

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:  
402853126

Date Received:  
10/26/2021

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

General

sjninspections@ikavenergy.com

COGCC INSPECTION SUMMARY:

FIR Document Number: 693903705

Inspection Date: 09/20/2021

FIR Submit Date: 10/05/2021

FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: SIMCOE LLC

Company Number: 10749

Address: THREE ALLEN CENTER, 333 CLAY ST SUITE 3900

City: HOUSTON State: TX Zip: 77002

LOCATION - Location ID: 306814

Location Name: LUCERO GAS UNIT-N33N7W Number: 7NWSE County: LA PLATA

Qtrqtr: NWSE Sec: 7 Twp: 33N Range: 7W Meridian: N

Latitude: 37.117523 Longitude: -107.647000

FACILITY - API Number: 05-067-00 Facility ID: 268265

Facility Name: LUCERO Number: 2

Qtrqtr: NWSE Sec: 7 Twp: 33N Range: 7W Meridian: N

Latitude: 37.117523 Longitude: -107.647000

CORRECTIVE ACTIONS:

1 CA# 156453

Corrective Action: Control weeds within the interim reclamation area and along the flowline right of way. Corrective action is back-dated to original corrective action date 6/1/2020 as weed infestation is not controlled. Revegetation will be needed within the southern interim reclamation area after weeds are controlled.

Date: 06/01/2020

Response: CA COMPLETED

Date of Completion: 10/15/2021

Operator Comment: work completed at site 10/15/2021

COGCC Decision: \_\_\_\_\_

COGCC  
Representative:

**OPERATOR COMMENT AND SUBMITTAL**

Comment: CA Completed

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

Print Name: Karin Rhodes

Signed: \_\_\_\_\_

Title: admin asst

Date: 10/26/2021 10:28:46 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

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Total Attach: 1 Files