

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:

404275651

Date Received:

07/10/2025

FIR RESOLUTION FORM

Overall Status:

CA Summary:

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

1 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
CAERUS

Phone

Email

ecmc.inspections@qb-energy.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 708302998

Inspection Date: 10/31/2024

FIR Submit Date: 10/31/2024

FIR Status: _____

Inspected Operator Information:

Company Name: CAERUS PICEANCE LLC

Company Number: 10456

Address: 1001 17TH STREET #1600

City: DENVER State: CO Zip: 80202

LOCATION - Location ID: 334405

Location Name: PARACHUTE RANCH-67S96W Number: 26SWSE County: _____

Qtrqtr: SWSE Sec: 26 Twp: 7S Range: 96W Meridian: 6

Latitude: 39.403786 Longitude: -108.075852

FACILITY - API Number: 05-045-00 Facility ID: 334405

Facility Name: PARACHUTE RANCH-67S96W Number: 26SWSE

Qtrqtr: SWSE Sec: 26 Twp: 7S Range: 96W Meridian: 6

Latitude: 39.403786 Longitude: -108.075852

CORRECTIVE ACTIONS:

3 CA# 200201

Corrective Action: 1002.f.(2): Oil and gas operators shall implement and maintain Best Management Practices (BMPs) at all oil and gas locations to control Stormwater runoff in a manner that minimizes erosion, transport of sediment offsite, and site degradation. BMPs shall be maintained until the facility is abandoned and final reclamation is achieved pursuant to Rule 1004.

Date: 11/16/2024

Response: CA COMPLETED

Date of Completion: 05/01/2025

Repaired during spring maintenance.

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: Romana Cowden Signed: _____

Title: EHS Date: 7/10/2025 3:54:40 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>
404275651	FIR RESOLUTION SUBMITTED

Total Attach: 1 Files