EPA Facility Identifier: 1000 0006 4351 Plan Sequence Number: 1000100548

Section 1. Registration Information

Source Identification

Facility Name: Frontier Field Services Dagger Draw

Gas Plant

Parent Company #1 Name:

Submission Type:

Receipt Date:

Durango Midstream
Resubmission

November 2022

Facility Identification

Facility ID: 1000 0006 4351

Dun and Bradstreet Numbers (DUNS)

Facility DUNS: N/A

Facility Location Address

Street 1: 278 Pipeline Road

 Street 2:
 N/A

 City:
 Artesia

 State:
 NM

 ZIP:
 88210

 ZIP4:
 N/A

 County:
 Eddy

Facility Latitude and Longitude

Latitude (decimal): 32.713333 Longitude (decimal): -104.446667

Local Emergency Planning Committee and Regulations

LEPC: Eddy County LEPC

 OSHA PSM:
 Yes

 EPCRA 302:
 N/A

 CAA Title V:
 Yes

Facility Name: Frontier Field Services Dagger Draw Gas Plant

EPA Facility Identifier: 1000 0006 4351 Plan Sequence Number: 1000100548

Process Chemicals

Program Level: Program Level 3 process

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

Program Level: Program Level 3 process

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

Program Level: Program Level 3 process

Chemical Name:

CAS Number:

106-97-8

Flammable/Toxic:

Flammable

Program Level: Program Level 3 process

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

Process NAICS

NAICS Code: 21113

NAICS Description: Natural Gas Extraction

Section 6. Accident History

Accident History ID: Accident 1

Date of Accident:

Time Accident Began (HH:MM):

NAICS Code of Process Involved:

21113

NAICS Description:

Release Duration:

Natural Gas Extraction

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

EPA Facility Identifier: 1000 0006 4351 Plan Sequence Number: 1000100548

Release Source

Storage Vessel: N/A
Piping: N/A
Process Vessel: N/A
Transfer Hose: N/A
Valve: N/A
Pump: N/A
Joint: N/A

Other Release Source: Acid Gas Compressor

Weather Conditions at the Time of Event

Wind Speed: 10.0
Units: Miles/h
Direction: W
Temperature: 80
Atmospheric Stability Class: E
Precipitation Present: N/A
Unknown Weather Conditions: N/A

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: 20
Sheltered-in-Place: 0
Off-Site Property Damage (\$): 0

EPA Facility Identifier: 1000 0006 4351 Plan Sequence Number: 1000100548

Environmental Damage

Fish or Animal Kills:

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: Equipment Failure

Contributing Factors

Equipment Failure: Yes Human Error: N/A Improper Procedures: N/A Overpressurization: N/A **Upset Condition:** N/A N/A By-Pass Condition: 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: N/A

Changes Introduced as a Result of the Accident

Improved or Upgraded Equipment: N/A Revised Maintenance: N/A Revised Training: N/A **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 N/A Reduced Inventory: Yes Other Changes Introduced: N/A Facility Name: Frontier Field Services Dagger Draw Gas Plant

EPA Facility Identifier: 1000 0006 4351 Plan Sequence Number: 1000100548

Chemicals in Accident History

Quantity Released (lbs): 1
Percent Weight: 5.9

Chemical Name: Hydrogen sulfide
CAS Number: 7783-06-4
Flammable/Toxic: Toxic

Section 9. Emergency Response

Written Emergency Response (ER) Plan

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

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

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

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

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

Yes

Yes

Yes

Yes

Local Agency

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

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

Atoka Fire Department

(575) 746-5050