



DEPARTMENT OF THE AIR FORCE
27TH SPECIAL OPERATIONS WING (AFSOC)
CANNON AIR FORCE BASE NEW MEXICO

ENTERED



Colonel Albert M. Elton II
Commander
100 Air Commando Way Suite 100
Cannon AFB NM 88103-5214

Mr. Daniel Comeau
Hazardous Waste Bureau
New Mexico Environment Department
2905 Rodeo Park Drive East Bldg. 1
Santa Fe NM 87505-6063

Dear Mr. Comeau

The Cannon Air Force Base (AFB) Resource Conservation Recovery Act (RCRA) Hazardous Waste Permit is subject to renewal per 40 CFR 270 in 2013; Permit #NM7572124454. Please see the attachment for the "RCRA Hazardous Waste Permit Part A&B Application Cannon AFB". If you have any questions regarding this submittal, please contact Mr. Ronald Lancaster, Chief, Installation Management at (575) 784-1146.


Sincerely

ALBERT M. ELTON II, Colonel, USAF

cc:

Environmental Protection Agency, Region VI, Ms. Wendy Jacques w/o Attachment

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

For EPA Regional Use Only		 United States Environmental Protection Agency Washington, DC 20460 <h2 style="margin:0;">Hazardous Waste Permit Application Part A</h2> <p style="font-size:small; margin:0;">(Read the Instructions before starting)</p>																													
		Date Received																													
		Month	Day	Year																											
I. Facility's EPA ID Number (Mark 'X' in the appropriate box)																															
<input type="checkbox"/> A. First Part A Submission				<input type="checkbox"/> B. Part A Amendment # _____																											
C. Facility's EPA ID Number				D. Secondary ID Number (If applicable)																											
N	M	7	5	7	2	1	2																								
II. Name of Facility																															
C	A	N	N	O	N	A	I	R	F	O	R	C	E	B	A	S	E														
III. Facility Location (Physical address not P.O. Box or Route Number)																															
A. Street																															
2	7	S	O	C	E	S	/	C	E	I	E																				
Street (Continued)																															
5	0	6	A	I	R	C	O	M	M	A	N	D	O	W	A	Y															
City or Town						State		Zip Code																							
C	A	N	N	O	N	A	F	B	N	M	8	8	1	0	3	-	5	1	0	8											
County Code		County Name																													
(FIPS424)																															
0	3	5	C	U	R	R	Y																								
B. Land Type		C. Geographic Location						D. Facility Existence Date																							
(Enter code)		LATITUDE (Degrees, minutes, & seconds)			LONGITUDE (Degrees, minutes & seconds)			Month		Day		Year																			
F		3	4	2	3	4	6	1	0	3	1	8	3	0	0	1	0	1	1	9	6	7									
IV. Facility Mailing Address																															
Street or P.O. Box																															
S								A								M								E							
City or Town						State		Zip Code																							
								-																							
V. Facility Contact (Person to be contacted regarding waste activities at facility)																															
Name (Last)				(First)																											
E	L	T	O	N	I	I		A	L	B	E	R	T	M.																	
Job Title				Phone Number (Area Code and Number)																											
2	7	S	O	W	C	O	M	M	A	N	D	E	R	5	7	5	-	7	8	4	-	2	7	2	7						
VI. Facility Contact Address (See instructions)																															
A. Contact Address		B. Street or P.O. Box																													
Location Mailing Other																															
<input checked="" type="checkbox"/>		S						A						M						E											
City or Town						State		Zip Code																							
								-																							

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EPA ID Number (Enter from page 1)	Secondary ID Number (Enter from page 1)
N M 7 5 7 2 1 2 4 4 5 4	

VII. Operator Information (See instructions)

Name of Operator											
2 7 T H S P E C I A L O P E R A T I O N S W I N G											
Street or P.O. Box											
1 0 0 S A I R C O M M A N D O W A Y S T E 1 0 0											
City or Town								State		ZIP Code	
C A N N O N A F B								N M		8 8 1 0 3 - 5 2 1 4	

