

Form OP-CRO2 - Instructions
Change of Responsible Official Information
Texas Commission on Environmental Quality

General:

Title 30 Texas Administrative Code § 122.165 (30 TAC § 122.165) (relating to “Certification by a Responsible Official”) states that the Texas Commission on Environmental Quality (TCEQ) shall be notified of any appointment of a new Responsible Official (RO). Notification of appointments of new Designated Representatives (DR) and/or Alternate Designated Representatives (ADR) is also required. A revised U.S. Environmental Protection Agency (EPA) form (Certificate of Representation) must also be submitted to EPA, and a copy submitted to TCEQ, for changes of DR and/or ADR. To maintain accurate records regarding applications and permits, TCEQ requires that administrative information changes (e.g., address, phone number, or title) for the RO, DR, or ADR also be reported. This form satisfies the requirements for these notifications.

During an application review, change notifications should be included in the next submittal to TCEQ regarding the permit. Please notify TCEQ in advance of changes. Also, note that information changes pertaining to only one type of contact may be submitted per form. If the change(s) applies to more than one individual, submit separate forms for each. After the initial submittal, if there is a new Duly Authorized Representative (DAR) appointment or an administrative information change (e.g., address, phone number, or title) regarding the DAR, include a revised Form OP-DEL (Delegation of Responsible Official) with the next submittal to TCEQ.

This form must bear the signature of either the RO, DR, or ADR. Signature stamps can be accepted in place of an original signature. Electronic signature stamps such as **DocuSign will not be accepted. The Signature Date will be used to validate the signature authority of the RO, DR, or ADR, and must be on or after the effective date of the RO, DR, or ADR certifying to the change.** An RO, DR, or ADR cannot certify information unless the RO, DR, or ADR has signature authority. The effective date of the RO, DR, or ADR certifying to the change will be based on one of the following:

1. the date the initial application was submitted, if the name of the RO certifying to the change was included in the initial application submittal on Form OP-1 (Site Information Summary); or
2. the date the initial EPA Form 7610-1 (Certificate of Representation) was signed, if the name of the DR or ADR certifying to the change was included in the initial submittal of EPA Form 7610-1; or
3. the Appointment Effective Date on Form OP-CRO2, if the RO, DR, or ADR certifying to the change is not the original RO, DR, or ADR included in the initial Form OP-1 or EPA Form 7610-1, and the RO, DR, or ADR was changed via Form OP-CRO2.

This form must be submitted to TCEQ through Title V STEERS. A copy of the form must also be submitted to the appropriate TCEQ Regional Office and EPA. Information on where to submit this form can be found on the TCEQ website at: www.tceq.texas.gov/permitting/air/titlev/submittal.html.

TCEQ also requires that a Core Data Form be submitted on all incoming applications unless **all** the following are met: the Regulated Entity Number (RN) and Customer Reference Number (CN) have been issued by TCEQ and no core data information has changed. The Central Registry is a common record area of TCEQ which maintains information about TCEQ customers and regulated activities, such as company names, addresses, and telephone numbers. This information is commonly referred as “core data.” The Central Registry provides the regulated community with a central access point within the agency to check core data and make changes when necessary. When core data about a facility is moved to the Central Registry, two new identification numbers are assigned: the CN and the RN. The Core Data Form is required if facility records are not yet part of the Central Registry or if core data for a facility has changed. If this is the initial permit for a site, then the Core Data Form must be completed and submitted with application forms. If amending, modifying, or otherwise updating an existing record for a site, the Core Data Form is not required, unless any core data information has changed. To review additional information regarding the Central Registry, go to the TCEQ website at: www.tceq.texas.gov/permitting/central_registry/guidance.html.

Specific:

I. Identifying Information

- **Account No.:** Enter the primary TCEQ account number (*XX-XXXX-X*) for the site if issued.
Note: Please use these instructions when completing Section V, if applicable.
- **RN:** Enter the Regulated Entity Number (RN) for the site if issued. This number is issued by TCEQ as part of the central registry process. If an RN has not yet been issued, leave this space blank. Do not enter permit numbers, project numbers, account numbers, etc. in this space (maximum 11 characters; *RNXXXXXXXXXX*).
Note: Please use these instructions when completing Section V, if applicable.
- **CN:** Enter the Customer Reference Number (CN) for the site if issued. This number is issued by TCEQ as part of the central registry process. If a CN has not yet been issued, leave this space blank. Do not enter permit numbers, project numbers, account numbers, etc. in this space (maximum 11 characters; *CNXXXXXXXXXX*).
Note: Please use these instructions when completing Section V, if applicable.
- **Permit No.:** Enter the operating permit number, if known (*OXXXX*). If this is an initial application submittal for an SOP, a TOP, or a GOP, the permit number will be assigned upon receipt by TCEQ. In this case, enter “TBA” for “to be assigned.” The permit number will appear on all correspondence from TCEQ regarding a specific application or group of applications. The applicant may contact the permit review engineer for assistance.
Note: Please use these instructions when completing Section V, if applicable.
- **Area Name:** Enter the area name used on Form OP-1 (Site Information Summary) of the initial application. If there is only one permit at the site, the area name is the same as the site name (maximum 50 characters).
Note: Please use these instructions when completing Section V if applicable.
- **Company Name:** Enter the name of the company, corporation, organization, individual, etc. applying for or holding the referenced permit (maximum 50 characters).
Note: Please use these instructions when completing Section V, if applicable.

