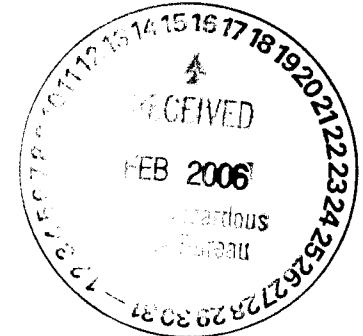


Transwestern Pipeline Company
Summit Office Building
4001 Indian School Road, NE, Suite 250
Albuquerque, NM 87110
Phone (505) 260-4020
Fax (505) 254-1437

UPS Tracking Number: 1Z F7E 046 22 1000 6835

February 15, 2006



James Valdez, Management Analyst
New Mexico Environmental Department
Hazardous Waste Bureau
2905 Rodeo Park Drive East, Building 1
Santa Fe, New Mexico 87505

Re: 2005 Hazardous Waste Biennial Reports for
Transwestern Pipeline Company
West Region Facilities

Dear Mr. Valdez:

Enclosed with this letter are five (5) Biennial Hazardous Waste Reports for Transwestern Pipeline Company West Region facilities. It should be noted that another submittal of reports will be or has been sent in for the East Region facilities of Transwestern Pipeline Company. The East Region reports will be or are in another mailing. The reports submitted here were generated from the BR State software program downloaded from the US EPA website and are for the following facilities:

Facility Name	EPA ID Number
Bisti Compressor Station	NMR000008706
Bloomfield Compressor Station	NMR000008714
Gallup Compressor Station	NMR000004572
Mountainair Compressor Station	NMD000729053
Thoreau Compressor Station	NMD986667186

In addition to the hard copies of these five reports, a CD also is enclosed with the reports in electronic format. All of these facilities are registered as large quantity generators, but none of the facilities generated any hazardous waste during the report period so all five facilities were non-generators in these reports.

Should you have any questions on these reports, please contact the undersigned at (505) 260-4013. Thank you.

Sincerely,

A handwritten signature in black ink that reads "John Steenberg". The signature is written in a cursive style with a long, sweeping underline that extends across the name.

John Steenberg
Division Environmental Specialist

Enclosures: Hard copies and CD

cc: Bisti CS
Bloomfield CS
Gallup Cs
Mountainair CS
Thoreau CS
Envision File No. 209.2.30
file

MAIL THE COMPLETED FORM TO: The Appropriate EPA Regional or State Office	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM				
1. Reason for Submittal and Status of Information Supplied (see instructions on page 9) MARK ALL BOX(ES) THAT APPLY	A. Reason for Submittal: <input type="checkbox"/> To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). <input type="checkbox"/> To provide subsequent notification (to update site identification information). <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application. <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____). <input checked="" type="checkbox"/> As a component of the Hazardous Waste Report.				
2. Site EPA ID Number (see instructions on page 10)	EPA ID Number: NMR000008706				
3. Site Name (see instructions on page 10)	Name: BISTI COMP STA-TRANSWESTERN PIPELINE CO.				
4. Site Location Information (see instructions on page 10)	Street Address: REMOTE HWY 371, 37 MILES SOUTH OF FARMINGTON, NM City, Town, or Village: NEAR FARMINGTON State: NM County Name: SAN JUAN Zip Code: 87401-				
5. Site Land Type (see instructions on page 10)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other				
6. North American Industry Classification System (NAICS) Code(s) for the Site (see instructions on page 10)	A. 486210	B.	C.	D.	
7. Site Mailing Address (see instructions on page 11)	Street or P.O. Box: REMOTE REMOTE P.O. BOX 399 City, Town, or Village: BLOOMFIELD State: NM Country: Zip Code: 87401-				
8. Site Contact Person (see instructions on page 11)	First Name: JOHN	MI: E	Last Name: STEENBERG	Phone Number: (505) 260-4013 Extension:	Email: john.steenberg@panhandleenergy.com
9. Legal Owner and Operator of the Site (see instructions on pages 11 and 12)	A. Name of Site's Operator: TRANSWESTERN PIPELINE COMPANY		Date Became Operator (mm/dd/yyyy): 01/01/1959	Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other	
B. Name of Site's Legal Owner: TRANSWESTERN PIPELINE COMPANY		Date Became Owner (mm/dd/yyyy): 01/01/1959			
Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other					

