

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:
404563768

Date Received:
03/03/2026

FIR RESOLUTION FORM

Overall Status:

CA Summary:
3 of 3 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
Energy_QB ecmc.inspections@qb-energy.com

ECMC INSPECTION SUMMARY:

FIR Document Number: 701104526
Inspection Date: 02/11/2026 FIR Submit Date: 02/23/2026 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: 324070

Location Name: MILLER-67S93W Number: 11SWSE County: _____
Qtrqtr: SWSE Sec: 11 Twp: 7S Range: 93W Meridian: 6
Latitude: 39.455510 Longitude: -107.739930

FACILITY - API Number: 05-045-00 Facility ID: 324070

Facility Name: MILLER-67S93W Number: 11SWSE
Qtrqtr: SWSE Sec: 11 Twp: 7S Range: 93W Meridian: 6
Latitude: 39.455510 Longitude: -107.739930

CORRECTIVE ACTIONS:

1 CA# 211110
Corrective Action: Comply with Rule 606 Date: 03/27/2026
Response: CA COMPLETED Date of Completion: 03/02/2026
Operator Comment: Removed fencing from location to comply with Rule 606.
ECMC Decision: _____

ECMC
Representative:

2 CA# 211111

Corrective Action: Install sign to comply with Rule 605.g.(2)

Date: 03/27/2026

Response: CA COMPLETED

Date of Completion: 03/02/2026

Operator
Comment: Installed new No Smoking sign.

ECMC Decision: _____

ECMC
Representative:

3 CA# 211112

Corrective Action: Maintain secondary containment devices per Rule 912.d.(1).

Date: 03/06/2026

Response: CA COMPLETED

Date of Completion: 03/02/2026

Operator
Comment: Scheduled Knowles to pull the chemical tank containment.

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: Joey Gracey

Signed: _____

Title: Compliance

Date: 3/3/2026 9:24:46 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>
404563847	Methanol Label
404563849	No Smoking Sign
404563851	Removed Fencing

Total Attach: 3 Files