



U.S. Department of Transportation
Research and Special Programs Administration

Hazardous Materials Incident Report

Form Approval OMB No. 3137-0039

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 2137-0039. The filling out of this information is mandatory and will take 96 minutes to complete.

INSTRUCTIONS

Submit this report to the Information Systems Manager, U.S. Department of Transportation, Pipeline and Hazardous Materials Safety Administration, Office of Hazardous Materials Safety, DHM-63, Washington, D.C. 20590-0001. If space provided for any item is inadequate, use a separate sheet of paper, identifying the entry number being completed. Copies of this form and instructions can be obtained from the Office of Hazardous Materials Website at <http://hazmat.dot.gov>. If you have any questions, you can contact the Hazardous Materials Information Center at 1-800-HMR-4922 (1-800-467-4922) or online at <http://hazmat.dot.gov>.

PART I - REPORT TYPE

1. Incident Id: I-2023010072
2. This is to report: A

PART II - GENERAL INCIDENT INFORMATION

3. Date of Incident:
09/05/2022
4. Time of Incident (use 24-hour time):
17:25
5. Enter National Response Center Report Number (if applicable):
6. If you submitted a report to another Federal DOT agency, enter the agency and report number:
7. Location of Incident:
- City: Outside City Limits
County: Howard
State: TX
Zip Code: (if known):
Street Address/Mile Marker/Yard Name/Airport/Body of Water/River Mile:
INTERSECTION OF HWY 350 AND FM
8. Mode of Transportation: Highway
9. Transportation Phase: In Transit
10. Carrier/Reporter:
- Name: PANHANDLE EXPRESS ENERGY SERVICES DBA SMART CHEMICAL SOLUTIONS
Street: 3505 OLSEN BLVD SUITE 201
City: AMARILLO
State: TX
Zip Code: 79109
Federal DOT Id Number: Hazmat Registration Number: 178430
11. Shipper/Officer:
- Name: PANHANDLE EXPRESS ENERGY SERVICES DBA SMART CHEMICAL SOLUTIONS
Street: 3505 OLSEN BLVD SUITE 201
City: AMARILLO
State: TX
Zip Code: 79109
Waybill/Shipping Paper: Hazmat Registration Number:
12. Origin (if different from shipper address)
- Street: 3318 S CR 1180
City: Midland
State: TX
Zip Code: 79706
13. Destination:
- Street: SUN GUNNER/SCATTER TISH PAD
City: 15 miles North of Big Spring
State: TX
Zip Code:
14. Proper Shipping Name of Hazardous Material: SODIUM HYDROXIDE, SOLUTION
15. Technical/Trade Name: SMARTCIDE1984a
16. Hazardous Class/Division: Corrosive Material
17. Identification Number: (E.g. UN2764, NA 2020) UN1824

- 18. Packing Group:** (if applicable) III
- 19. Quantity Released:** (Include Measurement Units) 2000 Liquid - Gallon
- 20. Was the material shipped as a hazardous waste?** False
If yes, provide the EPA Manifest Number:
- 21. Is this a Toxic by Inhalation (TIH) material?** False
If yes, provide the Hazard Zone:
- 22. Was the material shipped under an Exemption, Approval, or Competent Authority Certificate?** False
If yes, provide the Exemption, Approval, or CA number:
- 23. Was this an undeclared hazardous materials shipment?** False

PART III - PACKAGING INFORMATION

24. Check Packaging Type (check only one - if more than one, list type of packaging, copy Part III, and complete for each type:

Cargo Tank Motor Vehicle (CTMV)

25. See instructions and enter the appropriate failure codes found at the end of the instructions. Be sure to enter the codes from the list that corresponds to the particular packaging type checked above. Enter the number of codes as appropriate to describe the incident.

Enter the most important failure point in line 1. If there are more than two failure points, provide in this format in part VI.

What Failed: -

How Failed: -

Causes of Failure: -

26a. Provide the packaging identification markings, if available.

Identification Markings: UN PORTABLE (TANK T11 IMDG, CFR49, ADR/R

(Examples: 1A1/Y1.4/150/92/USA/RB/93/RL, UN31H1/Y0493/USA/M9339/10800/1200, DOT - 105A - 100W (RAIL), DOT 406 (HIGHWAY), DOT 51, DOT 3-A)

26b. For Non-bulk, IBC, or non-specification packaging, if identification markings are incomplete or unavailable, see instructions and complete the following:

Single Package or Outer Packaging:	Single Package or Inner Packaging (if any):
Packaging Type: Material of Construction: Head Type (Drums only):	Packaging Type: Material of Construction:
27. Describe the package capacity and the quantity:	
Package Capacity: Amount in Package: Number in Shipment: Number Failed:	Package Capacity: Amount in Package: Number in Shipment: Number Failed:
28. Provide packaging construction and test information, as appropriate:	
Manufacturer: HOOVER CS Serial Number: HMMU9207044 Material of Construction: Shell: SANS 50028-71.4402/1 (if Tank Car, CTMV, Portable Tank, or Cylinder) Design Pressure: 87 PSI (if Tank Car, CTMV, Portable Tank) Shell Thickness: 0.181 INCH (if Tank Car, CTMV, Portable Tank) Head Thickness: 0.181 INCH (if Tank Car, CTMV) Service Pressure: PSI (if Cylinder) If valve or device failed: Type: Model: Manufacturer:	
29. If the packaging is for Radioactive Materials, complete the following:	
Packaging Category: Packaging Certification: Certification Number: Nuclide(s) Present: Activity: Critical Safety Index:	Transport Index:

