

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY  
NOTICE OF INTENT  
GROUNDWATER CLEAN-UP DISCHARGE  
NPDES GENERAL PERMIT ARG790000

C6 M09  
00356404

Application Type:  New X  Renewal (Permit # ARG79 )

I. PERMITTEE/OPERATOR INFORMATION

Permittee (Legal Name): Flash Oil Co. of Arkansas, Inc. Operator Type:  Partnership  
Permittee Mailing Address: P.O. Box 2389  State  Federal  
Permittee City: West Memphis  Sole Proprietorship/Private  
Permittee State: Arkansas Zip: 72303 \*State of Incorporation: Arkansas  
Permittee Telephone Number: 870-732-2263 The legal name of the Permittee must be  
Permittee Fax Number: 870-732-0454 identical to the name listed with the  
Permittee E-mail Address: pstanfield@flashmarketinc.com Arkansas Secretary of State.



II. INVOICE MAILING INFORMATION

Invoice Contact Person: Paula Stanfield City: West Memphis  
Invoice Mailing Company: Flash Oil Co. of Arkansas, Inc. State: Arkansas Zip: 72303  
Invoice Mailing Address: P.O. Box 2389 Telephone: 870-732-2263

III. FACILITY INFORMATION

Facility Name: Flash Market #182 Facility Contact Person: David Diehl  
Facility Address: 1903 Fayetteville Road Telephone Number: 501-922-7156  
Driving Directions to Facility: Facility is approximately 250 feet north of Interstate 40 at Exit 5.  
Facility County: Crawford Facility City, State & Zip: Van Buren, AR 72956  
Facility Latitude: 35 Deg 27 Min 50.6 Sec Facility Longitude: 94 Deg 21 Min 24.6 Sec  
Accuracy: 5 meters Method: Position Datum: NAD 83 Scale: 1:24,000 Description: Point  
Facility SIC Code: 5411 Facility NAICS: 44710

IV. DISCHARGE INFORMATION

Outfall Number: 001 Estimated Flow: 0.864 MGD (Million Gallons per Day)  
Outfall Description: Outfall will be a 2.0 inch PVC pipe flowing into the burrow ditch along Arkansas Highway 59.  
Stream Segment: 3H Hydrologic Basin Code: 11140106  
Outfall Latitude: 35 Deg 27 Min 50.4 Sec Outfall Longitude: 94 Deg 21 Min 23.6 Sec  
Accuracy: 5 meters Method: Position Datum: NAD 83 Scale: 1:24,000 Description: Point  
Receiving Stream: Arkansas River  
Outfall Number: \_\_\_\_\_ Flow: \_\_\_\_\_ MGD (Million Gallons per Day)  
Stream Segment: \_\_\_\_\_ Hydrologic Basin Code: \_\_\_\_\_  
Outfall Latitude: \_\_\_\_\_ Deg \_\_\_\_\_ Min \_\_\_\_\_ Sec  
Outfall Longitude: \_\_\_\_\_ Deg \_\_\_\_\_ Min \_\_\_\_\_ Sec  
Accuracy: \_\_\_\_\_ Method: \_\_\_\_\_ Datum: \_\_\_\_\_ Scale: \_\_\_\_\_ Description: \_\_\_\_\_  
Receiving Stream: \_\_\_\_\_



ARKANSAS  
 SECRETARY OF STATE  
*Mark Martin*

*Search Incorporations, Cooperatives, Banks and Insurance Companies*

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LLC Member information is now confidential per Act 865 of 2007

Use your browser's back button to return to the Search Results

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For service of process contact the [Secretary of State's office](#).

Corporation Name	FLASH OIL CO. OF ARKANSAS, INC.
Fictitious Names	
Filing #	100087014
Filing Type	For Profit Corporation
Filed under Act	Dom Bus Corp; 958 of 1987
Status	Good Standing
Principal Address	
Reg. Agent	TIMOTHY W. GROOMS TIMOTHY W. GROOMS
Agent Address	P O BOX 2389  WEST MEMPHIS, AR 72301
Date Filed	12/06/1990
Officers	HERSHEL OWENS , Tax Preparer LYNDA PATTERSON , Controller JAMIE PATTERSON , President T S PATTERSON , Secretary SHANE PATTERSON , Vice-President T S PATTERSON , Treasurer SEE FILE, Incorporator/Organizer
Foreign Name	N/A
Foreign Address	
State of Origin	N/A
<a href="#">Purchase a Certificate of Good Standing for this Entity</a>	<a href="#">Pay Franchise Tax for this corporation</a>

ADEQ has removed the submitted disclosure statement, to protect confidential information.

