



# **Respiratory Protection Standard**

## 1. PURPOSE

This Standard describes the minimum requirements for respiratory equipment selection, use, care and maintenance, and training for respirator users. It serves as the required written respiratory protection program.

## 2. SCOPE

This Standard is applicable to employees employed by Expand Energy (EXE), its affiliates or subsidiaries performing work on Expand properties or on the company's behalf.

Contractors **shall** have their own standard that meets or exceeds regulatory requirements.

## 3. DEFINITIONS

**Air Purifying Respirator (APR)** – respirator with an air-purifying filter, cartridge, or canister that removes specific air contaminants by passing ambient air through the air-purifying element.

**Approved Respirator Selection List** – document maintained by HSER Corporate that identifies appropriate and acceptable respiratory protection to be utilized for assessed job hazards. Appendix A contains the Approved Respirator Selection List.

**Assigned Protection Factor (APF)** - level of respiratory protection that a respirator or class of respirators is expected to provide to employees when the employer implements an effective respiratory protection program. APFs are defined by OSHA in 1910.134(d).

**Filtering Facepiece Respirator** – an air purifying respirator with a filter as an integral part of the facepiece or with the entire facepiece composed of filtering material. These are commonly referred to as N95 dust masks.

**Immediately Dangerous to Life or Health (IDLH)** – Immediately Dangerous to Life or Health (IDLH) is a term used to describe hazards in which an acute exposure to the hazard poses a severe risk of immediate health damage, injury, or death.

**Physician or other Licensed Health Care Professional (PLHCP)** - an individual whose legally permitted scope of practice (i.e., license, registration, or certification) allows him or her to independently provide, or be delegated the responsibility to provide, some or all of the health care services required to perform medical evaluations using a medical questionnaire or an initial medical examination to determine the employee's ability to use a respirator in the workplace.

**Program Administrator** - an employee assigned to manage or supervise the execution of the Respiratory Protection Standard including periodic evaluations of its effectiveness. A standard administrator **shall** be designated in each Business Unit (BU) that has employees in the respiratory protection program.

**Qualitative Fit Test** – a subjective test method which relies on the wearer's sense of taste or smell to determine if a leak is present.

**Quantitative Fit Test** - a numerical measurement of a respirator's seal, using specialized equipment to count particles and calculate a "fit factor" indicating how well the respirator is sealed to the wearer's face.

**Self-Contained Breathing Apparatus (SCBA)** - a portable respiratory device that provides a user with a supply of air, allowing them to work safely in hazardous environments. It typically consists of compressed air cylinders, a harness for the cylinders, air hoses and regulators, and a full facepiece.

**Shall** – denotes a minimum requirement to conform to the Standard. To aid the reader, "shall" requirements are identified in bold. Any deviation from a minimum requirement must be approved via the Standard Exception Form.

**Should** – denotes a recommendation, or that which is advised, but not required to conform to the Standard.

**Supplied-Air Respirator (SAR)** - a **supplied-air respirator (SAR)** or **air-line respirator** is a breathing apparatus used in places where the ambient air may not be safe to breathe. It uses an air hose to supply air from outside the danger zone, and often includes an auxiliary escape cylinder.

**Voluntary Use** – use for employee comfort purposes only, and no identified hazard exists, and the use of the respirator does not create a hazard.

## 4. ROLES & RESPONSIBILITIES

Supervisor	<ul style="list-style-type: none"> <li>• Coordinate with HSER to identify work areas, process or tasks that require respiratory protection.</li> <li>• Assure respiratory protective equipment is available.</li> <li>• Ensure employees use, inspect and maintain respiratory protective equipment as required.</li> <li>• Ensure employees using respiratory protective equipment are included in the respiratory protection program and complete associated annual requirements.</li> </ul>
Employees	<ul style="list-style-type: none"> <li>• Complete medical evaluation, fit testing and training as required.</li> <li>• Use and maintain respiratory protection in accordance with the manufacturer's instructions and the training received.</li> <li>• Inform HSER if respiratory equipment is damaged or no longer fits properly.</li> </ul>

	<ul style="list-style-type: none"> <li>• Inform Supervisor/PIC or HSER of any respiratory hazards that they feel need additional assessment.</li> <li>• Inform HSER of voluntary use of respirator.</li> </ul>
HSER / Program Administrator	<ul style="list-style-type: none"> <li>• Work with Operations to identify work areas, process or tasks that require workers to wear respiratory protective equipment.</li> <li>• Guide the selection of respiratory protection equipment.</li> <li>• Administer the medical surveillance and fit testing programs.</li> <li>• Collect fit testing records for employees included in the respiratory protection program.</li> <li>• Review employee requests for voluntary use of respirators.</li> <li>• Verify personnel included in the respiratory protection program receive training.</li> <li>• Evaluate the program effectiveness periodically and retain corresponding records.</li> </ul>
HSER Corporate	<ul style="list-style-type: none"> <li>• Update and maintain the Respiratory Protection Standard and the Approved Respirator Selection List.</li> </ul>

## 5. REQUIREMENTS

EXE **shall** establish acceptable exposure limits for anticipated atmospheric contaminants. EXE exposure limits **shall not** exceed regulatory exposure limits.

