

## Stephanie Ross

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**From:** Stephanie Ross  
**Sent:** Tuesday, April 26, 2022 2:05 PM  
**To:** Mark Meyer; Alfonzie "Al" Stepney; Carolyn Maus; Joanne Chavali; Robert Hunter; John Walker; Liam Lin  
**Subject:** Courtesy Notification - OP-DEL entry  
**Attachments:** 20220314-01OPDEL.pdf

The attached has been entered and changed one or more of your projects. It will be filed in WCC separately, just wanted to give you a heads up.

Thank you,  
Stephanie

## Stephanie Ross

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**From:** Santamaria, Beatriz <besantamaria@eprod.com>  
**Sent:** Tuesday, April 26, 2022 1:57 PM  
**To:** Stephanie Ross; Karanjekar, Richa  
**Cc:** Kulkarni, Pranav  
**Subject:** RE: OP-DEL for Rodney Sartor

Stephanie,

That sites is not an Enterprise site. Do you need the replacement page for the OP-DEL?

Thanks,  
Beatriz  
O: 713-381-4308  
M: 713-859-3754

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**From:** Stephanie Ross <Stephanie.Ross@tceq.texas.gov>  
**Sent:** Tuesday, April 26, 2022 1:40 PM  
**To:** Santamaria, Beatriz <besantamaria@eprod.com>  
**Subject:** [EXTERNAL] OP-DEL for Rodney Sartor

[Use caution with links/attachments]

Good afternoon,

I'm finishing all the updates and got to permit 3302 (last permit listed). Graham Bacon is not the RO for this permit, so I can't add Rodney. If you have to OP-CRO2 making him the RO I can enter it. If not, we'll need a new OP-DEL form with current RO "MR RICHARD OCONNOR" as the signer.

Thanks!  
Stephanie

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This message (including any attachments) is confidential and intended for a specific individual and purpose. If you are not the intended recipient, please notify the sender immediately and delete this message.

## Stephanie Ross

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**From:** Santamaria, Beatriz <besantamaria@eprod.com>  
**Sent:** Wednesday, March 23, 2022 10:26 AM  
**To:** Stephanie Ross  
**Cc:** Kulkarni, Pranav  
**Subject:** Updated OP-DEL  
**Attachments:** SKM\_C65922032216020.pdf

Stephanie,

I discussed with management and we agreed to remove Shiver Nolan and Jeffrey Gruber as DARs. Attached is the updated OP-DEL page, is this what you need?

Thanks,

Beatriz Santamaria, P.E.  
Senior Environmental Engineer



1100 Louisiana St  
Houston, TX 77002  
Office: 713-381-4308  
Cellphone: 713-859-3754

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ENTERPRISE PRODUCTS PARTNERS L.P.  
ENTERPRISE PRODUCTS HOLDINGS LLC  
(General Partner)

ENTERPRISE PRODUCTS OPERATING LLC

March 7, 2022

7021 1970 0001 0861 6652  
Return Receipt Requested

Texas Commission on Environmental Quality  
Air Permits Initial Review Team (APIRIT), MC 161  
12100 Park 35 Circle, Building C, Third Floor  
Austin, Texas 78711-3087

**Re: Delegation of Authority**

Sir or Madam:

Enterprise is submitting the attached OP-DEL form to authorize Rodney Sartor as the DAR for the facilities it owns and operates in Texas. A complete list of the facilities is provided in the attached form.

Should you have questions, please contact me at (713) 381-4308 or by email at [besantamaria@eprod.com](mailto:besantamaria@eprod.com) or Pranav Kulkarni at (713) 381-5830.

Thank you,

A handwritten signature in blue ink, appearing to read 'Beatriz'.

Beatriz Santamaria, P.E.  
Senior Engineer, Environmental

A handwritten signature in blue ink, appearing to read 'Pranav'.