Phone Number (Area Code and Number)	B. Operator Type	C. Change of Operator Indicator	Date Changed		
5 7 5 - 7 8 4 - 2 7 2 7	F	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Month	Day	Year

VIII. Facility Owner (See instructions)

A. Name of Facility's Legal Owner											
2 7 S O W / C C											
Street or P.O. Box											
1 0 0 S A I R C O M M A N D O W A Y											
City or Town								State		ZIP Code	
C A N N O N A F B								N M		8 8 1 0 3 - 5 2 1 4	

Phone Number (Area Code and Number)	B. Owner Type	C. Change of Owner Indicator	Date Changed		
5 7 5 - 7 8 4 - 2 7 2 7	F	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Month	Day	Year

IX. NAICS Codes (in order of significance; start in left box)

First	Third
9 7 1 1	
(Description) NATIONAL DEFENSE	(Description)
Second	Fourth
4 5 2 2	
(Description) AIR TRANSPORTATION, NON SCHEDULED	(Description)

X. Other Environmental Permits (See instructions)

A. Permit Type (Enter code)	B. Permit Number	C. Description
N	D P - 8 7 3	GROUND WATER DISCHARGE PERMIT
E	1 5 1 7 - M 4 R 1	AIR QUALITY PERMIT
N	N M 0 0 3 0 2 3 6	WASTEWATER NPDES PERMIT

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EPA ID Number (Enter from page 1)	Secondary ID Number (Enter from page 1)																								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:12.5%;">N</td><td style="width:12.5%;">M</td><td style="width:12.5%;">7</td><td style="width:12.5%;">5</td><td style="width:12.5%;">7</td><td style="width:12.5%;">2</td><td style="width:12.5%;">1</td><td style="width:12.5%;">2</td><td style="width:12.5%;">4</td><td style="width:12.5%;">4</td><td style="width:12.5%;">5</td><td style="width:12.5%;">4</td> </tr> </table>	N	M	7	5	7	2	1	2	4	4	5	4	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:12.5%; height: 20px;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td><td style="width:12.5%;"></td> </tr> </table>												
N	M	7	5	7	2	1	2	4	4	5	4														

XI. Nature of Business (Provide a brief description)

Plan and execute specialized and contingency operations using advanced aircraft, tactics, and air refueling techniques to infiltrate, exfiltrate, and resupply special operations forces and provide intelligence, surveillance and reconnaissance, and close air support in support of SOF operations.

XII. Process Codes and Design Capacities

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Thirteen lines are provided for entering codes. If more lines are needed, attach a separate sheet of paper with the additional information. For "other" processes (i.e., D99, S99, T04 and X99), describe the process (including its design capacity) in the space provided in item XIII.

