

State of Colorado
Oil and Gas Conservation Commission

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



Document Number:
402794574

Date Received:
08/27/2021

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

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

1 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

OGCC 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

Beebe, Sabre

sbeebe@ikavenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693903419

Inspection Date: 07/13/2021

FIR Submit Date: 07/15/2021

FIR Status: _____

Inspected Operator Information:

Company Name: BP AMERICA PRODUCTION COMPANY

Company Number: 10000

Address: 1199 MAIN AVENUE SUITE 101

City: DURANGO State: CO Zip: 81301

LOCATION - Location ID: 307019

Location Name: ELDRIDGE 25-02 Number: 2 County: LA PLATA

Qtrqtr: NESW Sec: 25 Twp: 33N Range: 11W Meridian: N

Latitude: 37.074310 Longitude: -107.995120

FACILITY - API Number: 05-067-00 Facility ID: 296263

Facility Name: Eldridge 25-02 Number: 2

Qtrqtr: NESW Sec: 25 Twp: 33N Range: 11W Meridian: N

Latitude: 37.074310 Longitude: -107.995120

CORRECTIVE ACTIONS:

1 CA# 153801

Corrective Action:
-Control weeds, remove and properly dispose of flowering musk thistles by 7/25/2021. Corrective action timing is reduced to prevent seed dispersal of noxious weeds.
-Remove and properly dispose of debris by 7/31/2021.
-Assess revegetation and conduct spot seeding in areas with poor vegetative cover by 11/1/2021.

Date: 07/25/2021

Response: CA COMPLETED

Date of Completion: 08/06/2021

Work performed entailed weed removal and treatment followed by interseeding of bare areas for achievement of required vegetation for release. see attached.

Operator Comment: _____

COGCC Decision: _____

COGCC Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Work performed entailed weed removal and treatment followed by interseeding of bare areas for achievement of required vegetation for release. see attached.

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

Print Name: Sabre Beebe Signed: _____

Title: Specialist Date: 8/27/2021 10:25:27 AM

ATTACHMENT LIST

View Attachments in Imaged Documents on COGCC website (<http://ogccweblink.state.co.us/>) - Search by Document Number.

<u>Document Number</u>	<u>Description</u>
402794578	work completion photos

Total Attach: 1 Files