

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:  
404624786

Date Received:  
04/17/2026

**FIR RESOLUTION FORM**

**Overall Status:**

CA Summary:

1 of 1 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	Phone	Email
<u>Energy_QB</u>		<u>ecmc.inspections@qb-energy.com</u>

**ECMC INSPECTION SUMMARY:**

FIR Document Number: 719500698  
Inspection Date: 11/25/2025 FIR Submit Date: 12/03/2025 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: 324225

Location Name: CEDAR BENCH-66S100W Number: 28NENW County: \_\_\_\_\_  
Qtrqtr: NENW Sec: 28 Twp: 6S Range: 100W Meridian: 6  
Latitude: 39.508675 Longitude: -108.560720

**FACILITY** - API Number: 05-045-00 Facility ID: 324225

Facility Name: CEDAR BENCH-66S100W Number: 28NENW  
Qtrqtr: NENW Sec: 28 Twp: 6S Range: 100W Meridian: 6  
Latitude: 39.508675 Longitude: -108.560720

**CORRECTIVE ACTIONS:**

**1** CA# 209724

Corrective Action: 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. Install or repair required BMPs.

Date: 12/19/2025

Response: CA COMPLETED Date of Completion: 04/15/2026

Operator Comment: Complete

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: 4/17/2026 11:27:43 AM

**ATTACHMENT LIST**

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

**Document Number**      **Description**

404624786	FIR RESOLUTION SUBMITTED
-----------	--------------------------

Total Attach: 1 Files