Pranav Kulkarni  
Manager, Environmental Permitting

/bjm  
Attachments

cc: Environmental Protection Agency, Region 6

**Texas Commission on Environmental Quality**  
**Form OP-DEL**  
**Delegation of Responsible Official Information**  
**Federal Operating Permit Program**

A Responsible Official (RO) may choose to delegate signature authority to a Duly Authorized Representative (DAR). Such delegation may be made to an individual that has responsibility for the overall operation of one or more manufacturing, production, or operating facilities applying for, or subject to, a federal operating permit. **Send this completed form to the TCEQ Central Office to the attention of the Air Permits Division.** Signature stamps can be accepted in place of an original signature. Faxes, photocopies, and electronic submittals can be accepted in place of an original Form OP-DEL; however, a follow-up submittal of the original Form OP-DEL is requested

|                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                   |                                          |                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------|----------------------|
| <b>I. Identifying Information</b>                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                   |                                          |                      |
| Account No.: CI0006V                                                                                                                                                                                                                                                                                                                                                                                                   | RN: 102984911                                                                     | CN: 603211277                            |                      |
| Permit No.: 4269                                                                                                                                                                                                                                                                                                                                                                                                       | Area Name: East Storage/ Splitter III Facility and East Product Handling Terminal |                                          |                      |
| Company Name: Enterprise Product Operating LLC                                                                                                                                                                                                                                                                                                                                                                         |                                                                                   |                                          |                      |
| <b>II. Duly Authorized Representative Information</b>                                                                                                                                                                                                                                                                                                                                                                  |                                                                                   |                                          |                      |
| Action Type: <input checked="" type="checkbox"/> New DAR Identification <input type="checkbox"/> Administrative Information Change                                                                                                                                                                                                                                                                                     |                                                                                   |                                          |                      |
| Conventional Title: ( <input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.)                                                                                                                                                                                                                                                                 |                                                                                   |                                          |                      |
| Name: Rodney Sartor                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                   |                                          |                      |
| Title: Senior Director, Environmental                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                   | Delegation Effective Date: March 2, 2022 |                      |
| Telephone No.: (713) 381-6595                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                   | Fax No.: (281) 887-8086                  |                      |
| Company Name: Enterprise Product Operating LLC                                                                                                                                                                                                                                                                                                                                                                         |                                                                                   |                                          |                      |
| Mailing Address: P. O. Box 4324/ ENV                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                   |                                          |                      |
| City: Houston                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                   | State: TX                                | ZIP Code: 77210-4324 |
| E-mail Address: environmental@eprod.com                                                                                                                                                                                                                                                                                                                                                                                |                                                                                   |                                          |                      |
| <b>III. Certification of Truth, Accuracy, and Completeness</b>                                                                                                                                                                                                                                                                                                                                                         |                                                                                   |                                          |                      |
| I, <u>Graham Bacon</u> , certify that, based on<br><i>(Name printed or typed: RO for New DAR Identification; RO or DAR for Administrative Information Change)</i><br>information and belief formed after reasonable inquiry, the statements, and information stated above are true, accurate, and complete. <i>(RO signature required for New DAR Identification only; DAR signature required for any Action Type)</i> |                                                                                   |                                          |                      |
| Responsible Official Signature:                                                                                                                                                                                                                                                                                                     |                                                                                   | Date: <u>3/10/22</u>                     |                      |
| Duly Authorized Representative Signature:                                                                                                                                                                                                                                                                                           |                                                                                   | Date: <u>3/7/22</u>                      |                      |
| <b>IV. Removal of Duly Authorized Representative(s)</b>                                                                                                                                                                                                                                                                                                                                                                |                                                                                   |                                          |                      |
| The following should be removed as Duly Authorized Representative(s):                                                                                                                                                                                                                                                                                                                                                  |                                                                                   |                                          |                      |
| <u>Ivan W. Zirbes, Shiver Nolan Jeffrey Gruber 60</u><br><i>(Name(s) printed or typed)</i>                                                                                                                                                                                                                                                                                                                             |                                                                                   | Effective Date: <u>March 2, 2022</u>     |                      |
| Responsible Official Signature:                                                                                                                                                                                                                                                                                                     |                                                                                   | Date: <u>3/10/22</u>                     |                      |

**Texas Commission on Environmental Quality**  
**Form OP-DEL**  
**Delegation of Responsible Official Information**  
**Federal Operating Permit Program**