II. Change Types

- **Action Type:** Indicate the type of action, “New Appointment” (of the RO, DR, or ADR) or “Administrative Information Change,” by placing an “X” in the appropriate box.
- **Contact Type:** Indicate one of the following options for the type of appointment or the role of the individual whose information is being changed or updated by placing an “X” in the appropriate box. Only one response can be accepted per form. If the change(s) applies to more than one individual, submit separate forms for each.
 - Responsible Official
 - Designated Representative (*Acid Rain Program and/or CSAPR sources only*)
 - Alternate Designated Representative (*Acid Rain Program and/or CSAPR sources only*)

Note: The DAR appointments and information changes are submitted on Form OP-DEL (see “General”).

III. Responsible Official/Designated Representative/Alternate Designated Representative Information

- **Conventional Title:** Place an “X” next to the appropriate conventional title (Mr. /Mrs. /Ms. /Dr.).
- **Name:** For submittals with an “Action Type” designation of “New Appointment,” enter the name of the new RO, DR, or ADR. For submittals with an “Action Type” designation of “Administrative Information Change,” enter the name of the current RO, DR, or ADR, incorporating any necessary changes (maximum 25 characters). Note: Use the name on the driver’s license associated with the STEERS account.
- **Title:** For submittals with an “Action Type” designation of “New Appointment,” enter the title of the new RO, DR, or ADR (maximum 25 characters). For submittals with an “Action Type” designation of “Administrative Information Change,” enter the title of the current RO, DR, or ADR, incorporating any necessary changes (maximum 25 characters).
- **Appointment Effective Date:** For submittals with an “Action Type” designation of “New Appointment,” enter the date that the appointment of the new RO, DR, or ADR became, or will become, effective (MM/DD/YYYY).

For submittals with an “Action Type” designation of “Administrative Information Change,” leave the Appointment Effective Date blank. The signature date in Section IV will become the effective date of the information change(s).
- **Telephone Number:** For submittals with an “Action Type” designation of “New Appointment,” enter the telephone number with the area code of the new RO, DR, or ADR. For submittals with an “Action Type” designation of “Administrative Information Change,” enter the telephone number of the current RO, DR, or ADR, if changed. If the telephone number is unchanged, leave the space blank.
- **Fax Number:** For submittals with an “Action Type” designation of “New Appointment,” enter the fax number with the area code of the new RO, DR, or ADR. For submittals with an “Action Type” designation of “Administrative Information Change,” enter the fax number of the current RO, DR, or ADR, if changed. If the fax number is unchanged, leave the space blank.
- **Company Name:** For submittals with an “Action Type” designation of “New Appointment,” enter the company name for the new RO, DR, or ADR. For submittals with an “Action Type” designation of “Administrative Information Change,” enter the company name of the current RO, DR, or ADR, if changed. If the company name is unchanged, leave the space blank (maximum 50 characters).
- **Mailing Address:** For submittals with an “Action Type” designation of “New Appointment,” enter the mailing address for the new RO, DR, or ADR, including city, state, and zip code. For submittals with an “Action Type” designation of “Administrative Information Change,” enter the city, state, and zip code of the mailing address for the current RO, DR, or ADR, if changed. If any portion of the mailing address is unchanged, leave the corresponding space blank. (address maximum - 50 characters; city maximum 25 characters)
- **Email Address:** For submittals with an “Action Type” designation of “New Appointment,” enter the email address for the new RO, DR, or ADR. For submittals with an “Action Type” designation of “Administrative Information Change,” enter the email address for the current RO, DR, or ADR, if changed. If the email address is unchanged, leave the space blank. (email address - maximum 50 characters)

IV. Certification of Truth, Accuracy, and Completeness

For submittals with an “Action Type” designation of “New Appointment,” enter the information of the new RO, DR, or ADR. For submittals with an “Action Type” designation of “Administrative Information Change,” enter the information for the current RO, DR, or ADR.

