Facility Name: Stiles Gas Plant

EPA Facility Identifier: 1000 0011 1345

Plan Sequence Number: 1000008971

# **Section 1. Registration Information**

#### Source Identification

**Facility Identification** 

Facility Name: Stiles Gas Plant

Parent Company #1 Name: Davis Gas Processing

Submission Type: Resubmission
Receipt Date: June 2009
Status: Deregistered
Deregistration Effective Date: March 2010

Facility ID: 1000 0011 1345

**Dun and Bradstreet Numbers (DUNS)** 

Facility DUNS: N/A

**Facility Location Address** 

Street 1: PO Box 146

Street 2: 10 miles N. of Best, TX on lease rd

 City:
 Big Lake

 State:
 TX

 ZIP:
 79632

 ZIP4:
 N/A

 County:
 Reagan

Facility Latitude and Longitude

Latitude (decimal): 31.310361 Longitude (decimal): -101.676139

Local Emergency Planning Committee and Regulations

LEPC: Reagan County LEPC

 OSHA PSM:
 N/A

 EPCRA 302:
 N/A

 CAA Title V:
 N/A

Facility Name: Stiles Gas Plant

EPA Facility Identifier: 1000 0011 1345 Plan Sequence Number: 1000008971

#### **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: 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

#### **Process NAICS**

NAICS Code: 211112

NAICS Description: Natural Gas Liquid Extraction

### **Section 6. Accident History**

No records found.

Facility Name: Stiles Gas Plant

EPA Facility Identifier: 1000 0011 1345 Plan Sequence Number: 1000008971

## **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):

Reagan County Sheriff's Dept.

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

(325) 884-2424