B. PROCESS DESIGN CAPACITY - For each code entered in column A, enter the capacity of the process.

- AMOUNT** - Enter the amount. In a case where design capacity is not applicable (such as in a closure/post-closure or enforcement action) enter the total amount of waste for that process.
- UNIT OF MEASURE** - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS			APPROPRIATE UNITS OF MEASURE FOR PROCESS	PROCESS			APPROPRIATE UNITS OF MEASURE FOR PROCESS		
CODE	PROCESS	DESIGN CAPACITY		CODE	PROCESS	DESIGN CAPACITY			
<u>Disposal:</u>									
D79	Underground Injection Well Disposal	Gallons; Liters; Gallons Per Day; or Liters Per Day	}	T81	Cement Kiln	}	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; Btu Per Hour; Liters Per Hour; Kilograms Per Hour; or Million Btu Per Hour		
D80	Landfill	Acre-feet; Hectare-meter; Acres; Cubic Meters; Hectares; Cubic Yards		T82	Lime Kiln				
D81	Land Application	Acres or Hectares		T83	Aggregate Kiln				
D82	Ocean Disposal	Gallons Per Day or Liters Per Day		T84	Phosphate Kiln				
D83	Surface Impoundment Disposal	Gallons; Liters; Cubic Meters; or Cubic Yards		T85	Coke Oven				
D99	Other Storage	Any Unit of Measure Listed Below		T86	Blast Furnace				
<u>Storage:</u>									
S01	Container	Gallons; Liters; Cubic Meters; or Cubic Yards		T87	Smelting, Melting, Or Refining Furnace			}	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; Btu Per Hour; Gallons Per Hour; Liters Per Hour; or Million Btu Per Hour
S02	Tank Storage	Gallons; Liters; Cubic Meters; or Cubic Yards		T88	Titanium Dioxide Chloride Oxidation Reactor				
S03	Waste Pile	Cubic Yards or Cubic Meters		T89	Methane Reforming Furnace				
S04	Surface Impoundment Storage	Gallons; Liters; Cubic Meters; or Cubic Yards	T90	Pulping Liquor Recovery Furnace					
S05	Drip Pad	Gallons; Liters; Acres; Cubic Meters; Hectares; or Cubic Yards	T91	Combustion Device Used In The Recovery Of Sulfur Values From Spent Sulfuric Acid					
S06	Containment Building Storage	Cubic Yards or Cubic Meters	T92	Halogen Acid Furnaces					
S99	Other Disposal	Any Unit of Measure Listed Below	T93	Other Industrial Furnaces Listed in 40 CFR §260.10					
<u>Treatment:</u>									
T01	Tank Treatment	Gallons Per Day; Liters Per Day; Short Tons Per Hour; Gallons Per Hour; Liters Per Hour; Pounds Per Hour; Short Tons Per Day; Kilograms Per Hour; Metric Tons Per Day; or Metric Tons Per Hour	T94	Containment Building - Treatment	}	Cubic Yards; Cubic Meters; Short Tons Per Hour; Gallons Per Hour; Liters Per Hour; Btu Per Hour; Pounds Per Hour; Short Tons Per Day; Kilograms Per Hour; Metric Tons Per Day; Gallons Per Day; Liters Per Day; Metric Tons Per Hour; or Million Btu Per Hour			
T02	Surface Impoundment Treatment	Gallons Per Day; Liters Per Day; Short Tons Per Hour; Gallons Per Hour; Liters Per Hour; Pounds Per Hour; Short Tons Per Day; Kilograms Per Hour; Metric Tons Per Day; or Metric Tons Per Hour	<u>Miscellaneous (Subpart X):</u>						
T03	Incinerator	Short Tons Per Hour; Metric Tons Per Hour; Gallons Per Hour; Liters Per Hour; Btu Per Hour; Pounds Per Hour; Short Tons Per Day; Kilograms Per Hour; Gallons Per Day; Liters Per Day; Metric Tons Per Hour; or Million Btu Per Hour	X01	Open Burning/Open Detonation			}	Any Unit of Measure Listed Below	
T04	Other Treatment	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Short Tons Per Day; Btu Per Hour; Gallons Per Day; Liters Per Hour; or Million Btu Per Hour	X02	Mechanical Processing					
T80	Boiler	Gallons; Liters; Gallons Per Hour; Liters Per Hour; Btu Per Hour; or Million Btu Per Hour	X03	Thermal Unit					
			X04	Geologic Repository					
			X99	Other Subpart X					

UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
Short Tons Per Hour	D	Cubic Yards	Y	Gallons	G
Metric Tons Per Hour	W	Cubic Meters	C	Gallons Per Hour	E
Short Tons Per Day	N	Acres	B	Gallons Per Day	U
Metric Tons Per Day	S	Acre-feet	A	Liters	L
Pounds Per Hour	J	Hectares	Q	Liters Per Hour	H
Kilograms Per Hour	R	Hectare-meter	F	Liters Per Day	V
Million Btu Per Hour	X	Btu Per Hour	I		

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EPA ID Number (Enter from page 1)	Secondary ID Number (Enter from page 1)
N M 7 5 7 2 1 2 4 4 5 4	

XII. Process Codes and Design Capabilities (Continued)

EXAMPLE FOR COMPLETING ITEM XII (shown in line number X-1 below): A facility has a storage tank, that can hold 533.788 gallons.