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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                   |                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------|
| <b>I. Identifying Information</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                   |                                      |
| Account No.: CI0006V                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | RN: 102984911                                                                     | CN: 603211277                        |
| Permit No.: 4269 <b>33458</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Area Name: East Storage/ Splitter III Facility and East Product Handling Terminal |                                      |
| Company Name: Enterprise Product Operating LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                   |                                      |
| <b>II. Duly Authorized Representative Information</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                   |                                      |
| Action Type: <input checked="" type="checkbox"/> New DAR Identification <input type="checkbox"/> Administrative Information Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                   |                                      |
| Conventional Title: ( <input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                   |                                      |
| Name: Rodney Sartor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                   |                                      |
| Title: Senior Director, Environmental                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Delegation Effective Date: March 2, 2022                                          |                                      |
| Telephone No.: (713) 381-6595                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Fax No.: (281) 887-8086                                                           |                                      |
| Company Name: Enterprise Product Operating LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                   |                                      |
| Mailing Address: P. O. Box 4324/ ENV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                   |                                      |
| City: Houston                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | State: TX                                                                         | ZIP Code: 77210-4324                 |
| E-mail Address: environmental@eprod.com                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                   |                                      |
| <b>III. Certification of Truth, Accuracy, and Completeness</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                   |                                      |
| I, <u>Graham Bacon</u> , certify that, based on<br><i>(Name printed or typed: RO for New DAR Identification; RO or DAR for Administrative Information Change)</i><br>information and belief formed after reasonable inquiry, the statements, and information stated above are true, accurate, and complete. <i>(RO signature required for New DAR Identification only; DAR signature required for any Action Type)</i><br>Responsible Official Signature: <u></u> Date: <u>3/10/22</u><br>Duly Authorized Representative Signature: <u></u> Date: <u>3/7/22</u> |                                                                                   |                                      |
| <b>IV. Removal of Duly Authorized Representative(s)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                   |                                      |
| The following should be removed as Duly Authorized Representative(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                   |                                      |
| <u>Ivan W. Zirbes</u><br><i>(Name(s) printed or typed)</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                   | Effective Date: <u>March 2, 2022</u> |
| Responsible Official Signature: <u></u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                   | Date: <u>3/10/22</u>                 |

**Texas Commission on Environmental Quality**  
**Form OP-DEL**  
**Delegation of Responsible Official Information**  
**Federal Operating Permit Program**  
**(Extension)**

| <b>V. Additional Identifying Information</b> |                                                               |               |
|----------------------------------------------|---------------------------------------------------------------|---------------|
| Account No.: HG0714Q                         | RN: 100210665                                                 | CN: 603211277 |
| Permit No.: 1339 <b>33459</b>                | Area Name: Morgan's Point Complex                             |               |
| Account No.: HX0055V                         | RN: 102528197                                                 | CN: 603211277 |
| Permit No.: 1429 <b>32739 (Mark Meyer)</b>   | Area Name: Pasadena Plant                                     |               |
| Account No.: CI0008R                         | RN: 102323268                                                 | CN: 603211277 |
| Permit No.: 1641 <b>33460</b>                | Area Name: Mont Belvieu Complex                               |               |
| Account No.: CI0008R                         | RN: 102323268                                                 | CN: 603211277 |
| Permit No.: 3557 <b>33461</b>                | Area Name: Eagleford Fractionation Units                      |               |
| Account No.: CI0008R                         | RN: 102323268                                                 | CN: 603211277 |
| Permit No.: 4004 <b>33462</b>                | Area Name: Propane Dehydrogenation Unit                       |               |
| Account No.: CI0008R                         | RN: 102323268                                                 | CN: 603211277 |
| Permit No.: 4035 <b>33463</b>                | Area Name: Fractionation Unit IX                              |               |
| Account No.: CI0008R                         | RN: 102323268                                                 | CN: 603211277 |
| Permit No.: 4187 <b>33464</b>                | Area Name: iBDH                                               |               |
| Account No.: HG0531D                         | RN: 100224740                                                 | CN: 603211277 |
| Permit No.: 1043 <b>32144 (AI)</b>           | Area Name: Houston Terminal                                   |               |
| Account No.: HX1182G                         | RN: 102580834                                                 | CN: 603211277 |
| Permit No.: 3835 <b>33465</b>                | Area Name: EPLOP Houston Ship Channel Marine Loading Facility |               |
| Account No.: HGA137G                         | RN: 106128457                                                 | CN: 603211277 |
| Permit No.: 4260 <b>31213 (AI)</b>           | Area Name: Appelt Terminal                                    |               |
| Account No.: JE0098U                         | RN: 100228717                                                 | CN: 603684408 |
| Permit No.: 1804 <b>33466</b>                | Area Name: Beaumont Marine West Terminal                      |               |
| Account No.: JE0098U                         | RN: 100228717                                                 | CN: 603684408 |
| Permit No.: 3648 <b>32503 (Carolyn Maus)</b> | Area Name: Beaumont Terminal                                  |               |
| Account No.: JE0098U                         | RN: 100228717                                                 | CN: 603684408 |
| Permit No.: 4023 <b>33467</b>                | Area Name: Beaumont Marine East Terminal                      |               |