It has been scanned into a secure location.

A redacted copy will be added as a separate document by Legal Division.

AHQDV

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Accuracy: Less than 5 meters Method: GPS Precise Position Datum: NAD 83 Scale: 1:24,000 Description: Point Treatment/Storage: Point  
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Accuracy: Less than 5 meters Method: GPS Precise Position Datum: NAD 83 Scale: 1:24,000 Description: Point Monitoring Point  
Receiving Stream: Lake Louemma - Arkansas River  
Outfall Number: \_\_\_\_\_ Flow: \_\_\_\_\_ MGD (Million Gallons per Day)  
Stream Segment: \_\_\_\_\_ Hydrologic Basin Code: \_\_\_\_\_  
Outfall Latitude: \_\_\_\_\_ Deg \_\_\_\_\_ Min \_\_\_\_\_ Sec Outfall Longitude: \_\_\_\_\_ Deg \_\_\_\_\_ Min \_\_\_\_\_ Sec  
Accuracy: \_\_\_\_\_ Method: \_\_\_\_\_ Datum: \_\_\_\_\_ Scale: \_\_\_\_\_ Description: \_\_\_\_\_  
Receiving Stream: \_\_\_\_\_

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**V. FACILITY PERMIT INFORMATION**

NPDES Individual Permit Number (If Applicable): AR00  
NPDES General Permit Number (If Applicable): ARG790000  
State Construction Permit Number: ARG16  
NPDES General Construction Stormwater Permit Number (If Applicable): ARR15  
NPDES Industrial Stormwater General Permit Number: ARR00  
Other Department Permits: \_\_\_\_\_

**VI. OTHER INFORMATION:**

Additional Location Description: NA  
Additional Comments: NA  
Consultant Contact Name: Environmental Pollution Consultants, Inc. Mr. David Diehl, P.G.  
Consultant Email Address: epc.inc@suddenlink.net  
Consultant Address: Hot Springs  
P.O. Box 8782 City: Village State: AR Zip: 71910  
Consultant Phone Number: 501-922-7156 Consultant Fax Number: 501-922-9742

**VII. CERTIFICATION OF OPERATOR**

"I certify that, if this facility is a corporation, it is registered with the Secretary of the State of Arkansas. I certify that the cognizant official designated in this Application is qualified to act as a duly authorized representative under the provisions of 40 CFR 122.22(b). If no cognizant official has been designated, I understand that the Department will accept reports signed only by the Applicant. 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 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."

Responsible Official Printed Name: [Signature] Title: President  
Responsible Official Signature: Shane Patterson Date: \_\_\_\_\_  
Responsible Official Email: \_\_\_\_\_

Cognizant Official Printed Name: DAVID DIEHL Title: President  
Cognizant Official Signature: [Signature] Telephone: 501-922-7156  
Cognizant Official Email: epc.inc@suddenlink.net

**X. PERMIT REQUIREMENT VERIFICATION**

Please check the following to verify completion of permit requirements. If you answer "NO" to any of questions below the application will be considered incomplete and cause a delay in the permitting process.

	Yes	No	
Submittal of Complete NOI?	<input type="checkbox"/>	<input type="checkbox"/>	
Submittal of Required Permit Fee?	<input type="checkbox"/>	<input type="checkbox"/>	New Permittees Only Check Number: _____
Submittal of Topographic Map?	<input type="checkbox"/>	<input type="checkbox"/>	
Submittal of Disclosure Statement?	<input type="checkbox"/>	<input type="checkbox"/>	
Industrial Operator's License Number:	_____		