- **Certifier Name:** Print or type the name of the RO, DR, or ADR (maximum 25 characters).
- **Signature:** Affix the signature of the RO, DR, or ADR.
- **Signature Date:** Enter the date this form was signed by the RO, DR, or ADR (MM/DD/YYYY).

Note: The Signature Date will be used to validate the signature authority of the RO, DR, or ADR, and must be on or after the effective date of the RO, DR, or ADR certifying to the change. See the “General” section for information regarding the effective date of an RO, DR, or ADR.

Extension Page

V. Additional Identifying Information

Complete this table only if this certification form is being used to certify information on multiple application areas or sites for which the RO, DR, or ADR has signature authority. Please see the instructions in Section I of this form for completing the identifying information.

Note: Please include Federal Operating Permit Numbers only. New Source Review Permit Numbers should not be included on this form.

Form OP-CRO2
Change of Responsible Official Information
Federal Operating Permit Program

The Texas Commission on Environmental Quality (TCEQ) shall be notified of a new appointment or administrative information change (e.g., address, phone number, title) for a Responsible Official (RO), Designated Representative (DR), or Alternate Designated Representative (ADR) in the next submittal. This form satisfies the requirements for notification (a revised Certificate of Representation must also be submitted to the U.S. Environmental Protection agency for changes in the DR and ADR). After the initial submittal, if there is a change of Duly Authorized Representative (DAR) appointment or administrative information changes for the DAR, include a revised Form OP-DEL (Delegation of Responsible Official) with the next submittal to TCEQ.

I. Identifying Information
Account No.: ER 111712
Regulated Entity Number: RN 100220052
Customer Reference Number: CN 605745843
Permit Number: 83193
Area Name: Sneed Booster Station, Moore County
Company:
II. Change Type
Action Type: <input checked="" type="checkbox"/> New Appointment <input type="checkbox"/> Administrative Information Change
Contact Type (only one response accepted per form): <input checked="" type="checkbox"/> Responsible Official <input type="checkbox"/> Designated Representative (<i>Acid Rain Program and/or CSAPR sources only</i>) <input type="checkbox"/> Alternate Designated Representative (<i>Acid Rain Program and/or CSAPR sources only</i>)

Form OP-CRO2
Change of Responsible Official Information
Federal Operating Permit Program

III. Responsible Official/Designated Representative/Alternate Designated Representative Information
Conventional Title: <input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.
Name (Driver's License/STEERS): Mark McKenna
Title: Vice President HSSE
Appointment Effective Date: 12/16/24
Telephone Number: 202 505 2832
Fax Number.:
Company Name: IACX Energy
Mailing Address: 5445 DTC Parkway
City: Greenwood Village
State: Colorado
ZIP Code: 80111
Email Address: markmckenna@cimarronmidstream.com

Form OP-CRO2
Change of Responsible Official Information
Federal Operating Permit Program

IV. Certification of Truth, Accuracy, and Completeness

This certification does not extend to information, which is designated by TCEQ as information for reference only.

I, Mark McKenna, certify that based on information and belief formed Reasonable inquiry, the statement and information stated above are true, accurate, and complete.

Signature: Mark McKenna

Signature Date: 06/18/2025

**Change of Responsible Official
Federal Operating Permit Program
(Extension)**

V. Additional Identifying Information
Account No.:
Regulated Entity Number: RN
Customer Reference Number: CN
Permit Number:
Area Name:
Account Number:
Regulated Entity Number: RN
Customer Reference Number: CN
Permit Number:
Area Name:
Account Number:
Regulated Entity Number: RN
Customer Reference Number: CN
Permit No.:
Area Name:
Account Number:
Regulated Entity Number: RN
Customer Reference Number: CN
Permit Number:
Area Name:
Account Number:
Regulated Entity Number: RN
Customer Reference Number: CN
Permit Number:
Area Name:

Texas Commission on Environmental Quality

Title V Existing

2568

Site Information (Regulated Entity)

What is the name of the permit area to be authorized?

SNEED BOOSTER STATION

Does the site have a physical address?

No

Because there is no physical address, describe how to locate this site:

From SR-152 (1st St) & US-287 in Dumas TX, drive 19.4 miles E on SR-152, Turn S and drive 2 miles on Ranch RD 1913, turn SE and drive 0.2 mile on Ranch Rd 1319, turn S and drive 0.4 mile on Skelly School Rd to the Booster Station on the left.

City

Dumas

State

TX

ZIP

79056

County

MOORE

Latitude (N) (##.#####)

35.811666

Longitude (W) (-###.#####)

101.629444

Primary SIC Code

1311

Secondary SIC Code

Primary NAICS Code

211111

Secondary NAICS Code

Regulated Entity Site Information

What is the Regulated Entity's Number (RN)?