**Texas Commission on Environmental Quality**

**Form OP-DEL**  
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**(Extension)**

| <b>V. Additional Identifying Information</b> |                                             |               |
|----------------------------------------------|---------------------------------------------|---------------|
| Account No.: GB0006H                         | RN: 102560182                               | CN: 603272592 |
| Permit No.: 4258 <b>33468</b>                | Area Name: Seaway Texas City Station        |               |
| Account No.: HGA142L                         | RN: 106070816                               | CN: 603272592 |
| Permit No.: 4261 <b>33469</b>                | Area Name: Enterprise Crude Houston Station |               |
| Account No.: DG0009U                         | RN: 100220078                               | CN: 602718553 |
| Permit No.: 3184 <b>33470</b>                | Area Name: Armstrong Gas Plant              |               |
| Account No.: WE0007C                         | RN: 100210079                               | CN: 602718553 |
| Permit No.: 3229 <b>33237 (Joanne C)</b>     | Area Name: Shilling Gas Plant               |               |
| Account No.: NE0165I                         | RN: 100210277                               | CN: 602718553 |
| Permit No.: 3321 <b>33471</b>                | Area Name: Shoup Gas Plant                  |               |
| Account No.: HN0204S                         | RN: 100209493                               | CN: 602718553 |
| Permit No.: 3384 <b>31835 (Robert H)</b>     | Area Name: Gilmore Gas Plant                |               |
| Account No.: BG0064A                         | RN: 100668573                               | CN: 602718553 |
| Permit No.: 3508 <b>33472</b>                | Area Name: San Martin Gas Plant             |               |
| Account No.: SQ0014C                         | RN: 100210624                               | CN: 602718553 |
| Permit No.: 3509 <b>33473</b>                | Area Name: Sonora Gas Plant                 |               |
| Account No.: JF0016O                         | RN: 100209709                               | CN: 602718553 |
| Permit No.: 3510 <b>33475</b>                | Area Name: Thompsonville Gas Plant          |               |
| Account No.: LEA005E                         | RN: 106059777                               | CN: 602718553 |
| Permit No.: 3521 <b>33476</b>                | Area Name: Yoakum Cryogenic Plant           |               |
| Account No.: SQ0031C                         | RN: 102569068                               | CN: 603211277 |
| Permit No.: 3050 <b>33477</b>                | Area Name: Sonora CS                        |               |
| Account No.: BB0005C                         | RN: 101630481                               | CN: 603211277 |
| Permit No.: 3096 <b>33478</b>                | Area Name: Bandera CS                       |               |
| Account No.: PE0118G                         | RN: 102526761                               | CN: 603211277 |
| Permit No.: 3137 <b>33478</b>                | Area Name: Waha CS                          |               |

**Form OP-DEL**  
**Delegation of Responsible Official Information**  
**Federal Operating Permit Program**  
**(Extension)**

