

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:

404220456

Date Received:

05/28/2025

FIR RESOLUTION FORM

Overall Status:

CA Summary:

2 of 3 CAs from the FIR responded to on this Form

2 CA Completed
0 Factual Review Request

OPERATOR INFORMATION

ECMC Operator Number: 10844

Name of Operator: QB ENERGY OPERATING LLC

Address: 1001 17TH STREET SUITE 1600

City: DENVER State: CO Zip: 80202

Contact Name and Telephone:

Name: _____

Phone: () Fax: ()

Email: _____

Additional Operator Contact:

Contact Name

Phone

Email

QB Energy

ecmc.inspections@qb-energy.com

Longworth, Mike

mike.longworth@state.co.us

Heil, John

john.heil@state.co.us

ECMC INSPECTION SUMMARY:

FIR Document Number: 708906516

Inspection Date: 05/14/2025

FIR Submit Date: 05/19/2025

FIR Status: _____

Inspected Operator Information:

Company Name: QB ENERGY OPERATING LLC

Company Number: 10844

Address: 1001 17TH STREET SUITE 1600

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 334612

Location Name: BENZEL-67S93W

Number: 1SESE

County: _____

Qtrqtr: SESE

Sec: 1

Twp: 7S

Range: 93W

Meridian: 6

Latitude: 39.468510

Longitude: -107.718770

FACILITY - API Number: 05-045-

-00

Facility ID: 334612

Facility Name: BENZEL-67S93W

Number: 1SESE

Qtrqtr: SESE

Sec: 1

Twp: 7S

Range: 93W

Meridian: 6

Latitude: 39.468510

Longitude: -107.718770

CORRECTIVE ACTIONS:

1 CA# 204911

Corrective Action: The liner will be sufficiently impervious so that any discharge from a primary containment system will not escape containment before cleanup occurs.

Date: 06/08/2025

Response: CA COMPLETED

Date of Completion: 05/28/2025

Operator Comment: Liner repaired.

ECMC Decision: _____

ECMC
Representative:

2 CA# 204912

Corrective Action: Comply with CECMC 600 & 1100 series rules

Date: 05/26/2025

Response: CA COMPLETED

Date of Completion: 05/28/2025

Operator
Comment: Locks and tags installed on valves and lines.

ECMC Decision: _____

ECMC
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment:

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

Print Name: Justin Johnson

Signed: _____

Title: Compliance

Date: 5/28/2025 2:11:21 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>
404220459	Liner repair
404220462	Locked valves and tags installed.

Total Attach: 2 Files