

Registration No.: GCP-1 - _____
FOR AGENCY USE ONLY

**The State of New Mexico**  
**Application for Registration under Air Quality**  
**General Construction Permit for Level One**  
**Oil and Gas Installations (GCP-1)**

**Section 1: General Information:**

1. Owner: \_\_\_\_\_ 2. Date Submitted: \_\_\_\_\_
3. Operator: \_\_\_\_\_
4. Name of the Installation: \_\_\_\_\_
5. Address of the Installation: \_\_\_\_\_
6. Purpose of Installation: \_\_\_\_\_ SIC Code: \_\_\_\_\_  
NAIC Code: \_\_\_\_\_
7. Main Office Address: \_\_\_\_\_  
\_\_\_\_\_ Telephone No.: \_\_\_\_\_
8. Person to contact: \_\_\_\_\_ Title: \_\_\_\_\_  
(Company official who has knowledge of the permit and may be contacted in the future regarding this installation)  
Address: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_
9. Location of the site:  
Section: \_\_\_\_\_ Range: \_\_\_\_\_ Township: \_\_\_\_\_ County: \_\_\_\_\_  
UTM Zone: \_\_\_\_\_ UTMH: \_\_\_\_\_ km UTMV: \_\_\_\_\_ km  
Elevation: \_\_\_\_\_ ft. above mean sea level. Name of nearest town: \_\_\_\_\_  
Approximate location from nearest town (direction and distance): \_\_\_\_\_
10. Is the site located on Indian Land? \_\_\_ Yes \_\_\_ No
11. Is this installation currently permitted under 20 NMAC 2.72? \_\_\_ Yes \_\_\_ No  
If yes, list the permit number: \_\_\_\_\_
12. Will the fuel meet the requirements stipulated in Section II.G. of the GCP-1 Permit? \_\_\_ Yes \_\_\_ No
13. List all NSPSs that are applicable to this source: \_\_\_\_\_
14. List all NESHAPs that are applicable to this source: \_\_\_\_\_
15. Expected startup date: \_\_\_\_\_
16. Attachment checklist:
  - [ ] All emissions calculations (include estimates of HAPs by emission unit if the HAP is > one TPY for unit)
  - [ ] A map such as a USGS 7.5-minute Topographic Quadrangle showing the location of the site
  - [ ] Process flow diagram
  - [ ] Documentation of Public Notice as described in Section I.D.2.b. of the GCP-1 Permit  
(use sample form attached to this application)
  - [ ] Description of actions taken to comply with Section I.D.2.a of the GCP-1 Permit
  - [ ] Corporate Check, Certified check or money order for the permit fee (10 fee points per 20 2.75 NMAC).  
To see the current value of a fee point, go to: <http://www.nmenv.state.nm.us/aqb/forms/Fee-CPI-Adjustment-Method.pdf>.

[ ] Mfg. emissions specifications for all emitting units and dehydrator control equipment

- Initial extended gas analysis, if required
- Calculations for emissions and deration (site rating) of horsepower for engines and/or turbines
- GlyCalc analysis for glycol dehydrator emissions
- Tank emissions calculations using the most current AP-42 Tanks program  
(available for download at <http://www.epa.gov/ttn/chief/software/tanks/index.html>)

**Section 2: Applicability**

**A. Equipment Specifications and Emissions**

<b>Reciprocating Engines and Turbines</b> (Units must meet BOTH the NOx and CO specifications)				<b>(Emissions from Section 4, Equipment Information)</b>			
<b>Hp Equal or More than 800</b>		<b>NOx ≤ 2.0 g/hp-hr</b>	<b>CO ≤ 3.0 g/hp-hr</b>				
Unit No.	Site-Rated Horsepower	Rated NOx	Rated CO	NOx (ton/yr)	CO (ton/yr)	VOC (ton/yr)	Total HAPs (ton/yr)
<b>Hp Less than 800</b>		<b>NOx ≤ 5.0 g/hp-hr</b>	<b>CO ≤ 7.5 g/hp-hr</b>				
Unit No.	Site-Rated Horsepower	Rated NOx	Rated CO	NOx (ton/yr)	CO (ton/yr)	VOC (ton/yr)	Total HAPs (ton/yr)

<b>Other Equipment</b>		<b>(Emissions from Section 4, Equipment Information)</b>					
Unit No.	Unit Type	SO <sub>2</sub> (ton/yr)	H <sub>2</sub> S (ton/yr)	NOx (ton/yr)	CO (ton/yr)	VOC (ton/yr)	Total HAPs (ton/yr)

<b>Installation Total Emissions Qualification Thresholds</b>	<b>SO<sub>2</sub> Variable<sup>1</sup></b>	<b>H<sub>2</sub>S Variable<sup>2</sup></b>	<b>NOx ≤ 95 ton/yr</b>	<b>CO ≤ 95 ton/yr</b>	<b>VOC ≤ 95 ton/yr</b>	<b>Total HAPs ≤ 20 ton/yr<sup>3</sup></b>
<b>Installation Total Emissions</b> (total from all above units)						