| <b>V. Additional Identifying Information</b> |                                     |               |
|----------------------------------------------|-------------------------------------|---------------|
| Account No.: PE0127F                         | RN: 102556396                       | CN:603211277  |
| Permit No.: 3140 <b>33483</b>                | Area Name: Grey Ranch CS            |               |
| Account No.: MH0036E                         | RN: 100228352                       | CN: 603211277 |
| Permit No.: 3144 <b>32351 (John W)</b>       | Area Name: CS 809                   |               |
| Account No.: DGA011K                         | RN: 106038946                       | CN:603211277  |
| Permit No.: 3433 <b>33484</b>                | Area Name: Area 72 CGP              |               |
| Account No.: WE0071Q                         | RN: 102172996                       | CN:603211277  |
| Permit No.: 3434 <b>32974 (Wei L)</b>        | Area Name: Freer 44 CS              |               |
| Account No.: KAA005E                         | RN: 106005432                       | CN:603211277  |
| Permit No.: 3464 <b>33485</b>                | Area Name: Area 71 CGP              |               |
| Account No.: LKA009I                         | RN: 106082886                       | CN:603211277  |
| Permit No.: 3866 <b>33626</b>                | Area Name: Area 31 CGP              |               |
| Account No.: AA0069E                         | RN:103093290                        | CN:603211277  |
| Permit No.: 3495 <b>33627</b>                | Area Name: Bethel CS                |               |
| Account No.: PF0049M                         | RN: 100228998                       | CN:603211277  |
| Permit No.: 3497 <b>33628</b>                | Area Name: Indian Springs Gas Plant |               |
| Account No.: WF0049V                         | RN: 101926822                       | CN:603211277  |
| Permit No.: 3498 <b>32997 (Wei L)</b>        | Area Name: Wilson Storage Station   |               |
| Account No.: HQ0055B                         | RN: 102565850                       | CN:603211277  |
| Permit No.: 3499 <b>33629</b>                | Area Name: Decordova CS             |               |
| Account No.: GE0085V                         | RN: 101931152                       | CN:603211277  |
| Permit No.: 3502 <b>33630</b>                | Area Name: Garden City CS           |               |
| Account No.: CY0263R                         | RN: 101973360                       | CN:603211277  |
| Permit No.:3503 <b>33569</b>                 | Area Name: Crane CS                 |               |

**Form OP-DEL**  
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**(Extension)**

| <b>V. Additional Identifying Information</b>   |                                                  |               |
|------------------------------------------------|--------------------------------------------------|---------------|
| Account No.: ND0072E                           | RN: 101984680                                    | CN:603211277  |
| Permit No.: 3504 <b>33631</b>                  | Area Name: Sweetwater CS                         |               |
| Account No.: DK0064T                           | RN: 102591302                                    | CN:603211277  |
| Permit No.: 3505 <b>33632</b>                  | Area Name: Hagist Ranch CS                       |               |
| Account No.: EA0081P                           | RN: 101299220                                    | CN:603211277  |
| Permit No.: 3506 <b>33633</b>                  | Area Name: Cisco CS                              |               |
| Account No.: KA0030M                           | RN: 102743788                                    | CN:603211277  |
| Permit No.:3513 <b>33634</b>                   | Area Name: Burnell CS                            |               |
| Account No.: LKA012L                           | RN: 106066046                                    | CN:603211277  |
| Permit No.:3583 <b>33635</b>                   | Area Name: Area 51 CGP                           |               |
| Account No.: DGA079A                           | RN: 108569955                                    | CN:603211277  |
| Permit No.: 3877 <b>33636</b>                  | Area Name: Area 71B CGP                          |               |
| Account No.: PBA020T                           | RN: 105384473                                    | CN:603211277  |
| Permit No.: 4362 <b>33316 (Robert H)</b>       | Area Name: Panola II Gas Plant                   |               |
| Account No.: NAA007G                           | RN: 105948426                                    | CN: 603211277 |
| Permit No.: 3998 <b>33637</b>                  | Area Name: Nacogdoches Amine & Dehydration Plant |               |
| Account No.: RFA033F                           | RN: 109447722                                    | CN: 603211277 |
| Permit No.: 4075 <b>33638</b>                  | Area Name: Orla Gas Plant                        |               |
| Account No.: BL0003Q                           | RN: 102326972                                    | CN: 600413249 |
| Permit No.: 3302 <b>*asked for new form/RO</b> | Area Name: Stratton Ridge Pumping Station        |               |
| Account No.:                                   | RN:                                              | CN:           |
| Permit No.:                                    | Area Name:                                       |               |
| Account No.:                                   | RN:                                              | CN:           |
| Permit No.:                                    | Area Name:                                       |               |