9. Legal Owner (Continued) Address	Street or P.O. Box: 4001 INDIAN SCHOOL RD, NE, SUITE 250		
	City, Town, or Village: ALBUQUERQUE		
	State: NM	Zip Code: 87110-	Country:

10. Type of Regulated Waste Activity
 Mark 'X' in the appropriate boxes. Mark "Yes" or "No" for each choice. (See instructions on pages 13 to 16)

A. Hazardous Waste Activities
 Complete all parts for Items 1 through 6.

For Items 2 through 6, check all that apply:

- 1. Generator of Hazardous Waste**
 If "Yes" choose only one of the following - a,b, or c.
- a. LQG: Greater than 1,000 kg/mo (2,200 lbs.) of non-acute hazardous waste; or
 - b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs.) of non-acute hazardous waste; or
 - c. CESQG: Less than 100 kg/mo of non-acute hazardous waste

- 2. Transporter of Hazardous Waste**
- 3. Treater, Storer, or Disposer of Hazardous Waste (at your site)** Note: A hazardous waste permit is required for this activity
- 4. Recycler of Hazardous Waste (at your site)**
 Note: A hazardous waste permit may be required for this activity.

In addition, indicate other generator activities (check all that apply)

- d. United States Importer of Hazardous Waste
- e. Mixed Waste (hazardous and radioactive) Generator

5. Exempt Boiler and/or Industrial Furnace

- a. Small Quantity On-site Burner Exemption
- b. Smelting, Melting, Refining Furnace Exemption

- 6. Underground Injection Control**

B. Universal Waste Activities

1. Large Quantity Handler of Universal Waste (accumulate 5,000 KG or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. (check all boxes that apply)

	<u>Generated</u>	<u>Accumulated</u>
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other _____	<input type="checkbox"/>	<input type="checkbox"/>

- 2. Destination Facility for Universal Waste**
 Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities - Mark all boxes that apply

- 1. Used Oil Transporter**
 If "Yes", mark each that applies.
 - a. Transporter
 - b. Transfer Facility
- 2. Used Oil Processor and/or Re-refiner -**
 If "Yes", mark each that applies.
 - a. Processor
 - b. Re-refiner
- 3. Off-Specification Used Oil Burner**
- 4. Used Oil Fuel Marketer**
 If "Yes", mark each that applies.
 - a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
 - b. Marketer Who First Claims the Used Oil Meets the Specifications

MAIL THE COMPLETED FORM TO: The Appropriate EPA Regional or State Office	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM		
1. Reason for Submittal and Status of Information Supplied (see instructions on page 9) MARK ALL BOX(ES) THAT APPLY	A. Reason for Submittal: <input type="checkbox"/> To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). <input type="checkbox"/> To provide subsequent notification (to update site identification information). <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application. <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____). <input checked="" type="checkbox"/> As a component of the Hazardous Waste Report.		
2. Site EPA ID Number (see instructions on page 10)	EPA ID Number: NMR000008714		
3. Site Name (see instructions on page 10)	Name: BLOOMFIELD COMP STA-TRANSWESTERN PL CO.		
4. Site Location Information (see instructions on page 10)	Street Address: COUNTY ROAD 4900, LOT 187		
	City, Town, or Village: BLOOMFIELD	State: NM	
	County Name: SAN JUAN	Zip Code: 87413-	
5. Site Land Type (see instructions on page 10)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
6. North American Industry Classification System (NAICS) Code(s) for the Site (see instructions on page 10)	A. 486210	B.	
	C.	D.	
7. Site Mailing Address (see instructions on page 11)	Street or P.O. Box: P.O BOX 399		
	City, Town, or Village: BLOOMFIELD		State: NM
	Country:		Zip Code: 87413-
8. Site Contact Person (see instructions on page 11)	First Name: JOHN	MI: E	Last Name: STEENBERG
	Phone Number: (505) 260-4013 Extension:		Email: john.steenberg@panhandleenergy.com
9. Legal Owner and Operator of the Site (see instructions on pages 11 and 12)	A. Name of Site's Operator: TRANSWESTERN PIPELINE COMPANY		Date Became Operator (mm/dd/yyyy): 01/01/1959
	Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
	B. Name of Site's Legal Owner: TRANSWESTERN PIPELINE COMPANY		Date Became Owner (mm/dd/yyyy): 01/01/1959
	Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		