<sup>1</sup> SO<sub>2</sub> – Total SO<sub>2</sub> from combustion equipment other than engines, turbines & flares ≤10 TPY; from flares, ≤27 TPY

<sup>2</sup> H<sub>2</sub>S ≤ 0.5 ton/yr for the Permian Basin and H<sub>2</sub>S ≤ 0.05 ton/yr elsewhere in New Mexico

<sup>3</sup> in addition to total HAPs, attach estimates of each HAP by emission unit if the HAP is > one TPY for the unit

**B. Location Restrictions**

Location Restrictions	Distance (miles)	Name or Identify
The distance to the nearest source with Potential to Emit more than 25 TPY of NOx must be >0.5 mile		
The distance to the nearest source with Potential to Emit more than 250 TPY of NOx must be >2.0 miles		
The distance to the nearest state park must be >1.0 mile		
The distance to the nearest Class I area boundary must be >1.5 miles		
The distance to the nearest boundary of any ozone or NO <sub>2</sub> nonattainment area must be >2.0 miles		
The distance to the nearest school, residence, office building or human-occupied structure, excluding the immediate facility complex must be >0.25 miles		
Is there any engine or turbine stack within 825 feet of any terrain that is higher than the top of the given stack?	Yes / No	

**Section 3: Stack Parameters**

				GAS CONDITIONS AT STACK EXIT	
Unit No.	Stack Height, Above Ground (ft)	Stack Inside Exit Diameter (ft)	Orientation of Exit V = vertical H = horizontal	Temperature (°F)	Velocity (ft/sec)

**Section 4: Equipment Information**

4a. Reciprocating Engines and Turbines						Emission Rates Based on 8760 hr/yr of Operation <sup>(1)</sup>			
Unit No.	Type of Unit	Manufacturer and Model No.	Serial No. (if available)	Nameplate Hp/ Site Hp <sup>1</sup>	Nameplate RPM/ Actual RPM <sup>1</sup>	NOx (lb/hr) (ton/yr)	CO (lb/hr) (ton/yr)	VOC (lb/hr) (ton/yr)	Total HAPs <sup>(2)</sup> (lb/hr) (ton/yr)

<sup>(1)</sup> Attach documentation of calculations used to determine site horsepower (adhering to NMED deration policy) and reasons for operation at any less than nameplate RPM

<sup>(2)</sup> Attach documentation of all individual HAP emissions

4b. Other Equipment (reboilers, separators, heaters, loading stations)				Emission Rates Based on 8760 hr/yr of Operation <sup>(1)</sup>					
Unit No.	Manufacturer and Model No.	Type of Unit	Unit Size or Capacity	SO <sub>2</sub> (lb/hr) (ton/yr)	H <sub>2</sub> S (lb/hr) (ton/yr)	NOx (lb/hr) (ton/yr)	CO (lb/hr) (ton/yr)	VOC (lb/hr) (ton/yr)	Total HAPs <sup>(2)</sup> (lb/hr) (ton/yr)

<sup>(1)</sup> Attach documentation of calculations used to determine emissions

<sup>(2)</sup> Attach documentation of all individual HAP emissions

4c. Tanks													Emission Rates <sup>(1)</sup>
Unit No.	Type of Liquid Stored	Vapor Molecular Weight (lb/lb-mole)	Type of Tank And Vapor Control (if any)	Tank Seal Type <sup>(2)</sup>	True Vapor Pressure (psia)	Storage Capacity (barrels)	Throughput (barrels/day)	Inside Diameter (ft)	Height (ft)	Maximum Liquid Temperature	Vent Height (ft)	Date of Manufacture (mo/yr)	VOC (lb/hr) (ton/yr)

(1) Attach documentation of calculations used to determine emissions

(2) See Attachment 2: Tank Construction and Rim Seal Systems and Enter Appropriate Number/Letter

4d. Glycol Dehydrators					Control Equipment				Emission Rates <sup>(1)</sup>	
Unit No.	Manufacturer and Model No.	Type of Glycol	Max Design / Actual Site Glycol Pump Circulation Rate (gal/min)	Throughput (MMscf/day)	Type	Manufacturer And Model No.	Specified Operating Temperature (if applicable)	Efficiency	VOC (lb/hr) (ton/yr)	Total HAPs <sup>(2)</sup> (lb/hr) (ton/yr)

(1) Attach GlyCalc analysis used to determine emissions and dehydrator extended gas analysis

(2) Attach documentation of all individual HAP emissions

**COMPANY NAME** \_\_\_\_\_

**SECTION 5: CERTIFICATION:**

I, \_\_\_\_\_, being duly sworn, hereby certify that the information and data submitted in this application are true and as accurate, to the best of my personal knowledge and professional expertise and experience.

[If Applicable] I have a current permit for this installation under 20 NMAC 2.72, Permit No. \_\_\_\_\_. I agree that, if the Department grants registration for this Installation under this General Construction Permit Level One (GCP-1), the Department will cancel my current permit.

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**PRINTED NAME**

\_\_\_\_\_  
**TITLE**

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

My authorization as a Notary of the State of \_\_\_\_\_ expires on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
**NOTARY'S SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**NOTARY'S PRINTED NAME**