



Home > Owner/Operator Response Form

# Owner/Operator Response Form

This form allows owners/operators to respond to the notification of a methane super emitter event at their wellsite or facility.

– Collapse All + Expand All

Help

**Point of Contact Information**

Email \*

Point of Contact Name \*

Phone

Alternate Contacts (email)

**Submit Form**

**Clear Form**

**Notification Information**

Event Notification # \*

**Notification Coordinates**  
Latitude: 35.1789 Longitude: -147.25687

Are you the owner or operator or responsible official (where applicable) of an oil and natural gas facility (e.g., individual well site, centralized production facility, natural gas processing plant, or compressor station) within 50 meters from the latitude and longitude provided in the EPA notification?  Yes  No

**Info:** Based on the information provided, you are not required to provide any further information. You may proceed to the certification and signature.

**Demonstrable Error**

Do you assert a demonstrable error in the notification? \*  Yes  No

Evidence

Statement of Demonstrable Error

**Applicability and Identification**

Is there an affected facility or associated equipment subject to regulation under NSPS OOOO, NSPS OOOOa, NSPS OOOOb, and/or a State or Federal Plan implementing OOOOc at this oil and gas facility? \*  Yes  No

**Info:** Based on the information provided, you may but are not required to provide any further information. If you choose not to provide additional information, you may proceed to the certification and signature.

Did you identify the source of the super emitter event? (required if yes to response above)  Yes  No

**Evaluation of Source**

What was the source of the emission? \*

Is the source subject to regulation under NSPS OOOO, NSPS OOOOa, NSPS OOOOb, and/or a State, Tribal or Federal Plan implementing OOOOc? \*  OOOO  OOOOa  OOOOb  OOOOc  None

Please identify by citation the applicable regulation(s) within each applicable subpart

**Status and Response Plan**

Is this emission event ongoing? \*  Yes  No

What day did the emission event end? If the date is unknown, an estimate should be provided. (required if no to previous question)

Is the above date an estimate? (required if the emission is ended)  Yes  No

What time?

What time zone?

Targeted End Date (required if emission is ongoing)

Provide a short narrative of your plan to end the super-emitter event \*

Response Narrative Attachment(s)

**Search for Source**

Did you conduct the applicable investigations listed in (d)(2)(i)-(v)?  (i) Review any maintenance activities or process activities  (ii) Review all monitoring data from control devices  (iii) Review the results of a fugitive emissions survey or periodic screening event  (iv) Review continuous monitoring data  (v) Screen the entire oil and natural gas facility with OGI, Method 21 or an alternative test method

Alternative Test Method(s) approved per § 60.5398b(d), such as MATM-XXXX

What day was this investigation? \*

What time?

What time zone?

I certify that all applicable investigations specified in paragraph (d)(6)(i) through (v) of this section have been conducted for all affected facilities and associated equipment subject to this subpart that are at this oil and natural gas facility. \*

**Optional Additions**

Do you wish to self report a data element? Self-reported data will be displayed alongside data from the Third Party Notifier.  Yes

**Data Elements**

Facility Name

Quantification

**+ Add Data Element**

If there are additional comments or documentation you wish to provide, please do so below.

Attachment(s)

**Attestation**

I certify that the information provided in this report regarding the specified super-emitter event was prepared under my direction or supervision. I further certify that the investigations were conducted, and this report was prepared pursuant to the requirements of §60.5371b(d) and (e). Based on my professional knowledge and experience, and inquiry of personnel involved in the assessment, the certification herein is true, accurate, and complete. I am aware that knowingly false statements may be punishable by fine or imprisonment.

Digital Signature

Top of Page



## Discover.

- Accessibility
- Budget & Performance
- Contracting
- EPA www Web Snapshots
- Grants
- No FEAR Act Data
- Privacy
- Privacy and Security Notice

## Connect.

- Data.gov
- Inspector General
- Jobs
- Newsroom
- Open Government
- Regulations.gov
- Subscribe
- USA.gov
- White House

## Ask.

- Contact EPA
- EPA Disclaimers
- Hotlines
- FOIA Requests
- Frequent Questions

## Follow.



Last updated on February 28, 2024

Data Refresh Information