

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:
404375351

Date Received:
10/01/2025

FIR RESOLUTION FORM

Overall Status:

CA Summary:
2 of 5 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
<u>Heil, John</u>		<u>john.heil@state.co.us</u>
<u>Fischer, Alex</u>		<u>alex.fischer@state.co.us</u>
<u>-</u>		<u>ecmc.inspections@qb-energy.com</u>

ECMC INSPECTION SUMMARY:

FIR Document Number: 718100474
Inspection Date: 04/16/2025 FIR Submit Date: 04/17/2025 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: 413221

Location Name: 17L Number: 794 County: _____
Qtrqtr: NWS Sec: 17 Twp: 7S Range: 94W Meridian: 6
W
Latitude: 39.436121 Longitude: -107.915389

FACILITY - API Number: 05-045- -00 Facility ID: 413221

Facility Name: 17L Number: 794
Qtrqtr: NWS Sec: 17 Twp: 7S Range: 94W Meridian: 6
W
Latitude: 39.436121 Longitude: -107.915389

CORRECTIVE ACTIONS:

2 CA# 204205

Corrective Action: Comply with Rules 606.d and 906 Date: 04/24/2025
Response: CA COMPLETED Date of Completion: 09/30/2025

Removed debris from location and stockpiles.

Operator
Comment:

ECMC Decision:

ECMC
Representative:

3 CA# 204206

Corrective Action: E&P Waste not properly stored, handled, transported, treated, recycled, or disposed per Rule 905.

Date: 04/24/2025

Response: CA COMPLETED

Date of Completion: 09/30/2025

Operator
Comment:

Removed stockpiles and liner from location.

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: 10/1/2025 10:26:32 AM

ATTACHMENT LIST

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

Document Number **Description**

404375364	RESPONSE PHOTO
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Total Attach: 1 Files