A1:8/280



INDUSTRIAL STORMWATER NOTICE OF INTENT (ISNOI)

FOR COVERAGE UNDER THE INDUSTRIAL STORMWATER GENERAL NPDES PERMIT MSR00

INSTRUCTIONS

Applicant must be the owner or operator (i.e., legal entity that controls the facility's operation, or the plant/site manager, not the environmental consultant). The owner or operator that receives coverage is responsible for permit compliance. File at least 60 days prior to the commencement of the regulated industrial activity.

Submittals with this ISNOI must include a Storm Water Pollution Prevention Plan (SWPPP) with the minimum components found in ACTs 5-8 of the Industrial Stormwater General Permit. In addition, a United States Geological Survey (USGS) quadrangle map (or a copy) showing site location and extending at least 1/2 mile beyond the site's property boundary is required. If a copy is submitted, provide the name of the quadrangle map that is found in the upper right hand corner. Maps can be obtained from the MDEQ, Office of Geology at 601-961-5523.

ALL FORM BLANKS MUST BE COMPLETED (enter "NA" if not applicable)

THE APPLICANT IS: OWNER OPERATOR (PLEASE CHECK ONE OR BOTH)

OWNER INFORMATION		
Owner Contact Name: Jayme Tayor	Position:	President/CEO
Owner Company Name: DOC Energy Services, Inc.		
Owner Street (P.O. Box): 4921Shed Rd. Suite 100		
	te: LA	71111
Owner Phone Number: (318, 560-6655 Owner Email: jtaylor		

OPERATOR INFORMATION (if different than owner)

Operator Contact Name:		Position:	
Operator Company Name:			
Operator Street (P.O. Box):			
Operator City:	State:	Zip:	
Operator Phone Number: ()	Operator Email:		

FACILITY INFORMATION

Facility Name: DOC Energy Services Inc Columbia, MS				
Nature of Business (Include 4-digit Standard Industrial Classification Code (SIC) and description): SIC Code: <u>1 3 8 9</u> Oil and Gas Field Services Not Elsewhere Classified				
Receiving Stream: Unnamed tributary to Balls Mill Creek thence to				
Is receiving stream on MDEQ's 303(d) List?	🗋 Yes 🗌 No			
Has a TMDL been established for the receiving stream segment?	🗌 Yes 🔳 No			
Physical Site Address: <u>481 US HWY 98</u> Street: <u>Columbia</u>				
	Zip:39429			
Latitude: <u>31</u> degrees <u>14</u> minutes <u>8</u> seconds Longitude: <u>89</u> degrees <u>49</u> min	utes <u>41</u> seconds			
Method Used to Determine Lat & Long (GPS of plant entrance) or Map Interpolation):				
Attach a copy of any existing laboratory data for each storm water outfall. If multiple sampling has been performed, provide a summary for each parameter, including sampling dates and the minimum, average and maximum values.				
Is this a SARA Title III, Section 313 facility utilizing water priority chemicals at threshold amounts? 🗌 Yes 🔳 No If yes, please attach a list of water priority chemicals present at the facility.				

DOCUMENTATION OF COMPLIANCE WITH OTHER REGULATIONS/REQUIREMENTS

Is this notice for a facility that will require other permits?	🗌 Yes	No No		
If yes, check which one(s): Air, Hazardous Waste, Individual NPDES, or list Other(s):	Pretreatment,	, 🗌 Water State Operating,		
How will sanitary sewage be collected and treated? Munic	cipal syste	em		
Indicate any local storm water ordinance with which the fac approval.	ility must com	ply and submit any documentation of		
No				
Is treatment of storm water provided at any outfall?	🗌 Yes	🔳 No		
If yes, please describe:				
	·····			
CERTIFICATION				
certify under penalty of law that this document and all attachment accordance with a system designed to assure that qualified personne				

accordance with a system designed to assure that qualified personnel properly gathered and evaluated 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 penaltics for submitting false information, including the possibility of fine and imprisonment for knowing viorations.

Signature' (Must be signed by operator when different than owner)

<u>3-29:22</u> Date Signed

President/CEO Title

Printed Name¹

'This application shall be signed according to the General Permit, ACT 16, T-9, as follows:

- For a corporation, by a responsible corporate officer.
- For a partnership, by a general partner.
- For a sole proprietorship, by the proprietor.
- For a municipal, state or other public facility, by principal executive officer, the mayor, or ranking elected official.

After signing please mail to:

Jayme Taylor

Chief, Environmental Permits Division MS Department of Environmental Quality, Office of Pollution Control P.O. Box 2261 Jackson, MS 39225



March 30, 2022

Chef, Environmental Permits Division MS Department of Environmental Quality, Office of Pollution Control PO Box 2261 Jackson, MS 39225

Re: NOI Submittal for DOC Energy Services, Inc. Columbia, Mississippi ALTEC Project No. SA07430

Dear Sir/Madam:

On behalf of our client, DOC Energy Services, Inc., ALTEC Environmental Consulting, LLC is submitting two (2) copies of the Industrial Stormwater Notice of Intent (ISNOI) and one copy of the required SWPPP.

If you have any questions regarding this matter, please contact me at (318) 687-3771.

Sincerely,

Notors AR

Robert B. Raines, III P.E. Vice President

Cc: Jayme Taylor; President, DOC Energy Ted Houck, HSE Manager, DOC Energy

> RECEIVED MAR 31 2022

Dept. of Environmental Quality