

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:  
404275648

Date Received:  
07/10/2025

## FIR RESOLUTION FORM

### Overall Status:

#### CA Summary:

1 of 2 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
QB		<a href="mailto:ecmc.inspections@qb-energy.com">ecmc.inspections@qb-energy.com</a>

### ECMC INSPECTION SUMMARY:

FIR Document Number: 708303040  
Inspection Date: 11/07/2024 FIR Submit Date: 11/11/2024 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: 334062

Location Name: WALLING-68S96W Number: 1NWSE County: \_\_\_\_\_  
Qtrqtr: NWSE Sec: 1 Twp: 8S Range: 96W Meridian: 6  
Latitude: 39.378789 Longitude: -108.056450

#### FACILITY - API Number: 05-045- -00 Facility ID: 334062

Facility Name: WALLING-68S96W Number: 1NWSE  
Qtrqtr: NWSE Sec: 1 Twp: 8S Range: 96W Meridian: 6  
Latitude: 39.378789 Longitude: -108.056450

### CORRECTIVE ACTIONS:

2 CA# 200384

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: 12/26/2023

Response: CA COMPLETED Date of Completion: 05/01/2025

Operator Comment: Repaired during spring maintenance.

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 3:44:31 PM \_\_\_\_\_

**ATTACHMENT LIST**

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

**Document Number**      **Description**

--	--

Total Attach: 0 Files