9. Legal Owner (Continued) Address	Street or P.O. Box: 4001 INDIAN SCHOOL RD., NE, SUITE 250
	City, Town, or Village: ALBUQUERQUE
	State: NM Zip Code: 87110- Country:

10. Type of Regulated Waste Activity
 Mark 'X' in the appropriate boxes. Mark "Yes" or "No" for each choice. (See instructions on pages 13 to 16)

A. Hazardous Waste Activities
 Complete all parts for Items 1 through 6.

For Items 2 through 6, check all that apply:

1. Generator of Hazardous Waste
 If "Yes" choose only one of the following - a,b, or c.

- a. LQG: Greater than 1,000 kg/mo (2,200 lbs.) of non-acute hazardous waste; or
- b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs.) of non-acute hazardous waste; or
- c. CESQG: Less than 100 kg/mo of non-acute hazardous waste

In addition, indicate other generator activities (check all that apply)

- d. United States Importer of Hazardous Waste
- e. Mixed Waste (hazardous and radioactive) Generator

2. Transporter of Hazardous Waste

3. Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity

4. Recycler of Hazardous Waste (at your site)
 Note: A hazardous waste permit may be required for this activity.

5. Exempt Boiler and/or Industrial Furnace

- a. Small Quantity On-site Burner Exemption
- b. Smelting, Melting, Refining Furnace Exemption

6. Underground Injection Control

B. Universal Waste Activities

1. Large Quantity Handler of Universal Waste (accumulate 5,000 KG or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. (check all boxes that apply)

	<u>Generated</u>	<u>Accumulated</u>
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other _____	<input type="checkbox"/>	<input type="checkbox"/>

2. Destination Facility for Universal Waste
 Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities - Mark all boxes that apply

1. Used Oil Transporter
 If "Yes", mark each that applies.

- a. Transporter
- b. Transfer Facility

2. Used Oil Processor and/or Re-refiner -
 If "Yes", mark each that applies.

- a. Processor
- b. Re-refiner

3. Off-Specification Used Oil Burner

4. Used Oil Fuel Marketer
 If "Yes", mark each that applies.

- a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
- b. Marketer Who First Claims the Used Oil Meets the Specifications

MAIL THE COMPLETED FORM TO: The Appropriate EPA Regional or State Office	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM		
1. Reason for Submittal and Status of Information Supplied (see instructions on page 9) MARK ALL BOX(ES) THAT APPLY	A. Reason for Submittal: <input type="checkbox"/> To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). <input type="checkbox"/> To provide subsequent notification (to update site identification information). <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application. <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____). <input checked="" type="checkbox"/> As a component of the Hazardous Waste Report.		
2. Site EPA ID Number (see instructions on page 10)	EPA ID Number: NMR000004572		
3. Site Name (see instructions on page 10)	Name: GALLUP COMP STA-TRANSWESTERN PL CO.		
4. Site Location Information (see instructions on page 10)	Street Address: 21 SPEEDWAY DRIVE		
	City, Town, or Village: GALLUP	State: NM	
	County Name: MCKINLEY	Zip Code: 87301-	
5. Site Land Type (see instructions on page 10)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
6. North American Industry Classification System (NAICS) Code(s) for the Site (see instructions on page 10)	A. 486210	B.	
	C.	D.	
7. Site Mailing Address (see instructions on page 11)	Street or P.O. Box: P.O. BOX 9		
	City, Town, or Village: GALLUP		State: NM
	Country:		Zip Code: 87301-
8. Site Contact Person (see instructions on page 11)	First Name: JOHN	MI: E	Last Name: STEENBERG
	Phone Number: (505) 260-4013 Extension:		Email: john.steenberg@panhandleenergy.com
9. Legal Owner and Operator of the Site (see instructions on pages 11 and 12)	A. Name of Site's Operator: TRANSWESTERN PIPELINE COMPANY		Date Became Operator (mm/dd/yyyy): 01/01/1959
	Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
	B. Name of Site's Legal Owner: TRANSWESTERN PIPELINE COMPANY		Date Became Owner (mm/dd/yyyy): 01/01/1959
	Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		

