Facility Name: ATTEBURY GRAIN INC. GROOM

EPA Facility Identifier: 1000 0011 3478 Plan Sequence Number: 9197

Section 1. Registration Information

Source Identification

Facility Name: ATTEBURY GRAIN INC. GROOM

Parent Company #1 Name: N/A

Submission Type: First Time
Receipt Date: June 1999
Status: Deregistered
Deregistration Effective Date: March 2003

Facility Identification

Facility ID: 1000 0011 3478

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: N/A

Facility Location Address

 Street 1:
 BUS HWY 40

 Street 2:
 N/A

 City:
 GROOM

 State:
 TX

 ZIP:
 79039

 ZIP4:
 N/A

 County:
 Carson

Facility Latitude and Longitude

Latitude (decimal): 35.201944 Longitude (decimal): -101.101333

Local Emergency Planning Committee and Regulations

LEPC: Carson County LEPC

 OSHA PSM:
 Yes

 EPCRA 302:
 N/A

 CAA Title V:
 N/A

Facility Name: ATTEBURY GRAIN INC. GROOM

EPA Facility Identifier: 1000 0011 3478 Plan Sequence Number: 9197

Process Chemicals

Program Level: Program Level 2 process
Chemical Name: Ammonia (anhydrous)

CAS Number: 7664-41-7 Flammable/Toxic: Toxic

Process NAICS

NAICS Code: 11119

NAICS Description: Other Grain Farming

Section 6. Accident History

Accident History ID: Accident 1

Date of Accident:July 1994Time Accident Began (HH:MM):13:30NAICS Code of Process Involved:11115

NAICS Description: Corn Farming

Release Duration: 000 Hours 01 Minutes

Release Event

Gas Release: Yes
Liquid Spill/Evaporation: N/A
Fire: N/A
Explosion: N/A
Uncontrolled/Runaway Reaction: N/A

Release Source

N/A Storage Vessel: Piping: N/A Process Vessel: N/A Transfer Hose: N/A Valve: Yes Pump: N/A Joint: N/A Other Release Source: N/A

EPA Facility Identifier: 1000 0011 3478 Plan Sequence Number: 9197

Woothor	Conditions	at tha "	Time of	Evont
vvealilei	Conditions	at the	i ii iie oi	Eveni

Wind Speed: N/A

Units: Meters/second

Direction:N/ATemperature:N/AAtmospheric Stability Class:CPrecipitation Present:N/AUnknown Weather Conditions:Yes

On-Site Impacts

Employee or Contractor Deaths:

Public Responder Deaths:

Public Deaths:

Employee or Contractor Injuries:

Public Responder Injuries:

Public Injuries:

On-Site Property Damage (\$):

Known Off-Site Impacts

Deaths: 0
Hospitalizations: 0
Public Deaths: 0
Other Medical Treatments: 0
Evacuated: 0
Sheltered-in-Place: 0
Off-Site Property Damage (\$): 0

Environmental Damage

Fish or Animal Kills:

Tree, Lawn, Shrub, or Crop Damage:

Water Contamination:

N/A

Soil Contamination:

Other Environmental Damage:

N/A

Initiating Event

Initiating Event: Human Error

EPA Facility Identifier: 1000 0011 3478 Plan Sequence Number: 9197

Contributing Factors

Equipment Failure: N/A Human Error: Yes Improper Procedures: N/A N/A Overpressurization: **Upset Condition:** N/A By-Pass Condition: N/A Maintenance Activity/Inactivity: N/A Process Design Failure: N/A Unsuitable Equipment: N/A **Unusual Weather Condition:** N/A Management Error: N/A Other Contributing Factor: N/A

Off-Site Responders Notified

Off-Site Responders Notified: No, not notified

Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment: N/A N/A Revised Maintenance: Revised Training: Yes **Revised Operating Procedures:** N/A New Process Controls: N/A New Mitigation Systems: N/A Revised Emergency Response Plan: N/A **Changed Process:** N/A Reduced Inventory: N/A N/A None: Other Changes Introduced: N/A

Chemicals in Accident History

Quantity Released (lbs): 1
Percent Weight: 0.

Chemical Name: Ammonia (anhydrous)

CAS Number: 7664-41-7 Flammable/Toxic: Toxic

EPA Facility Identifier: 1000 0011 3478 Plan Sequence Number: 9197

Section 9. Emergency Response

Written Emergency Response (ER) Plan

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

Yes

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):

Groom Vol. Fire Dept.

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

(806) 248-7929