Respiratory protective equipment **shall** be required when engineering and/or administrative controls do not adequately limit potential exposures.

EXE **shall** establish an Approved Respirator Selection List that documents respirators that are approved for use. For additional information refer to Appendix A – Approved Respirator Selection List.

### 5.1 EXPOSURE ASSESSMENT

PPE Hazard Assessments, SOP's and JSA's **shall** identify work activities and/or locations that require the use of respiratory protective equipment. These assessments **shall** include the following considerations, as appropriate to the situation:

- Atmospheric sampling of work environments
- Personal industrial hygiene monitoring
- Regulatory exposure limits (e.g., OSHA, ACGIH, etc.) or EXE exposure limits

If respirators are required, Appendix A - Approved Respirator Selection List **shall** be consulted.

If there is a contaminant specific to a BU that is not included on the Approved Respirator Selection List, it **shall** be added to the BU PPE Assessment and HSER Corporate **shall** be notified.

HSER Corporate **shall** update the Approved Respirator Selection List as necessary (e.g., when additional job tasks and respiratory hazards are identified, regulatory changes etc.).

### 5.1.1 IDLH ATMOSPHERES

IDLH atmospheres and/or oxygen-deficient environments **shall** require Approved Respiratory Protection and standby personnel, unless specific SOPs are approved and in place with sufficient controls and monitoring.

Standby personnel **shall** be located outside the IDLH atmosphere and be trained and equipped to provide emergency rescue.

Respirators for use in IDLH atmospheres **shall** be either pressure-demand SCBA (30 min) or pressure-demand supplied-air respirator (SAR) with auxiliary self-contained air supply.

The standby personnel **shall** have visual, voice, or signal communication maintained with individual entering the IDLH atmosphere and appropriate retrieval equipment.

## 5.2 RESPIRATOR USE

Only respirators that have been certified by the National Institute for Occupational Safety and Health (NIOSH), American National Standards Institute (ANSI), or equivalent **shall** be used by EXE personnel.

All filters, cartridges, and canisters **shall** be labeled with the appropriate NIOSH label. Personnel **shall** only use compatible filters and cartridges made by the manufacturer of the respirator face piece.

Respirators and replacement cartridges **shall** be available to employees who are assigned tasks that require their use (in accordance with Approved Respirator Selection List).

HSER **shall** assist with selection of respirators to ensure the model and size correctly fits the user.

Facial hair **shall not** come between the sealing surface of the facepiece and skin.

## 5.3 REQUIREMENTS FOR AIRLINE RESPIRATORS

- Breathing air **shall** meet Grade D breathing air criteria in accordance with ANSI G-7.1-1989 specifications.
- Breathing air hose couplings **shall not** be compatible with other hose couplings.
- Cylinders of breathing air **shall** have a certificate of analysis from the supplier that the breathing air meets the requirements for Grade D breathing air.

## 5.4 MEDICAL EVALUATION

Employees **shall** be medically cleared by a Physician or Other Licensed Health Care Professional (PLHCP) prior to donning respiratory protection equipment for fit testing or a job task.

The medical evaluation **shall** be performed on an annual basis prior to fit testing. Medical evaluations **shall** be coordinated by HSER, Program Administrator or designee.

Before the PLHCP makes a recommendation concerning an employee's ability to use a respirator, the following information **shall** be provided to the PLHCP:

- The type and weight of the respirator to be used by the employee
- The duration and frequency of respirator use
- The expected physical work effort
- Additional PPE to be worn
- Temperature and humidity extremes that may be encountered
- Written copy of this Standard
- Written copy of CFR 1910.134 (OSHA's respiratory protection standard)

One copy of the PLHCP recommendation **shall** be provided to the employee, and the other copy **shall** be retained by EXE as a confidential record.