9. Legal Owner (Continued) Address	Street or P.O. Box: 4001 INDIAN SCHOOL RD, NE, SUITE 250		
	City, Town, or Village: ALBUQUERQUE		
	State: NM	Zip Code: 87110-	Country:

10. Type of Regulated Waste Activity
 Mark 'X' in the appropriate boxes. Mark "Yes" or "No" for each choice. (See instructions on pages 13 to 16)

A. Hazardous Waste Activities
 Complete all parts for Items 1 through 6.

For Items 2 through 6, check all that apply:

- 1. Generator of Hazardous Waste**
 If "Yes" choose only one of the following - a,b, or c.
- a. LQG: Greater than 1,000 kg/mo (2,200 lbs.) of non-acute hazardous waste; or
 - b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs.) of non-acute hazardous waste; or
 - c. CESQG: Less than 100 kg/mo of non-acute hazardous waste

- 2. Transporter of Hazardous Waste**
- 3. Treater, Storer, or Disposer of Hazardous Waste (at your site)** **Note:**
A hazardous waste permit is required for this activity
- 4. Recycler of Hazardous Waste (at your site)**
Note: A hazardous waste permit may be required for this activity.

In addition, indicate other generator activities (check all that apply)

5. Exempt Boiler and/or Industrial Furnace

- d. United States Importer of Hazardous Waste
- e. Mixed Waste (hazardous and radioactive) Generator

- a. Small Quantity On-site Burner Exemption
- b. Smelting, Melting, Refining Furnace Exemption

- 6. Underground Injection Control**

B. Universal Waste Activities

1. Large Quantity Handler of Universal Waste (accumulate 5,000 KG or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. (check all boxes that apply)

	<u>Generated</u>	<u>Accumulated</u>
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other _____	<input type="checkbox"/>	<input type="checkbox"/>

- 2. Destination Facility for Universal Waste**
 Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities - Mark all boxes that apply

- 1. Used Oil Transporter**
 If "Yes", mark each that applies.
 - a. Transporter
 - b. Transfer Facility
- 2. Used Oil Processor and/or Re-refiner -**
 If "Yes", mark each that applies.
 - a. Processor
 - b. Re-refiner
- 3. Off-Specification Used Oil Burner**
- 4. Used Oil Fuel Marketer**
 If "Yes", mark each that applies.
 - a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
 - b. Marketer Who First Claims the Used Oil Meets the Specifications

11. Description of Hazardous Wastes (see instructions on page 17)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

12. Comments (see instructions on page 17)

john.steenberg@panhandleenergy.com

13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (see instructions on page 17)

Signature of owner, operator, or an authorized representative	Name and Official Title (type or print)	D. Date Signed (mm-dd-yyyy)
	JOHN E STEENBERG	02/02/2006
	ENVIRON. SPEC.	

