Facility Name: Arrowhead JT Plant

EPA Facility Identifier: 1000 0021 9006

Plan Sequence Number: 1000030019

# **Section 1. Registration Information**

#### Source Identification

Facility Name: Arrowhead JT Plant

Parent Company #1 Name: MarkWest Utica EMG, L.L.C.

Submission Type: First Time
Receipt Date: August 2012
Status: Deregistered
Deregistration Effective Date: April 2013

**Facility Identification** 

Facility ID: 1000 0021 9006

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: N/A

**Facility Location Address** 

Street 1: 74015 Flushing Waterworks Rd.

 Street 2:
 N/A

 City:
 Flushing

 State:
 OH

 ZIP:
 43977

 ZIP4:
 N/A

 County:
 Harrison

Facility Latitude and Longitude

Latitude (decimal): 40.175875 Longitude (decimal): -81.070297

Local Emergency Planning Committee and Regulations

LEPC: Harrison County LEPC

 OSHA PSM:
 Yes

 EPCRA 302:
 N/A

 CAA Title V:
 N/A

Facility Name: Arrowhead JT Plant

EPA Facility Identifier: 1000 0021 9006

Plan Sequence Number: 1000030019

#### **Process Chemicals**

Program Level: Program Level 1 process
Chemical Name: Flammable Mixture

CAS Number: 00-11-11 Flammable/Toxic: Flammable

#### Flammable Mixture Chemical Components

Chemical Name: Ethane
CAS Number: 74-84-0
Flammable/Toxic: Flammable

Chemical Name: Propane
CAS Number: 74-98-6
Flammable/Toxic: Flammable

Chemical Name: Butane
CAS Number: 106-97-8
Flammable/Toxic: Flammable

Chemical Name: Pentane
CAS Number: 109-66-0
Flammable/Toxic: Flammable

### **Process NAICS**

NAICS Code: 211112

NAICS Description: Natural Gas Liquid Extraction

## **Section 6. Accident History**

No records found.

Facility Name: Arrowhead JT Plant EPA Facility Identifier: 1000 0021 9006

Plan Sequence Number: 1000030019

## **Section 9. Emergency Response**

### Written Emergency Response (ER) Plan

Community Plan (Is facility included in written community emergency response plan?):

N/A

Facility Plan (Does facility have its own written emergency response plan?):

Yes

Response Actions (Does ER plan include specific actions to be taken in response to accidental releases of regulated substance(s)?):

Yes

Public Information (Does ER plan include procedures for informing the public and local agencies responding to accidental release?):

Yes

Healthcare (Does facility's ER plan include information on emergency health care?):

Yes

### **Local Agency**

Agency Name (Name of local agency with which the facility ER plan or response activities are coordinated):

Harrison County LEPC

Agency Phone Number (Phone number of local agency with which the facility ER plan or response activities are coordinated):

(740) 942-3922