

Section 1. Registration Information

Source Identification

Facility Name:	Bairoil OC CO2 Plant
Parent Company #1 Name:	Amplify Energy
Submission Type:	Resubmission
Receipt Date:	May 2024

Facility Identification

Facility ID:	1000 0013 6168
--------------	----------------

Dun and Bradstreet Numbers (DUNS)

Facility DUNS:	622397628
----------------	-----------

Facility Location Address

Street 1:	Highway 73; 2 miles west
Street 2:	N/A
City:	Bairoil
State:	WY
ZIP:	82322
ZIP4:	N/A
County:	Carbon

Facility Latitude and Longitude

Latitude (decimal):	42.229167
Longitude (decimal):	-107.511111

Local Emergency Planning Committee and Regulations

LEPC:	Carbon County LEPC
OSHA PSM:	Yes
EPCRA 302:	Yes
CAA Title V:	Yes

Process Chemicals

Program Level:	Program Level 3 process
Chemical Name:	Ammonia (anhydrous)
CAS Number:	7664-41-7
Flammable/Toxic:	Toxic

Program Level:	Program Level 3 process
Chemical Name:	Flammable Mixture
CAS Number:	00-11-11
Flammable/Toxic:	Flammable

Flammable Mixture Chemical Components

Chemical Name:	Methane
CAS Number:	74-82-8
Flammable/Toxic:	Flammable

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:	21112
NAICS Description:	Crude Petroleum Extraction

Section 6. Accident History

Accident History ID: Accident 1

Date of Accident:	October 2022
Time Accident Began (HH:MM):	06:50
NAICS Code of Process Involved:	21112
NAICS Description:	Crude Petroleum Extraction
Release Duration:	000 Hours 05 Minutes

Release Event

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

Release Source

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

Weather Conditions at the Time of Event

Wind Speed:	5.0
Units:	Miles/h
Direction:	SE
Temperature:	52
Atmospheric Stability Class:	A
Precipitation Present:	N/A
Unknown Weather Conditions:	N/A

On-Site Impacts

Employee or Contractor Deaths:	0
Public Responder Deaths:	0
Public Deaths:	0
Employee or Contractor Injuries:	0
Public Responder Injuries:	0
Public Injuries:	0
On-Site Property Damage (\$):	0

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:	N/A
Tree, Lawn, Shrub, or Crop Damage:	N/A
Water Contamination:	N/A
Soil Contamination:	N/A
Other Environmental Damage:	N/A

Initiating Event

Initiating Event:	Unknown
-------------------	---------

Contributing Factors

Equipment Failure:	Yes
Human Error:	N/A
Improper Procedures:	N/A
Overpressurization:	N/A
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:	Yes
Revised Maintenance:	N/A
Revised Training:	N/A
Revised Operating Procedures:	Yes
New Process Controls:	N/A
New Mitigation Systems:	N/A
Revised Emergency Response Plan:	N/A
Changed Process:	N/A
Reduced Inventory:	N/A
None:	N/A
Other Changes Introduced:	N/A

Chemicals in Accident History

Quantity Released (lbs):	1
Percent Weight:	80
Chemical Name:	Bromine
CAS Number:	7726-95-6
Flammable/Toxic:	Toxic

Accident History ID: Accident 2

Date of Accident:	April 2018
Time Accident Began (HH:MM):	12:00
NAICS Code of Process Involved:	21112
NAICS Description:	Crude Petroleum Extraction
Release Duration:	000 Hours 05 Minutes

Release Event

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

Release Source

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

Weather Conditions at the Time of Event

Wind Speed:	0.1
Units:	Miles/h
Direction:	S
Temperature:	82
Atmospheric Stability Class:	N/A
Precipitation Present:	N/A
Unknown Weather Conditions:	N/A

On-Site Impacts

Employee or Contractor Deaths:	0
Public Responder Deaths:	0
Public Deaths:	0
Employee or Contractor Injuries:	0
Public Responder Injuries:	0
Public Injuries:	0
On-Site Property Damage (\$):	0

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:	N/A
Tree, Lawn, Shrub, or Crop Damage:	N/A
Water Contamination:	N/A
Soil Contamination:	N/A
Other Environmental Damage:	N/A

Initiating Event

Initiating Event:	Human Error
-------------------	-------------

Contributing Factors

Equipment Failure:	N/A
Human Error:	N/A
Improper Procedures:	N/A
Overpressurization:	N/A
Upset Condition:	N/A
By-Pass Condition:	Yes
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:	Yes
Revised Maintenance:	Yes
Revised Training:	Yes
Revised Operating Procedures:	Yes
New Process Controls:	N/A
New Mitigation Systems:	N/A
Revised Emergency Response Plan:	N/A
Changed Process:	N/A
Reduced Inventory:	N/A
None:	N/A
Other Changes Introduced:	N/A

Chemicals in Accident History

Quantity Released (lbs):	1
Percent Weight:	5
Chemical Name:	Chlorine dioxide [Chlorine oxide (ClO2)]
CAS Number:	10049-04-4
Flammable/Toxic:	Toxic

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):

Carbon County LEPC

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

(307) 328-2750