<p>MAIL THE COMPLETED FORM TO: The Appropriate EPA Regional or State Office</p>	<p>United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM</p>			
<p>1. Reason for Submittal and Status of Information Supplied (see instructions on page 9)</p> <p>MARK ALL BOX(ES) THAT APPLY</p>	<p>A. Reason for Submittal:</p> <p><input type="checkbox"/> To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities).</p> <p><input type="checkbox"/> To provide subsequent notification (to update site identification information).</p> <p><input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application.</p> <p><input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____).</p> <p><input checked="" type="checkbox"/> As a component of the Hazardous Waste Report.</p>			
<p>2. Site EPA ID Number (see instructions on page 10)</p>	<p>EPA ID Number: NMD000729053</p>			
<p>3. Site Name (see instructions on page 10)</p>	<p>Name: MOUNTAINAIR COMP STA-TRANSWESTERN PL CO</p>			
<p>4. Site Location Information (see instructions on page 10)</p>	<p>Street Address: 950 C CASTER RANCH ROAD</p>			
	<p>City, Town, or Village: MOUNTAINAIR</p>	<p>State: NM</p>		
	<p>County Name: TORRANCE</p>	<p>Zip Code: 87036-</p>		
<p>5. Site Land Type (see instructions on page 10)</p>	<p>Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>			
<p>6. North American Industry Classification System (NAICS) Code(s) for the Site (see instructions on page 10)</p>	<p>A. 486210</p>		<p>B.</p>	
	<p>C.</p>		<p>D.</p>	
<p>7. Site Mailing Address (see instructions on page 11)</p>	<p>Street or P.O. Box: P.O. BOX 190</p>			
	<p>City, Town, or Village: MOUNTAINAIR</p>			<p>State: NM</p>
	<p>Country:</p>		<p>Zip Code: 87036-</p>	
<p>8. Site Contact Person (see instructions on page 11)</p>	<p>First Name: JOHN</p>		<p>MI: E</p>	<p>Last Name: STEENBERG</p>
	<p>Phone Number: (505) 260-4013 Extension:</p>			<p>Email: john.steenberg@panhandleenergy.com</p>
<p>9. Legal Owner and Operator of the Site (see instructions on pages 11 and 12)</p>	<p>A. Name of Site's Operator: TRANSWESTERN PIPELINE COMPANY</p>			<p>Date Became Operator (mm/dd/yyyy): 01/01/1959</p>
	<p>Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>			
	<p>B. Name of Site's Legal Owner: TRANSWESTERN PIPELINE COMPANY</p>			<p>Date Became Owner (mm/dd/yyyy): 01/01/1959</p>
	<p>Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>			

9. Legal Owner (Continued) Address	Street or P.O. Box: 4001 INDIAN SCHOOL RD, NE, SUITE 250		
	City, Town, or Village: ALBUQUERQUE		
	State: NM	Zip Code: 87110-	Country:

10. Type of Regulated Waste Activity
 Mark 'X' in the appropriate boxes. Mark "Yes" or "No" for each choice. (See instructions on pages 13 to 16)

A. Hazardous Waste Activities
 Complete all parts for Items 1 through 6.

For Items 2 through 6, check all that apply:

- 1. Generator of Hazardous Waste**
 If "Yes" choose only one of the following - a,b, or c.
- a. LQG: Greater than 1,000 kg/mo (2,200 lbs.) of non-acute hazardous waste; or
 - b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs.) of non-acute hazardous waste; or
 - c. CESQG: Less than 100 kg/mo of non-acute hazardous waste

- 2. Transporter of Hazardous Waste**
- 3. Treater, Storer, or Disposer of Hazardous Waste (at your site)** Note: A hazardous waste permit is required for this activity
- 4. Recycler of Hazardous Waste (at your site)**
 Note: A hazardous waste permit may be required for this activity.

In addition, indicate other generator activities (check all that apply)

5. Exempt Boiler and/or Industrial Furnace

- d. United States Importer of Hazardous Waste
- e. Mixed Waste (hazardous and radioactive) Generator

- a. Small Quantity On-site Burner Exemption
- b. Smelting, Melting, Refining Furnace Exemption

- 6. Underground Injection Control**

B. Universal Waste Activities

1. Large Quantity Handler of Universal Waste (accumulate 5,000 KG or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. (check all boxes that apply)

	<u>Generated</u>	<u>Accumulated</u>
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other _____	<input type="checkbox"/>	<input type="checkbox"/>

- 2. Destination Facility for Universal Waste**
 Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities - Mark all boxes that apply

- 1. Used Oil Transporter**
 If "Yes", mark each that applies.
 - a. Transporter
 - b. Transfer Facility
- 2. Used Oil Processor and/or Re-refiner -**
 If "Yes", mark each that applies.
 - a. Processor
 - b. Re-refiner
- 3. Off-Specification Used Oil Burner**
- 4. Used Oil Fuel Marketer**
 If "Yes", mark each that applies.
 - a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
 - b. Marketer Who First Claims the Used Oil Meets the Specifications