Line Number	A. Process Code (From list above)	B. PROCESS DESIGN CAPACITY		C. Process Total Number Of Units	For Official Use Only
		1. Amount (Specify)	2. Unit Of Measure (Enter code)		
X 1	S 0 2	5 3 3 . 7 8 8	G	0 0 1	
1					
2					
3					
4					
5					
6					
7					
8					
9					
1 0					
1 1					
1 2					
1 3					

NOTE: If you need to list more than 13 process codes, attach an additional sheet(s) with the information in the same format as above. Number the lines sequentially; taking into account any lines that will be used for "other" processes (i.e., D99, S99, T04 and X99) in item XIII.

XIII. Other Processes (Follow instructions from item XII for D99, S99, T04 and X99 process codes)					
Line Number (Enter #s in seg w/XII)	A. Process Code (From list above)	B. PROCESS DESIGN CAPACITY		C. Process Total Number Of Units	D. Description Of Process
		1. Amount (Specify)	2. Unit Of Measure (Enter code)		
1		N/A			
2					
3					
4					

EPA ID Number (Enter from page 1)										Secondary ID Number (Enter from page 1)											
N	M	7	5	7	2	1	2	4	4	5	4										

XIV. Description of Hazardous Wastes

- A. EPA HAZARDOUS WASTE NUMBER - Enter the four-digit number from 40 CFR, Part 261 Subpart D of each listed hazardous waste you will handle. For hazardous wastes that are not listed in 40 CFR, Part 261 Subpart D, enter the four-digit number(s) from 40 CFR, Part 261 Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.
- B. ESTIMATED ANNUAL QUANTITY - For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled that possess that characteristic or contaminant.
- C. UNIT OF MEASURE - For each quantity entered in column B enter the unit of measure code. Units of measure that must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in item XII A. on page 3 to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in item XII A. on page 3 to indicate all the processes that will be used to store, treat, and/ or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

NOTE: THREE SPACES ARE PROVIDED FOR ENTERING PROCESS CODES. IF MORE ARE NEEDED:

- 1. Enter the first two as described above.
- 2. Enter "000" in the extreme right box of item XIV-D(1).
- 3. Use additional sheet, enter line number from previous sheet, and enter additional code(s) in item XIV-E.

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form (D.(2)).

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER - Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- 1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
- 2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
- 3. Repeat step 2 for each EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM XIV (shown in line numbers X-1, X-2, X-3, and X-4 below) - A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

Line Number	A. EPA HAZARD WASTE NO. (Enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (Enter code)	D. PROCESS	
				(1) PROCESS CODES (Enter)	(2) PROCESS DESCRIPTION (If a code is not entered in D(1))
X 1	K 0 5 4	900	p	T 0 3 D 8 0	
X 2	D 0 0 2	400	P	T 0 3 D 8 0	
X 3	D 0 0 1	100	P	T 0 3 D 8 0	
X 4	D 0 0 2				Included With Above

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EPA ID Number (Enter from page 1) NM7572124454	Secondary ID Number (Enter from page 1)
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XIV. Description of Hazardous Wastes (Continued; use additional sheets as necessary)

Line Number	A. EPA Hazardous Waste No. (Enter code)	B. Estimated Annual Quantity of Waste	C. Unit of Measure (Enter code)	D. PROCESSES																	
				(1) PROCESS CODES (Enter code)					(2) PROCESS DESCRIPTION (If a code is not entered in D(1))												
1																					
2																					
3																					
4																					
5																					
6																					
7																					
8																					
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10																					
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N	M	7	5	7	2	1	2	4	4	5	4														

XV. Map

Attach to this application a topographic map, or other equivalent map, of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in this map area. See instructions for precise requirements.

XVI. Facility Drawing

All existing facilities must include a scale drawing of the facility (See instructions for more detail).

XVII. Photographs

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

XVIII. Certification(s)

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.

Owner Signature <i>AME</i>	Date Signed <i>10 Jun 13</i>
Name and Official Title (Type or print) Albert M. Elton II, Colonel, 27 th Special Operations Wing Commander	
Owner Signature	Date Signed
Name and Official Title (Type or print)	
Operator Signature	Date Signed
Name and Official Title (Type or print)	
Operator Signature	Date Signed
Name and Official Title (Type or print)	

XIX. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (Refer to instructions for more information)