## 5.5 FIT TESTING

Once an employee has been medically cleared to utilize respiratory protection, they **shall** be fit tested with the specific brand and style of respirator to be worn. This testing **shall** be performed by personnel who are properly trained and equipped for fit testing.

Depending on the style and required protection factor of the respirator, either qualitative or quantitative fit testing may be utilized, and all testing **shall** comply with 29 CFR 1910.134 Appendix A.

Fit testing **shall** be conducted:

- Prior to utilizing respiratory protection
- Whenever a different respirator face-piece (size, style, model, or make) is to be used
- When changes occur that could alter the facial structure (significant loss/gain of weight, dental work, scarring, etc.)
- At least annually not exceeding 12 months

HSER, Program Administrator or designee **shall** maintain copies of fit test records for each employee until replaced by the next annual fit test.

## 5.6 SEAL CHECK

Wearers **shall** perform a seal check on tight-fitting face-pieces prior to entry into a potentially contaminated area or if they question the fit. Either the positive or negative seal check method **shall** be used.

- **Positive seal check:** close off the exhalation valve with the palm of the hand and exhale gently into the face-piece. The face fit is considered satisfactory if a slight positive pressure can be built up inside the face-piece without any evidence of air at the seal.
- **Negative pressure check:** close off the inlet opening of the canister(s) or cartridge(s) by covering with the palms of the hands and inhale gently so that the face-piece collapses slightly. Hold the breath for ten seconds. The face-piece should remain slightly collapsed with no inward leakage.

## 5.7 VOLUNTARY RESPIRATOR USE

Employees may voluntarily choose to wear APR respiratory protection equipment on locations where it is not required by EXE or an applicable OSHA standard.

Employees who voluntarily use a filtering face piece respirator **shall not** be required to have a medical evaluation. Employees who voluntarily use other types of respiratory protection **shall** be provided a medical evaluation.

All voluntary users **shall** read and sign a "Voluntary Respirator Use" form (refer to Appendix C of this Standard). HSER, Program Administrator or designee **shall** maintain copies of signed forms.

## 5.8 RESPIRATOR INSPECTION

Respirators **shall** be inspected before each use. Any respirator found to be not functioning properly **shall** be replaced, repaired, or discarded. Refer to Appendix B - Inspection, Cleaning and Storage of Respirators, for details.

All emergency respirators **shall** be inspected at least monthly and in accordance with the manufacturer's recommendations. Documentation of these inspections **shall** be provided on an inspection tag kept with the respirator, or maintained in separate inspection records, and **shall** include:

- Name of the person who made the inspection
- Findings of the inspection
- Any required remedial actions
- Serial number or other means of identifying the inspected respirator

## 5.9 PROGRAM EVALUATION

Program Administrators **shall** periodically conduct evaluations to ensure the Respiratory Protection Standard (which serves as the written program) is being effectively implemented, and **shall** consult employees to assess, at minimum, the following:

- Program effectiveness
- Respirator fit (including the ability to use the respirator without interfering with work activities)
- Appropriate respirator selection for hazards encountered
- Proper respirator use for workplace conditions
- Proper respirator maintenance

## 6. TRAINING

Employees who utilize respirators **shall** be trained annually, or more frequently as needed.

Employees must demonstrate their understanding of the topics covered through participation in training exercises.

Employees using respiratory protection on a voluntary basis **shall** complete training elements as appropriate for the type of protection being used.

Training **shall** cover the following areas:

- Proper selection and use of respirators
- How improper fit, usage, or maintenance can compromise the protective effect of the respirator
- How to use the respirator effectively in emergency situations, including situations in which the respirator malfunctions
- Limitations of respirators
- Care, maintenance, and proper use of respirator
- Respirator donning and user seal checks
- How to recognize medical signs and symptoms that may prevent effective use of respirators
- Fit testing

## 7. AUDIT REQUIREMENTS

Audits **shall** be periodically conducted by HSER in order to confirm compliance with this Standard.

## 8. STANDARD EXCEPTIONS

Requirements outlined in this Standard **shall** be followed, unless a Standard Exception is filed on behalf of, and with the approval of the Operations Manager. The Company’s Standard Exception Form is to be utilized to properly document any exceptions.