RN100220052

What is the name of the Regulated Entity (RE)?

SNEED BOOSTER STATION

Does the RE site have a physical address?

No

Because there is no physical address, describe how to locate this site:

FROM SR 152 & US 287 IN DUMAS TX, DRIVE 19.4 MI E ON SR 152 TURN S AND DRIVE 2 MI ON RANCH RD 1913 TURN SE AND DRIVE 0.2 MI ON RANCH RD 1319 TURN S AND DRIVE 0.4 MI SKELLY SCHOOL RD TO BOOSTER STATION ON THE LEFT

City

DUMAS

State

TX

ZIP

79029

County

MOORE

Latitude (N) (##.#####)

35.8117

Longitude (W) (-###.#####)

-101.6294

Facility NAICS Code

What is the primary business of this entity?

NATURAL GAS GATHERING

Customer (Applicant) Information

How is this applicant associated with this site?

Owner Operator

What is the applicant's Customer Number (CN)?

CN605745843

Type of Customer

Corporation

Full legal name of the applicant:

Legal Name

Iacx Rock Creek LLC

Texas SOS Filing Number

803314725

Federal Tax ID

State Franchise Tax ID

32070671923

State Sales Tax ID

Local Tax ID

DUNS Number

Number of Employees

21-100

Independently Owned and Operated?

Yes

Responsible Official Contact

Person TCEQ should contact for questions about this application:

Organization Name

IACX Rock Creek LLC

Prefix

MR

First

Mark

Middle

Last

McKenna

Suffix

Credentials

Title

VP HSSE & Regulatory

Enter new address or copy one from list:

Mailing Address

Address Type

Domestic

Mailing Address (include Suite or Bldg. here, if applicable)

5445 DTC PKWY

Routing (such as Mail Code, Dept., or Attn:)

City	GREENWOOD VILLAGE
State	CO
ZIP	80111
Phone (###-###-####)	2025052832
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	markmckenna@iacx.com

Technical Contact

Person TCEQ should contact for questions about this application:

Select existing TC contact or enter a new contact.

Organization Name	New Contact
Prefix	IACX Rock Creek LLC
First	MR
Middle	Mark
Last	McKenna
Suffix	
Credentials	
Title	VP HSSE and Regulatory
Enter new address or copy one from list:	Responsible Official Contact
Mailing Address	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	5445 DTC PKWY
Routing (such as Mail Code, Dept., or Attn:)	
City	GREENWOOD VILLAGE
State	CO
ZIP	80111
Phone (###-###-####)	2025052832
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	markmckenna@iacx.com

Title V General Information - Existing

1) Permit Type:	SOP
2) Permit Latitude Coordinate:	35 Deg 48 Min 42 Sec
3) Permit Longitude Coordinate:	101 Deg 37 Min 46 Sec
4) Is this submittal a new application or an update to an existing application?	New Application
4.1. What type of permitting action are you applying for?	Streamlined Revision
4.1.1. Are there any permits that should be voided upon issuance of this permit application through permit conversion?	No
4.1.2. Are there any permits that should be voided upon issuance of this permit application through permit consolidation?	No
5) Does this application include Acid Rain Program or Cross-State Air Pollution Rule requirements?	No

Title V Attachments Existing

Attach OP-1 (Site Information Summary)

Attach OP-2 (Application for Permit Revision/Renewal)

Attach OP-REQ1 (Application Area-Wide Applicability Determinations and General Information)

Attach OP-REQ2 (Negative Applicable Requirement Determinations)

Attach OP-REQ3 (Applicable Requirements Summary)

Attach OP-PBRSUP (Permits by Rule Supplemental Table)

Attach OP-SUMR (Individual Unit Summary for Revisions)

Attach OP-MON (Monitoring Requirements)

Attach OP-UA (Unit Attribute) Forms

If applicable, attach OP-AR1 (Acid Rain Permit Application)

Attach OP-CRO2 (Change of Responsible Official Information)

Attach OP-DEL (Delegation of Responsible Official)

Attach any other necessary information needed to complete the permit.

[File Properties]

File Name

2025-0609 IACX Sneed Minor TV Revision.pdf

Hash

D9DC86816FB41394F1BFF13758AA39E6F48212D1A66B359E6448C54E136264B8

MIME-Type

application/pdf

An additional space to attach any other necessary information needed to complete the permit.

Expedite Title V

1) Per Texas Health and Safety Code, Section 382.05155, does the applicant want to expedite the processing of this application?

