

State of Colorado Energy & Carbon Management Commission



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Phone: (303) 894-2100 Fax: (303) 894-2109

Document Number:
403744433

Date Received:
04/05/2024

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

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
<u>.General</u>		<u>sjninspections@ikavenergy.com</u>

COGCC INSPECTION SUMMARY:

FIR Document Number: 714000429
Inspection Date: 02/13/2024 FIR Submit Date: 02/15/2024 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: 306883

Location Name: DICKENS GAS UNIT 44-14-M34N8W Number: 14SENE County: _____
Qtrqr: SENE Sec: 14 Twp: 34N Range: 8W Meridian: M
Latitude: 37.194194 Longitude: -107.681178

FACILITY - API Number: 05-067-00 Facility ID: 306883

Facility Name: DICKENS GAS UNIT 44-14-M34N8W Number: 14SENE
Qtrqr: SENE Sec: 14 Twp: 34N Range: 8W Meridian: M
Latitude: 37.194194 Longitude: -107.681178

CORRECTIVE ACTIONS:

1 CA# 192067

Corrective Action: Maintain equipment and clean up impacted material and dispose per Rule 906 and 1002. Date: _____

Response: CA COMPLETED Date of Completion: 04/02/2024

Operator Comment: Impacted surface material cleaned up and removed.

COGCC Decision: _____

COGCC
Representative:

2 CA# 192068

Corrective Action: Comply with rule 1003.

Date: 02/17/2024

Response: CA COMPLETED

Date of Completion: 04/02/2024

Operator
Comment:

Weeds removed.

COGCC Decision: _____

COGCC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment: CA completed. See attached completion photos.

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

Print Name: Gabby Riley

Signed: _____

Title: Permitting Specialist I

Date: 4/5/2024 10:04:02 AM

ATTACHMENT LIST

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

Document Number **Description**

403744443	Dickens 44-14 2; CA completion photos
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Total Attach: 1 Files