

Comments of Paul G. Billings
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On

The U.S. Environmental Protection Agency's Standards of Performance for New, Reconstructed, and Modified Sources and Emissions Guidelines for Existing Sources: Oil and Natural Gas Sector Climate Review
Docket ID No. EPA-HQ-OAR-2021-0317 FRL-8510-02-OAR
November 30, 2021

Good morning, I am Paul Billings, National Senior Vice President of Public Policy for the American Lung Association. Thank you for the opportunity to speak in support of stronger methane rules.

The American Lung Association is the oldest voluntary health organization in the United States. Nearly 25 million Americans have asthma, including 5.5 million children. Chronic Obstructive Pulmonary Disease or COPD affects 16.4 million adults. The COVID-19 pandemic has made all of us more aware of the importance of lung health. We know that exposure to air pollution worsens lung disease, and we know that climate change is making air pollution worse.

Climate change is a health emergency.

We are seeing the health impacts of the oil and gas industry pollution on communities adjacent to operations and far away. Methane is a dangerous greenhouse gas. Eighty-six times more potent than carbon pollution, it is making our planet warmer, and public health is being harmed now because of the impacts of climate change, including:

- Extreme weather, such as heat and severe storms,
- Wildfires and dangerous smoke that spreads for thousands of miles,
- Increased risk of exposure to vector-borne diseases;
- Increased risk of exposure to waterborne pathogens and toxins;
- Longer and more intense allergy seasons; and
- Increased levels of ozone and particulate air pollution that contribute to asthma attacks, cardiovascular disease and premature death;

In addition to driving unhealthy air through climate change, oil and gas development are also adding additional harmful emissions to the air we breathe. Volatile organic compounds from oil and gas can cause an array of health harms, including cancer, and can react to form ozone pollution too. The American Lung Association's annual State of the Air Report found more than 40% of Americans—over 135 million people—are living in places with unhealthy levels of ground-level ozone pollution or particle pollution.

Rural counties like Eddy County, New Mexico and Uintah County, Utah, where oil and gas development has boomed, have more ozone pollution than many cities and both saw increases in this year's "State of the Air" report. These rural counties earned an "F" grade for ozone in 2021.

The burden of living with unhealthy air is not shared equally. People of color are over three times more likely to be breathing the most polluted air than white people. And, while every American's health is already at risk from climate change, the burden is not shared equally. Children, seniors, pregnant people, low-income communities, communities of color, people with disabilities, people who work outdoors and people with chronic disease disproportionately bear the health impacts of climate change and air pollution. As a result of numerous current and legacy racist policies and practices, people of color are disproportionately more likely to have multiple pre-existing health conditions, to face social disadvantages and environmental risks that make them more vulnerable to climate change.

The EPA proposal to address methane from oil and gas operations is an important step forward. The American Lung Association urges EPA to finalize more protective standards. My time is limited so I will make a few brief comments, we will submit more detailed written comments.

The American Lung Association urges EPA to require more frequent inspections and repairs at all facilities especially at smaller wells. The EPA proposal for leak detection and repair at well sites with estimated emissions of less than 3 tons per year is inadequate. It requires facilities to conduct a survey and perform repairs as needed to demonstrate they are free of leaks or malfunctions. But these sites are not required to conduct ongoing monitoring. We are concerned that this approach may lead to significant leaks in the future. In addition, EPA co-proposed a requirement that sites with estimated emissions between 3 and 8 tons per year be monitored semi-annually, rather than quarterly. The Lung Association opposes semi-annual monitoring. We are seeking more frequent monitoring, at least quarterly for these sites.

We want EPA to prohibit venting and routine flaring. The EPA's proposal would eliminate venting of associated gas from oil wells but would still permit routine flaring. We urge EPA to strengthen the proposal to eliminate the flaring.

We are encouraged that EPA is seeking comment on how to empower communities to help stem large emission events by detecting and reporting such emissions. Bolstering community monitoring is critical. We will provide additional comments on the importance of monitoring and the need to require better transparency to protect frontline communities.

The proposal is a positive step, but the American Lung Association urges EPA to set protective standards to require the oil and gas industry to do more to reduce methane emissions. We urge EPA to adopt stricter rules to require more frequent inspections and repairs to prevent fugitive methane emissions and the emissions of volatile organic compounds from all sources. And we urge EPA to prohibit routine flaring.

Climate change is a health emergency. Please finalize strong rules to respond to this crisis.

Thank you.