No

Certification

I certify that I am the Responsible Official for this application and that, based on information and belief formed after reasonable inquiry, the statements and information on this form are true, accurate, and complete.

1. I am Mark McKenna, the owner of the STEERS account ER111712.
2. I have the authority to sign this data on behalf of the applicant named above.
3. I have personally examined the foregoing and am familiar with its content and the content of any attachments, and based upon my personal knowledge and/or inquiry of any individual responsible for information contained herein, that this information is true, accurate, and complete.
4. I further certify that I have not violated any term in my TCEQ STEERS participation agreement and that I have no reason to believe that the confidentiality or use of my password has been compromised at any time.
5. I understand that use of my password constitutes an electronic signature legally equivalent to my written signature.
6. I also understand that the attestations of fact contained herein pertain to the implementation, oversight and enforcement of a state and/or federal environmental program and must be true and complete to the best of my knowledge.
7. I am aware that criminal penalties may be imposed for statements or omissions that I know or have reason to believe are untrue or misleading.
8. I am knowingly and intentionally signing Title V Existing 2568.
9. My signature indicates that I am in agreement with the information on this form, and authorize its submittal to the TCEQ.

OWNER OPERATOR Signature: Mark McKenna OWNER OPERATOR

Account Number:

ER111712

Signature IP Address:

70.241.106.13

Signature Date:	2025-06-09
Signature Hash:	0E2D475FE606E3CD329032AEAAACD71B2A3E0A382BCD8FAB86DA1F1AE40A8DE6E
Form Hash Code at time of Signature:	9D2112297297E6D6A2E6AA434FD325534A5BA6151A5732DC775947CB1EF117F4

Submission

Reference Number:	The application reference number is 784233
Submitted by:	The application was submitted by ER111712/Mark Mckenna
Submitted Timestamp:	The application was submitted on 2025-06-09 at 15:03:43 CDT
Submitted From:	The application was submitted from IP address 70.241.106.13
Confirmation Number:	The confirmation number is 657838
Steers Version:	The STEERS version is 6.91
Permit Number:	The permit number is 2568

Additional Information

Application Creator: This account was created by Hunter J Lohrenz

TCEQ AIR QUALITY SITE OPERATING PERMIT MINOR REVISION APPLICATION



**IACX Rock Creek LLC.
Sneed Booster Station
Site Operating Permit No. O-2568**

Prepared By:

Katie Jeziorski – BD Manager
Hunter Lohrenz – Consultant

TRINITY CONSULTANTS

12700 Park Central Drive
Suite 600
Dallas, TX 75251
(972) 661-8100

June 2025

Project 254401.0071



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1. EXECUTIVE SUMMARY

IACX Rock Creek LLC. (IACX) owns and operates a gas plant located in Moore County, Texas (Sneed Booster Station). IACX operates under Texas Commission on Environmental Quality (TCEQ) Customer Reference Number (CN) 605745843. The Sneed Booster Station has been assigned Regulated Entity Number (RN) 100220052. Equipment at the site is authorized under two NSR permits and various Permits By Rule (PBRs). NSR Permit No. 73350 includes some of the engines at the site, flare pilot emissions, tanks, and fugitives. NSR Permit No. 83193/PSDTX1104 includes the incinerator and associated SRU equipment, as well as a process flare.

The Sneed Booster Station is located in Moore County, Texas. Moore County is currently designated as an attainment area for all criteria pollutants.¹ The Sneed Booster Station is a major source with respect to the Prevention of Significant Deterioration (PSD). In addition, the Sneed Booster Station is a major source with respect to the Federal Operating Permit Program (Title V) and operates under Title V Operating Permit No. O-2568.

The Sneed Booster Station is subject to the Texas Federal Operating Permits Program according to Title 30 of the Texas Administrative Code Section 122.120 (30 TAC §122.120). Due to proposed changes at the site, Operating Permit No. O-2568 must be revised per 30 TAC §122.210. Therefore, IACX is submitting this minor revision application according to the requirements listed in 30 TAC §122.215 through §122.217. The following section describes the proposed changes at the site resulting in updates to the operating permit.

New Source Review (NSR) Permit No. 83193 was amended and issued on December 16, 2024. It was amended to authorize the operation of the Acid Gas Flare (EPN FLR1) when the SRU is down and the amine unit is vented to the Acid Gas Flare (EPN FLR1) or when the Tail Gas Incinerator (EPN TGI) is down and SRU is vented to the Acid Gas Flare (EPN FLR1). IACX proposes to incorporate these changes into SOP No. O-2568.

1.1 TITLE V ACTIONS

With this Title V revision, there are no changes to the applicable requirements for Title V Unit ID FLR1.