## 9. REFERENCES

- ANSI Z88.2, Standard for Respiratory Protection
- ANSI/ CGA G-7.1, Specifications for Grade D Breathing Air Quality/ Compressed Air for Human Respiration
- OSHA 29 CFR 1910.1020
- OSHA 29 CFR 1910.134
- MSHA 30 CFR 56 & 60
- NORM Management Procedure
- Expand Energy Records Retention Schedule

## 10. DOCUMENT CONTROL TABLE

<b>Title:</b> Respiratory Protection Standard		<b>Document Number:</b> HSER-SAF-EXE-STD-028		
<b>Next Review Date:</b> 9/23/2028				
<b>Originating Department:</b> HSER				
Version History				
Version	Issue Date	Description	Author(s)	Approved By
1.0	09/23/2025	New Standard for EXE.	Katie Rhoads	OGB

## 11. APPENDICES

- Appendix A – Approved Respirator Selection List
- Appendix B – Inspection, Cleaning and Storage of Respirators
- Appendix C – Voluntary Respirator Use Form

## Appendix A – Approved Respirator Selection List

Potential Respiratory Hazard	Exposure Limits	Recommended Respirator(s)	Maximum Use Concentration
Benzene and other Hydrocarbon gases & vapors	<p>Benzene: 1 ppm OSHA TWA</p> <p>Total Hydrocarbon: 100 ppm Company limit</p>	<p>Respirator based on air monitoring results OR use SCBA/Airline</p> <ul style="list-style-type: none"> <li>• Half-face air purifying respirator with organic vapor (OV) filter/cartridges (APF = 10)</li> <li>• Full-face air purifying respirator with organic vapor (OV) filter/cartridges (APF= 50)</li> <li>• SCBA in positive pressure mode (APF= 10,000)</li> <li>• Airline respirators with emergency escape bottles in positive pressure mode (APF= 10,000)</li> </ul>	<ul style="list-style-type: none"> <li>• 10 ppm benzene / 500 ppm total hydrocarbon for half-face air purifying respirator with OV filter/ cartridges</li> <li>• 50 ppm benzene / 2500 total hydrocarbon for full-face air purifying respirator with OV filter/ cartridges</li> <li>• SCBA / Airline respirators approved for IDLH or unknown conditions</li> </ul>
Carbon Monoxide	50 ppm OSHA PEL	<p>Respirator based on air monitoring results or use SCBA/Airline</p> <ul style="list-style-type: none"> <li>• SCBA in positive pressure mode (APF= 10,000)</li> <li>• Airline respirators with emergency escape bottles in positive pressure mode (APF= 10,000)</li> </ul>	SCBA / Airline respirators approved for IDLH or unknown conditions
Hydrogen Sulfide	<ul style="list-style-type: none"> <li>• 10 ppm Company limit</li> <li>• 20 ppm OSHA Ceiling</li> <li>• 50 ppm OSHA limit</li> <li>• 100 ppm IDLH</li> </ul>	<ul style="list-style-type: none"> <li>• Self-Contained Breathing Apparatus (SCBA) in positive pressure mode (APF= 10,000)</li> <li>• Airline respirators with emergency escape bottles in positive pressure mode (APF= 10,000)</li> </ul>	SCBA / Airline respirators approved for IDLH or unknown conditions
Naturally Occurring Radioactive Material (NORM)	<ul style="list-style-type: none"> <li>• ≥50 µR /hr (see NORM Management Procedure)</li> </ul>	<ul style="list-style-type: none"> <li>• P95 dust mask (minimum) or other respiratory protection as specified in the NORM program.</li> </ul>	

Potential Respiratory Hazard	Exposure Limits	Recommended Respirator(s)	Maximum Use Concentration
Oxygen Deficient Environment	19.5% - 23.5% OSHA limit	Respirator based on air monitoring results or use SCBA/Airline <ul style="list-style-type: none"> <li>Self-Contained Breathing Apparatus (SCBA) in positive pressure mode (APF= 10,000)</li> <li>Airline respirators with emergency escape bottles in positive pressure mode (APF= 10,000)</li> </ul>	SCBA / Airline respirators approved for IDLH or unknown conditions
Respirable Crystalline Silica	<ul style="list-style-type: none"> <li>50 µg/m3 OSHA TWA</li> </ul>	<ul style="list-style-type: none"> <li>Half-face air purifying respirator with HEPA filter/cartridges (APF = 10)</li> <li>Full-face air purifying respirator with HEPA filter/cartridges (APF= 50)</li> </ul>	<ul style="list-style-type: none"> <li>500 µg/m3 for half-face air purifying respirator with HEPA filter/cartridges</li> <li>2,500 µg/m3 for full-face air purifying respirator with HEPA filter/cartridges</li> </ul>
Any contaminants suspected of being <b>above the Permissible Exposure Limit</b>	<ul style="list-style-type: none"> <li>See OSHA's Permissible Exposure Limit</li> </ul>	<ul style="list-style-type: none"> <li>½ mask APR, full face APR, supplied Air/SCBA</li> <li>the level of NIOSH approved respiratory protection, and the types of cartridges used are dependent upon air monitoring results</li> </ul>	Contact HSER to conduct air monitoring
Any <b>IDLH</b> (Immediately Dangerous to Life or Health) atmosphere	<ul style="list-style-type: none"> <li>See NIOSH</li> </ul>	<ul style="list-style-type: none"> <li>Self-Contained Breathing Apparatus (SCBA) in positive pressure mode (APF= 10,000)</li> <li>Airline respirators with emergency escape bottles in positive pressure mode (APF= 10,000)</li> </ul>	

