

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:

403002840

Date Received:

04/04/2022

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

sabre.beebe@ikavenergy.com

sjninspections@ikavenergy.com

Fischer, Alex

alex.fischer@state.co.us

COGCC INSPECTION SUMMARY:

FIR Document Number: 688801114

Inspection Date: 03/16/2022

FIR Submit Date: 03/17/2022

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: 325233

Location Name: PAN AM FEE GAS UNIT A-N33N8W Number: 22NENW County: _____

Qtrqtr: NENW Sec: 22 Twp: 33N Range: 8W Meridian: N

Latitude: _____ Longitude: _____

FACILITY - API Number: 05-067-00 Facility ID: 481775

Facility Name: Pan American Fee C 2 water line Number: _____

Qtrqtr: NENW Sec: 22 Twp: 33N Range: 8W Meridian: N

Latitude: _____ Longitude: _____

CORRECTIVE ACTIONS:

1 ☒ CA# 160220

Corrective Action: Control and contain spills/releases and clean up per Rule 912.a.

Date: 04/18/2022

Response: CA COMPLETED

Date of Completion: 03/15/2022

Release was discovered and controlled on 3/15/2022. On 3/23/2022 impacted soil removal was performed and confirmation sampling conducted. Additional information will be submitted via supplemental form 19.

Operator _____
Comment: _____

COGCC Decision: Approved pending re-inspection

COGCC
Representative: _____

OPERATOR COMMENT AND SUBMITTAL

Comment: Release controlled, clean up performed with sampling.

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: Environmental Coordinator

Date: 4/4/2022 9:09:36 AM

ATTACHMENT LIST

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

Document Number **Description**

403002840	FIR RESOLUTION SUBMITTED
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Total Attach: 1 Files