1.2 APPLICATION CONTENTS

The enclosed SOP minor revision application for the Sneed Booster Station consists of the following forms:

- ▶ Section 2. TCEQ Form OP-CRO1
- ▶ Section 3. TCEQ Form OP-2
- ▶ Section 4. TCEQ Form OP-REQ1
- ▶ Section 5. Updated Major NSR Summary Table

¹ The United States Environmental Protection Agency (U.S. EPA) Green Book. Source: <https://www3.epa.gov/airquality/greenbook/ancl.html#TX>, accessed in April 2025.

2. TCEQ FORM OP-CR01

Certification by Responsible Official

Form OP-CRO1
Certification by Responsible Official
Federal Operating Permit Program
Texas Commission on Environmental Quality

All initial issuance, revision, renewal, and reopening permit application submittals requiring certification must be addressed using this form. Updates to site operating permit (SOP) and temporary operating permit (TOP) applications, other than public notice verification materials, must be certified prior to authorization of public notice or start of public announcement. Updates to general operating permit (GOP) applications must be certified prior to receiving an authorization to operate under a GOP.

I. Identifying Information
RN: RN100220052
CN: CN605745843
Account No.: MR-0029-L
Permit No.: O-2568
Project No.:
Area Name: Sneed Booster Station
Company Name: IACX Rock Creek LLC
II. Certification Type <i>(Please mark appropriate box)</i>
<input checked="" type="checkbox"/> Responsible Official Representative <input type="checkbox"/> Duly Authorized Representative
III. Submittal Type <i>(Please mark appropriate box) (Only one response can be accepted per form)</i>
<input type="checkbox"/> SOP/TOP Initial Permit Application <input checked="" type="checkbox"/> Permit Revision, Renewal, or Reopening
<input type="checkbox"/> GOP Initial Permit Application <input type="checkbox"/> Update to Permit Application
<input type="checkbox"/> Other: _____

Form OP-CRO1
Certification by Responsible Official
Federal Operating Permit Program
Texas Commission on Environmental Quality

All initial issuance, revision, and renewal permit application submittals requiring certification must be accompanied by this form. Updates to acid rain or CSAPR (other than public notice verification materials) must be certified prior to authorization of public notice for the draft permit.

IV. Certification of Truth
This certification does not extend to information which is designated by TCEQ as information for reference only.
I, <u>Mark McKenna</u> certify that I am the <u>RO</u> <div style="display: flex; justify-content: space-between; margin-top: 5px;"><i>(Certifier Name printed or typed)</i><i>(RO or DAR)</i></div>
and that, based on information and belief formed after reasonable inquiry, the statements and information dated during the time period or on the specific date(s) below, are true, accurate, and complete: <i>Note: Enter Either a Time Period or Specific Date(s) for each certification. This section must be completed. The certification is not valid without documentation date(s).</i>
Time Period: From _____ to _____ <div style="display: flex; justify-content: space-around; margin-top: 5px;"><i>(Start Date)</i><i>(End Date)</i></div>
Specific Dates: <u>05/26/2025</u> _____ <div style="display: flex; justify-content: space-around; margin-top: 5px;"><i>(Date 1)</i><i>(Date 2)</i><i>(Date 3)</i><i>(Date 4)</i></div>
_____ <div style="display: flex; justify-content: space-around; margin-top: 5px;"><i>(Date 5)</i><i>(Date 6)</i></div>
Signature: _____ Signature Date: _____
Title: <u>VP HSSE & Regulatory</u>

3. TCEQ FORM OP-2

Application for Permit Revision/Renewal

**Federal Operating Permit Program
Application for Permit Revision/Renewal
Form OP-2-Table 1
Texas Commission on Environmental Quality**

Date: 05/26/2025	
Permit No.: O-2568	
Regulated Entity No.: RN100220052	
Company Name: IACX Rock Creek LLC	
For Submissions to EPA	
Has an electronic copy of this application been submitted (or is being submitted) to EPA? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
I. Application Type	
Indicate the type of application:	
<input type="checkbox"/> Renewal	
<input checked="" type="checkbox"/> Streamlined Revision (Must include provisional terms and conditions as explained in the instructions.)	
<input type="checkbox"/> Significant Revision	
<input type="checkbox"/> Revision Requesting Prior Approval	
<input type="checkbox"/> Administrative Revision	
<input type="checkbox"/> Response to Reopening	
II. Qualification Statement	
For SOP Revisions Only	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
For GOP Revisions Only	<input type="checkbox"/> YES <input type="checkbox"/> NO

Federal Operating Permit Program
Application for Permit Revision/Renewal
Form OP-2-Table 1 (continued)
Texas Commission on Environmental Quality

III. Major Source Pollutants (Complete this section if the permit revision is due to a change at the site or change in regulations.)