MAIL THE COMPLETED FORM TO: The Appropriate EPA Regional or State Office	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM		
1. Reason for Submittal and Status of Information Supplied (see instructions on page 9) MARK ALL BOX(ES) THAT APPLY	A. Reason for Submittal: <input type="checkbox"/> To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). <input type="checkbox"/> To provide subsequent notification (to update site identification information). <input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application. <input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____). <input checked="" type="checkbox"/> As a component of the Hazardous Waste Report.		
2. Site EPA ID Number (see instructions on page 10)	EPA ID Number: NMD986667186		
3. Site Name (see instructions on page 10)	Name: THOREAU COMP STA-TRANSWESTERN PL CO		
4. Site Location Information (see instructions on page 10)	Street Address: 174 CASTLE ROCK ROAD		
	City, Town, or Village: THOREAU	State: NM	
	County Name: MCKINLEY	Zip Code: 87323-	
5. Site Land Type (see instructions on page 10)	Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
6. North American Industry Classification System (NAICS) Code(s) for the Site (see instructions on page 10)	A. 486210	B.	
	C.	D.	
7. Site Mailing Address (see instructions on page 11)	Street or P.O. Box: P.O. BOX 1019		
	City, Town, or Village: THOREAU		State: NM
	Country:		Zip Code: 87323-
8. Site Contact Person (see instructions on page 11)	First Name: JOHN	MI: E	Last Name: STEENBERG
	Phone Number: (505) 260-4013 Extension:		Email: john.steenberg@panhandleenergy.com
9. Legal Owner and Operator of the Site (see instructions on pages 11 and 12)	A. Name of Site's Operator: TRANSWESTERN PIPELINE COMPANY		Date Became Operator (mm/dd/yyyy): 01/01/1959
	Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		
	B. Name of Site's Legal Owner: TRANSWESTERN PIPELINE COMPANY		Date Became Owner (mm/dd/yyyy): 01/01/1959
	Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other		

9. Legal Owner (Continued) Address	Street or P.O. Box: 4001 INDIAN SCHOOL RD, NE, SUITE 250
	City, Town, or Village: ALBUQUERQUE
	State: NM Zip Code: 87110- Country:

10. Type of Regulated Waste Activity
 Mark 'X' in the appropriate boxes. Mark "Yes" or "No" for each choice. (See instructions on pages 13 to 16)

A. Hazardous Waste Activities
 Complete all parts for Items 1 through 6.

For Items 2 through 6, check all that apply:

- 1. Generator of Hazardous Waste**
 If "Yes" choose only one of the following - a,b, or c.
- a. LQG: Greater than 1,000 kg/mo (2,200 lbs.) of non-acute hazardous waste; or
 - b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs.) of non-acute hazardous waste; or
 - c. CESQG: Less than 100 kg/mo of non-acute hazardous waste

- 2. Transporter of Hazardous Waste**

- 3. Treater, Storer, or Disposer of Hazardous Waste (at your site)** **Note:**
 A hazardous waste permit is required for this activity

- 4. Recycler of Hazardous Waste (at your site)**
 Note: A hazardous waste permit may be required for this activity.

5. Exempt Boiler and/or Industrial Furnace

- a. Small Quantity On-site Burner Exemption
- b. Smelting, Melting, Refining Furnace Exemption

In addition, indicate other generator activities (check all that apply)

- d. United States Importer of Hazardous Waste
- e. Mixed Waste (hazardous and radioactive) Generator

- 6. Underground Injection Control**

B. Universal Waste Activities

1. Large Quantity Handler of Universal Waste (accumulate 5,000 KG or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. (check all boxes that apply)

	<u>Generated</u>	<u>Accumulated</u>
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other _____	<input type="checkbox"/>	<input type="checkbox"/>

- 2. Destination Facility for Universal Waste**
 Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities - Mark all boxes that apply

- 1. Used Oil Transporter**
 If "Yes", mark each that applies.
- a. Transporter
 - b. Transfer Facility

- 2. Used Oil Processor and/or Re-refiner -**
 If "Yes", mark each that applies.
- a. Processor
 - b. Re-refiner

- 3. Off-Specification Used Oil Burner**

- 4. Used Oil Fuel Marketer**
 If "Yes", mark each that applies.
- a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
 - b. Marketer Who First Claims the Used Oil Meets the Specifications

