

FORM

12

Rev
02/20

State of Colorado

Energy & Carbon Management Commission

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



FOR ECMC USE ONLY

Document Number:

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Receive Date:

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GAS FACILITY REGISTRATION/CHANGE OF OPERATOR

Per Rule 313B.a and Rule 313B.b, a Form 12 is required to register a new Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility. Financial Assurance is required per Rule 711. Per Rule 313B.c, a Form 12 is required for an annual report of changes to a Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility. Per Rule 313B.d, a Form 12 is required to report the transfer of ownership of a Gas Gathering System, Gas Compressor Station, Gas Processing Plant, or Underground Gas Storage Facility.

Purpose of Form: (Select one)

New Registration

Annual Report of Changes

Change of Operator

Name of Operator: CAERUS PICEANCE LLC

ECMC Operator Number: 10456 Suff:

One Call Participation (One box must be checked.)

In checking this box, the Submitting Operator hereby confirms Tier One membership in the Utility Notification Center of Colorado (CO 811) and participation in Colorado's One Call notification system. [Rule 1102.n.]

In checking this box, the Operator hereby certifies it has no underground facilities and is exempt from CO 811 membership. [Rule 1102.n. (2)]

Address: 1001 17TH STREET #1600

City: DENVER State: CO Zip: 80202

Contact Name: Kristine Mize-Spansky
First Name Last Name

Phone: 720 8806368 Email: kmizespansky@qb-energy.com

NON-Submitting Operator Information:

ECMC Number of Non-Submitting: 10844 Name of Non-Submitting: QB ENERGY OPERATING LLC

Non-Submitting Operator is: Buying Operator Contact Name: Kristine Mize-Spansky

Title: Integrity Management/GIS Non-Submitting Operator Contact Email: kmizespansky@qb-energy.com

Name of Buying Operator: QB ENERGY OPERATING LLC	Name of Selling Operator: CAERUS PICEANCE LLC
Buying Operator ECMC Number: 10844	Selling Operator ECMC Number: 10456
Print Name: Kristine Mize-Spansky	Print Name: Kristine Mize-Spansky
Signature:	Signature:
Title: Integrity Management/GIS	Title: Integrity Management/GIS
Date: 8/16/2024	Date: 8/16/2024

Operator Comments:

Please let me know if you have any questions.

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

SUMMITTED BY:

Signed: _____ Print Name: Kristine Mize-Spansky
 Title: Integrity Management/GIS Email: kmizespansky@qb-energy.com Date: 2/13/2025

ECMC Approved:

Date:

FACILITY ID: 475248

CONDITIONS OF APPROVAL, IF ANY LIST

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

Signature:

ATTACHMENT LIST

<u>Att Doc Num</u>	<u>Name</u>
404093480	RATIFICATION DOCUMENT

Total Attach: 1 Files