Indicate all pollutants for which the site is a major source based on the site's potential to emit:

(Check the appropriate box[es].)

☒ VOC ☒ NO_x ☒ SO₂ ☐ PM₁₀ ☒ CO ☐ Pb ☐ HAP

Other:

IV. Reference Only Requirements (For reference only)

Has the applicant paid emissions fees for the most recent agency fiscal year (September 1 - August 31)? ☒ YES ☐ NO ☐ N/A

V. Delinquent Fees and Penalties

Notice: This form will not be processed until all delinquent fees and/or penalties owed to the TCEQ or the Office of the Attorney General on behalf of the TCEQ are paid in accordance with the Delinquent Fee and penalty protocol.

**Federal Operating Permit Program
Application for Permit Revision/Renewal
Form OP-2-Table 2
Texas Commission on Environmental Quality**

Date: 05/26/2025
Permit No.: O-2568
Regulated Entity No.: RN100220052
Company Name: IACX Rock Creek LLC

Using the table below, provide a description of the revision.

Revision No.	Revision Code	New Unit	Unit/Group	Process	NSR Authorization	Description of Change and Provisional Terms and Conditions
			ID No.	Applicable Form		
1	MS-A	NO	FLR1	OP-UA7	NSR Permit No. 83193	Permit 83193 was updated to authorize the alternate operating scenarios for the Acid Gas Flare (EPN FLR1) when the SRU is down and the amine unit is vented to the Acid Gas Flare (EPN FLR1) or when the Tail Gas Incinerator (EPN TGI) is down and SRU is vented to the Acid Gas Flare (EPN FLR1). There will be no changes to applicable requirements in the permit for this unit.

4. TCEQ FORM OP-REQ1

Application Area-Wide Applicability Determinations and General Information
Form OP-REQ1 (Page 88)
Federal Operating Permit Program
Texas Commission on Environmental Quality

Date	Permit No.	Regulated Entity No.
05/26/2025	O-2568	RN100220052

For SOP applications, answer ALL questions unless otherwise directed.

◆ For GOP applications, answer ONLY these questions unless otherwise directed.

XII. NSR Authorizations (Attach additional sheets if necessary for sections XII.E-J.)

E. PSD Permits and PSD Major Pollutants

Permit No.	Issuance Date	Pollutant(s):	Permit No.	Issuance Date	Pollutant(s):
PSDTX1104		SO2			

If PSD Permits are held for the application area, please complete the Major NSR Summary Table located under the Technical Forms heading at: www.tceq.texas.gov/permitting/air/titlev/site/site_experts.html.

F. Nonattainment (NA) Permits and NA Major Pollutants

Permit No.	Issuance Date	Pollutant(s):	Permit No.	Issuance Date	Pollutant(s):

If NA Permits are held for the application area, please complete the Major NSR Summary Table located under the Technical Forms heading at: www.tceq.texas.gov/permitting/air/titlev/site/site_experts.html.

G. NSR Authorizations with FCAA § 112(g) Requirements

NSR Permit No.	Issuance Date	NSR Permit No.	Issuance Date	NSR Permit No.	Issuance Date

Application Area-Wide Applicability Determinations and General Information
Form OP-REQ1 (Page 89)
Federal Operating Permit Program
Texas Commission on Environmental Quality

Date	Permit No.	Regulated Entity No.
05/26/2025	O-2568	RN100220052

For SOP applications, answer ALL questions unless otherwise directed.

- ◆ For GOP applications, answer ONLY these questions unless otherwise directed.

XII. NSR Authorizations (continued) - (Attach additional sheets if necessary for sections XII.E-J.)

- ◆ **H. Title 30 TAC Chapter 116 Permits, Special Permits, Standard Permits, Other Authorizations (Other Than Permits By Rule, PSD Permits, NA Permits) for the Application Area**

Authorization No.	Issuance Date	Authorization No.	Issuance Date	Authorization No.	Issuance Date
73350	02/11/2015				
83193	12/16/2024				

- ◆ **I. Permits by Rule (30 TAC Chapter 106) for the Application Area**

A list of selected Permits by Rule (previously referred to as standard exemptions) that are required to be listed in the FOP application is available in the instructions.

