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|  <b>Pennsylvania<br/>Department of<br/>Environmental Protection</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                  | INSPECTION REPORT                                    |                                               | <b>Commonwealth of Pennsylvania<br/>Department of Environmental Protection<br/>Air Quality Program</b> |  |
| Date(s) of Inspection:<br><b>11/3/25</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                  | Permit #(s):<br><b>PA-04-00740A, B, C</b>            |                                               | Case #:<br><b>04-00740</b>                                                                             |  |
| TV <input type="checkbox"/> PA <input type="checkbox"/><br>SM <input type="checkbox"/> GP <input type="checkbox"/><br>NM <input type="checkbox"/> MEGA <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                  | Expiration Date:                                     |                                               | PF ID #:<br><b>775836</b>                                                                              |  |
| Company Name:<br><b>Shell Chemical Appalachia LLC</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                  | Municipality:<br><b>Potter Township</b>              |                                               | County:<br><b>Beaver</b>                                                                               |  |
| Plant Name:<br><b>SHELL CHEM APPALACHIA<br/>/PETROCHEMICALS COMPLEX</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                  | Physical Location:<br><b>Route 18</b>                |                                               | Federal ID — Plant Code #:<br><b>46-1624986-1</b>                                                      |  |
| Responsible Official:<br><b>Nathan Levin</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                  |                                                      | Mailing Address:<br><b>300 Frankfort Road</b> |                                                                                                        |  |
| Title:<br><b>General Manager</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                  |                                                      | <b>Monaca, PA 15061-2210</b>                  |                                                                                                        |  |
| Phone #(s):<br><b>724-709-2825</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                  |                                                      |                                               |                                                                                                        |  |
| <b>Mark (X) All Inspection Types That Apply To This Inspection:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                  |                                                      |                                               |                                                                                                        |  |
| <input type="checkbox"/> Full Compliance Evaluation (FCE)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Plan Approval Inspection                | <input type="checkbox"/> File Review (FR)            |                                               |                                                                                                        |  |
| <input type="checkbox"/> Operating Permit Inspection (PI)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Initial Permit Inspection (IPI)         | <input type="checkbox"/> Complaint Inspection (CI)   |                                               |                                                                                                        |  |
| <input type="checkbox"/> Routine/Partial (RTPT)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Follow-Up Inspection (Ref. Date: _____) | <input type="checkbox"/> Sample Collection (SC)      |                                               |                                                                                                        |  |
| <input type="checkbox"/> Minor Source(s) Inspection (RFD)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Stack Test Observation                  | <input type="checkbox"/> Multi-Media Inspection (MM) |                                               |                                                                                                        |  |
| <input checked="" type="checkbox"/> Other: <b>ADMIN</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Announced                               |                                                      |                                               |                                                                                                        |  |
| Annual Compliance Certification Received: <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                  |                                                      | Date Received:                                |                                                                                                        |  |
| AIMS Report Received: <input type="checkbox"/> YES <input type="checkbox"/> N.O <input type="checkbox"/> N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                  |                                                      | Date Received:                                |                                                                                                        |  |
| <b>Mark (X) All Activities That Apply:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                  |                                                      |                                               |                                                                                                        |  |
| <input checked="" type="checkbox"/> File Review                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> Pre-Inspection Briefing                 | <input type="checkbox"/> Exit Interview/Briefing     |                                               |                                                                                                        |  |
| <input type="checkbox"/> Pre-Inspection Observations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <input type="checkbox"/> Check For New/Unreported Sources        | <input type="checkbox"/> Sample(s) Collected         |                                               |                                                                                                        |  |
| <input type="checkbox"/> Visible Emissions Observations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input type="checkbox"/> Verify Operation of CEMS                | <input type="checkbox"/> Other                       |                                               |                                                                                                        |  |
| <b>Compliance Status:</b> <input type="checkbox"/> In <input checked="" type="checkbox"/> Out <input type="checkbox"/> Pending <input type="checkbox"/> Awaiting Co. Report <b>Needs a Follow-Up Inspection?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><b>SIC: 2821 NAICS: 221112</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                  |                                                      |                                               |                                                                                                        |  |
| <p>On November 3, 2025, I reviewed the records for Shell Chemical Appalachia LLC. The Shell Chemical Appalachia LLC ("Shell") Petrochemicals Complex is authorized to operate pursuant to plan approvals PA-04-00740A, PA-04-00740B, and PA-04-00740C. On October 30, 2025, Shell reported to the Department excess emissions during the malfunction of the Spent Caustic Thermal Oxidizer (SCTO, Source C206) on September 29 and 30, 2025. Shell reported excess emissions of 7.26 lbs. of VOC, 0.83 lbs. of Total HAPs and 0.47 lbs. of Benzene. This is a violation of 25 Pa. Code §127.25 which states "A person may not cause or permit the operation of an air contamination source subject to this chapter in a manner inconsistent with good operating practices." A Notice of Violation will be issued for this violation.</p> |                                                                  |                                                      |                                               |                                                                                                        |  |
| Company Representative:<br><b>MEMO TO FILE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                  | Title:<br>_____                                      |                                               | Signature:<br>_____                                                                                    |  |
| DEP Representative:<br><b>Scott Beaudway</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                  | Title:<br><b>Air Quality Specialist</b>              |                                               | Signature:<br><b>Scott Beaudway/SB</b>                                                                 |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                  |                                                      |                                               | Date/Time:<br><b>11/3/25</b>                                                                           |  |
| <small>This document is official notification that a representative of the Department of Environmental Protection, Air Quality Program, inspected the identified site. The findings of this inspection are shown above and on any attached pages, and may include violations uncovered during the inspection. Violations may also be discovered upon review of sample results or from any additional review of Department records. Notification will be forthcoming, if such violations are noted.</small>                                                                                                                                                                                                                                                                                                                               |                                                                  |                                                      |                                               |                                                                                                        |  |