: _____

ECMC Comments

Comment	User	Date
THE FIR is only for the injection well AND MIT TEST	garciacr1	05/28/2026

Attached Documents

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

Document Num	Description	URL
404676510	INSPECTION SUBMITTED	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7562360
719002085	LOCATION PICTURES	http://ogccweblink.state.co.us/DownloadDocumentPDF.aspx?DocumentId=7562354