

State of Colorado Energy & Carbon Management Commission



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

Document Number:
404262750

Date Received:
07/01/2025

FIR RESOLUTION FORM

Overall Status:

CA Summary:
3 of 4 CAs from the FIR responded to on this Form
3 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 |
|--------------------------|-------|---------------------------------------|
| <u>Kellerby, Shaun</u> | | <u>shaun.kellerby@state.co.us</u> |
| <u>Toews, Wesley</u> | | <u>wtoews@blm.gov</u> |
| <u>Haverkamp, Curtis</u> | | <u>curtis.haverkamp@state.co.us</u> |
| <u>Katz, Aaron</u> | | <u>aaron.katz@state.co.us</u> |
| <u>QB Energy</u> | | <u>ecmc.inspections@qb-energy.com</u> |

ECMC INSPECTION SUMMARY:

FIR Document Number: 708906650
Inspection Date: 06/03/2025 FIR Submit Date: 06/04/2025 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: 334738

Location Name: FEDERAL-67S94W Number: 10NENE County: _____
Qtrqtr: NENE Sec: 10 Twp: 7S Range: 94W Meridian: 6
Latitude: 39.458890 Longitude: -107.866800

FACILITY - API Number: 05-045-00 Facility ID: 334738

Facility Name: FEDERAL-67S94W Number: 10NENE
Qtrqtr: NENE Sec: 10 Twp: 7S Range: 94W Meridian: 6
Latitude: 39.458890 Longitude: -107.866800

CORRECTIVE ACTIONS:

1 CA# 205292
Corrective Action: Comply with CECMC wildlife rules Date: 06/11/2025
Response: CA COMPLETED Date of Completion: 06/25/2025

Repaired flowline insulation.

Operator
Comment:

ECMC Decision:

ECMC
Representative:

2 CA# 205293

Corrective Action:

Date: 07/04/2025

Response: CA COMPLETED

Date of Completion: 06/25/2025

Operator
Comment:

ECMC Decision:

ECMC
Representative:

3 CA# 205294

Corrective Action:

Date: 06/11/2025

Response: CA COMPLETED

Date of Completion: 06/25/2025

Operator
Comment:

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: 7/1/2025 9:01:43 AM

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> |
|------------------------|--------------------|
| 404262755 | RESPONSE PHOTOS |
| 404262756 | RESPONSE PHOTOS |

Total Attach: 2 Files