PART IV – CONSEQUENCES

30. Result of Incident (check all that apply):

- | | | | |
|---------------------------|-------|--|-------|
| - Spillage: | True | - Fire: | False |
| - Explosion: | False | - Material Entered Waterway/Storm Sewer: | False |
| - Vapor (Gas) Dispersion: | False | - Environmental Damage: | False |
| - No Release: | False | | |

31. Emergency Response: The following entities responded to the incident: (Check all that apply)

- Fire/EMS Report #: False
Police Report #: True Case ID 4104124
In-house cleanup: False
Other Cleanup: True

32. Damages Was the total damage cost more than \$500?

False

If yes, enter the following information: (If no, go to question 33.)

Material Loss: \$ 0.00
Carrier Damage: \$ 0.00
Property Damage: \$ 0.00
Response Cost: \$ 0.00
Remediation/Cleanup Cost: \$ 0.00

(See damage definitions in the instructions)

33a. Did the hazardous material cause or contribute to a human fatality?

False

If yes, enter the number of fatalities resulting from the hazardous material:

Employees:
Responders:
General Public:

33b. Were there human fatalities that did not result from the hazardous material?

False

If yes, how many?

34. Did the hazardous material cause or contribute to personal injury?

False

If yes, enter the number of injuries resulting from the hazardous material:

Hospitalized (Admitted Only):

Employees:
Responders:
General Public:

Non-Hospitalized:

(e.g.: On site first aid or Emergency Room observation and release)

Employees:
Responders:
General Public:

35. Did the hazardous material cause or contribute to an evacuation?

False

If yes, provide the following information:

Total number of general public evacuated:
Total number of employees evacuated:
Total evacuated: 0
Duration of the evacuation:

36. Was a major transportation artery or facility closed?

False

If yes, how many?

37. Was the material involved in a crash or derailment?

True

If yes, provide the following information:

Estimated speed (mph): 12
Weather conditions: wet
Vehicle overturned? True
Vehicle left roadway/track? True

PART V - AIR INCIDENT INFORMATION (please refer to S 175.31 to report a discrepancy for air shipments)

38. Was the shipment on a passenger aircraft?

If yes, was it tendered as cargo, or as passenger baggage?

39. Where did the incident occur (if unknown, check the appropriate box for the location where the incident was discovered)?

40. What phase(s) had the shipment already undergone prior to the incident? (Check all that apply)

- | | |
|--|--|
| - Shipment had not been transported | - Transported by air (first flight) |
| - Transport by air (subsequent flights) | - Initial transport by highway to cargo facility |
| - Transfer at sort center/cargo facility | |

PART VI - DESCRIPTION OF EVENTS & PACKAGE FAILURE

- Describe the sequence of events that led to the incident and the actions taken at the time it was discovered. Describe the package failure, including the size and location of holes, cracks, etc. Photographs and diagrams should be submitted if needed for clarification. Estimate the duration of the release, if possible. Describe what was done to mitigate the effects of the release. Continue on additional sheets if necessary.

Describe:

Driver was making a 90degree left turn at the intersection of FM 700& Hwy 350 outside of Big Spring, TX at 5:15 pm when he rolled his truck & ISO. Fortunately, the driver was not injured. The rollover loosened the manhole of the ISO resulting in roughly 2,000 gallons of product being lost through that manhole until the liquid level was below the damaged manhole. The ISO was stood up and we were able to transfer the remaining 2800 gallons into another ISO and taken on to location. The clean-up process is being handled by US Ecology through excavation and remediation of the contaminated soil in accordance with TCEQ guidance who were also onsite. The crash was investigated by TX DPS.

PART VII - RECOMMENDATIONS/ACTIONS TAKEN TO PREVENT RECURRENCE

- Where you are able to do so, suggest or describe changes (such as additional training, use of better packaging, or improved operating procedures) to help prevent recurrence. Provide recommendations for improvement to hazardous materials transportation beyond the control of your individual company. Continue on additional sheets if necessary.

Describe:

All drivers will attend a refresher course on a tanker/rollover prevention course created by the Federal Motor Carrier Administration. An All Users safety bulletin on the importance of slowing down in adverse weather and paying attention to detail was delivered to all employees, not just drivers.

PART VIII – CONTACT INFORMATION

Contact's Name:	COLE WADSWORTH
Contact's Title:	VP EHS
Business Name and Address:	SMART CHEMICAL SOLUTIONS 3505 OLSEN BLVD SUITE 201 Amarillo TX 79109
E-mail Address:	cole.wadsworth@smartchemical.com
Telephone Number:	(325)-650-2547
Fax Number:	
Hazmat Registration Number:	
Date:	09/30/2022
Preparer is:	Carrier