revised copy rec'd 10/5/11 kay

## Yarberry, Katherine

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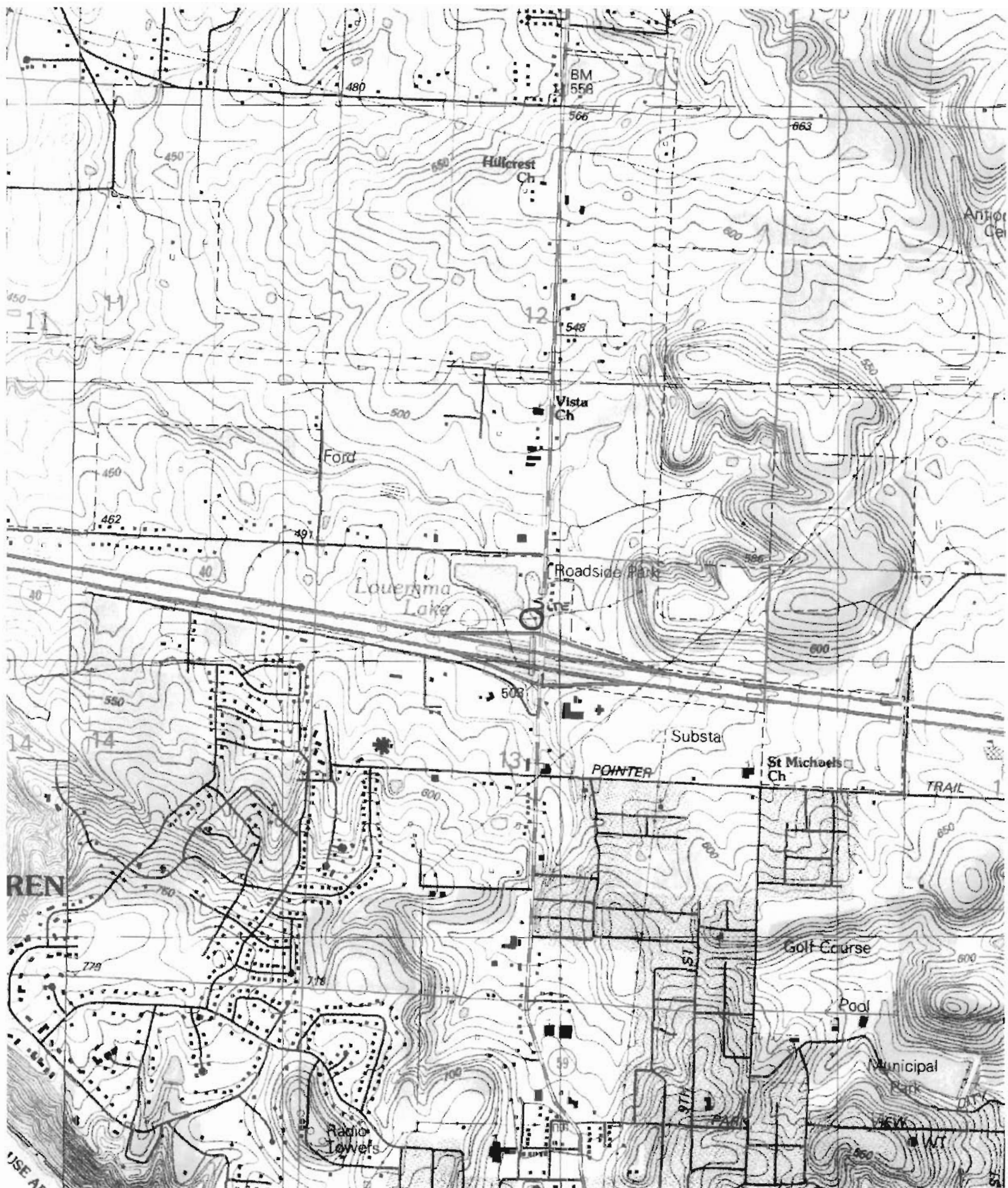
**From:** Miller, Roger  
**Sent:** Friday, August 26, 2011 8:52 AM  
**To:** Yarberry, Katherine  
**Subject:** Flash Mkt. GW treatment - ARG790102

Hey Katherine-

I just checked over the NOI for the proposed discharge and didn't find anything of concern, so it's good to go as far as I'm concerned.

-Roger M.

PS - I do think there's a decimal error or something on the estimated flow, though. It would be tough to put 600 gpm through a 2-inch pipe!







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