

State of Colorado
Energy & Carbon Management Commission



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

Document Number:
403745093

Date Received:
04/05/2024

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

ECMC 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

ECMC INSPECTION SUMMARY:

FIR Document Number: 714000436

Inspection Date: 02/16/2024

FIR Submit Date: 02/20/2024

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: 325888

Location Name: DRY CREEK FEDERAL GU-N34N8W Number: 12SESE County: _____

Qtrqr: SESE Sec: 12 Twp: 34N Range: 8W Meridian: N

Latitude: 37.225007 Longitude: -107.691304

FACILITY - API Number: 05-067-00 Facility ID: 325888

Facility Name: DRY CREEK FEDERAL GU-N34N8W Number: 12SESE

Qtrqr: SESE Sec: 12 Twp: 34N Range: 8W Meridian: N

Latitude: 37.225007 Longitude: -107.691304

CORRECTIVE ACTIONS:

1 CA# 192229

Corrective Action: Comply with Rule 1002f. Install or repair storm water BMPs.

Date: 02/22/2024

Response: CA COMPLETED

Date of Completion: 04/04/2024

Operator Comment: Erosion control installed.

ECMC Decision: Approved pending re-inspection

ECMC Representative: Approved pending re-inspection of this FIR resolution acknowledges the document was received. It is not an acknowledgement that the corrective action has been passed. A field inspection will be conducted at a future date to evaluate compliance with ECMC standards.

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 3:05:51 PM

ATTACHMENT LIST

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

| <u>Document Number</u> | <u>Description</u> |
|------------------------|---|
| 403745093 | FIR RESOLUTION SUBMITTED |
| 403745097 | Dry Creek Federal 1; CA completion photos |

Total Attach: 2 Files