PBR No.	Version No./Date	PBR No.	Version No./Date	PBR No.	Version No./Date
106.183	06/18/1997				
106.352	09/04/2000				
106.352	02/27/2011				
106.359	09/10/2013				
106.511	09/04/2000				
106.512	03/14/1997				
SE 066	11/05/1986				

- ◆ **J. Municipal Solid Waste and Industrial Hazardous Waste Permits with an Air Addendum**

Permit No.	Issuance Date	Permit No.	Issuance Date	Permit No.	Issuance Date

5. MAJOR NSR SUMMARY TABLE

Major NSR Summary Table

Permit Numbers: 83193 and PSDTX1104					Issuance Date:		
Emission Point No. (1)	Source Name (2)	Air Contaminant Name (3)	Emission Rates *		Monitoring and Testing Requirements	Recordkeeping Requirements	Reporting Requirements
			lbs/hour	TPY **	Special Conditions/ Application Information	Special Conditions/ Application Information	Special Conditions/ Application Information
BLR	Steam Boiler (7)	CO	0.34	1.36	5	5	
		NOx	0.41	1.62			
		PM ₁₀	0.03	0.12			
		SO ₂ (5)	0.01	0.05			
		VOC	0.02	0.09			
TGI	Tail Gas Incinerator Unit	CO	2.22	9.73	3, 4, 6, 7, 8, 9, 10, 11, 13, 14	3, 4, 6, 9, 10, 11, 13, 14	3, 10, 13, 14
		H ₂ S	0.04	0.17			
		NOx	0.58	2.56			
		PM ₁₀	0.02	0.11			
		SO ₂ (5)	81.58	323.13			
		VOC	0.06	0.24			
SRUFUG	SRU Piping Fugitives (4)	H ₂ S	0.26	1.13	10	10	10
		VOC	0.01	0.07			
SLR	Sulfur Truck Loading Rack	H ₂ S	0.09	0.02			
Planned Maintenance, Startup, and Shutdown							
TGI	Tail Gas Incinerator Unit	CO	0.50	0.06	15, 16	15, 16	
		NOx	0.10	0.01			
		PM ₁₀	0.01	0.01			
		SO ₂ (5)	666.7	4.00			
		VOC	0.01	0.01			

Major NSR Summary Table

Permit Numbers: 83193 and PSDTX1104					Issuance Date:		
Emission Point No. (1)	Source Name (2)	Air Contaminant Name (3)	Emission Rates *		Monitoring and Testing Requirements	Recordkeeping Requirements	Reporting Requirements
			lbs/hour	TPY **	Special Conditions/ Application Information	Special Conditions/ Application Information	Special Conditions/ Application Information
FLR1	Flare – Full SRU Planned Shutdown	CO	2.52	0.06	15, 17	15, 17	
		H ₂ S	6.01	0.14			
		NO _x	0.46	0.01			
		SO ₂ (5)	554.0	13.32			
		VOC	0.23	0.01			
FLR1	Flare - SRU Hot Stand-by	CO	78.82	1.59	15, 17	15, 17	
		NO _x	14.49	0.29			
		H ₂ S	13.67	0.27			
		SO ₂ (5)	1,261	25.50			
		VOC	0.30	0.01			
BLR	Steam Boiler (6)	CO	0.34	0.13		15	
		NO _x	0.41	0.15			
		PM ₁₀	0.03	0.01			
		SO ₂ (5)	0.01	0.01			
		VOC	0.02	0.01			
SRUFUGMS	SRU Vent to Atmosphere	SO ₂ (5)	0.03	0.01	16, 18	15, 16	
FLR1	Alternative Operating Scenarios Cap (8)	CO	4.04	12.12	15, 17	15, 17	
		H ₂ S	7.96	0.40			
		NO _x	0.47	1.41			
		SO ₂ (5)	748.94	37.45			
		VOC	0.36	1.07			

- (1) Emission point identification - either specific equipment designation or emission point number from a plot plan.
- (2) Specific point source names. For fugitive sources, use an area name or fugitive source name.
- (3)
 - CO - carbon monoxide
 - NO_x - total oxides of nitrogen
 - PM₁₀ - particulate matter (PM) equal to or less than 10 microns in diameter. Where PM is not listed, it shall be assumed that no PM greater than 10 microns is emitted.
 - SO₂ - sulfur dioxide
 - VOC - volatile organic compounds as defined in Title 30 Texas Administrative Code §101.1
 - H₂S - hydrogen sulfide
- (4) Fugitive emissions are an estimate only and should not be considered as a maximum allowable emission rate.
- (5) Prevention of significant deterioration pollutant.
- (6) A maximum of 30 days of operation on a rolling 12-month basis.
- (7) Limited at an average 12-month rolling firing rate of 33,590 MMBtu per year.
- (8) Routing of acid gas waste stream from amine units to flare while SRU is down is limited to maximum of 100 hours per year.

* Emission rates are based on and the facilities are limited by the following maximum operating schedule:

24 Hrs/day 7 Days/week 52 Weeks/year

** Compliance with annual emission limits is based on a rolling 12-month period.