\* Respirator types identified for each respiratory hazard and job task **shall** meet or exceed the required level of employee protection as outlined in OSHA's Table 1 – Assigned Protection Factors (1910.134(d)).

## Appendix B – Inspection, Cleaning and Storage of Respirators

### Inspection

Respirators **shall** be inspected, before each use. All emergency respirators **shall** be inspected monthly not to exceed 30 days. Any respirator found to be not functioning properly **shall** be replaced, repaired, or discarded. The following **shall** be considered during inspection:

- Rubber face-piece:
  - Cracked or broken air-purifying element holder(s)
  - Excessive dirt
  - Cracks, tears, or holes
  - Distortion
  - Cracked, scratched, or loose-fitting lens (full face)
  - Incorrectly mounted full face-piece lens or broken/missing mounting clips
  
- Head Strap:
  - Breaks or tears
  - Loss of elasticity
  - Broken or malfunctioning buckles/attachments
  - Excessively worn serrations on head piece
  - Harness which might allow the face-piece to slip
  
- Inhalation/Exhalation Valves:
  - Detergent residue, dust particles, dirt, or hair on valve or valve seat
  - Cracks, tears, distortion in valve material or valve seat
  - Improper insertion of the valve body in the face-piece
  - Cracks, breaks, or chips in the valve body, particularly in the sealing surface
  - Improper installation of the valve in the valve body
  
- Filter elements:
  - Incorrect cartridge, canister, or filter for the hazard
  - Missing or worn gaskets
  - Worn threads
  - Cracks or dents in filter housing
  - Incorrect installation, loose connections, or cross-threading in holder
  - Outdated cartridge or canister
  - SCBAs: Air and oxygen cylinders pressure is maintained at or above 90% of the manufacturer's recommended pressure level and the regulator and low-pressure warning devices function properly

## CLEANING, DISINFECTION AND STORAGE

Shared respirators must be cleaned and disinfected after each use to ensure that the equipment is ready for the next user. Single user respirators may be cleaned as often as required. Between thorough cleaning, single user respirators can be wiped with alcohol-free disposable wipes.

Cleaning and disinfecting steps:


- Remove any filters, cartridges or canisters and discard in accordance with manufacturer's guidelines.
- Wash face pieces and breathing tubes in detergent and warm water (120° F maximum) or cleaner-disinfectant solution. Use a hand brush to facilitate removal of dirt. When the cleaner used does not contain a disinfecting agent, respirator components should be immersed in an approved disinfectant solution.
- Rinse completely in clean, warm water.
- Air-dry the equipment in a clean area.
- Clean other parts as recommended by manufacturer.
- Inspect valves, head straps and other parts and replace them with new parts if defective.

All respirators **shall** be stored to protect them from damage, contamination, dust, sunlight, extreme temperatures, excessive moisture, and damaging chemicals. Respirators **shall** be packed or stored to prevent deformation of the face-piece and exhalation valve.

Routinely used respirators, such as dust respirators, may be placed in plastic bags and stored in clean cabinets in convenient locations in the work area.

Respirators designated for emergency use **shall** be strategically located for quick accessibility in clearly marked and highly visible compartments. Emergency use respirators **shall** be stored fully charged.

## Appendix C – Voluntary Respirator Use Form

	<b>VOLUNTARY USE OF RESPIRATOR FORM</b>
Document Number: HSER-SAF-EXE-FRM-070 Version Number: 1.0	Effective Date: 09/23/25 Page 1 of 1
<p>This form is used to document the communication to employees who wish to voluntarily use respirators of certain related health and safety issues, as mandated by 29 CFR 1910.134, Appendix D. Please read this information and sign the form to indicate that you have received this information. Once signed, a copy of this form shall be kept on file by HSER.</p>	
<p><b>Appendix D to § 1910.134 (Mandatory) Information for Employees Using Respirators When Not Required Under the Standard</b></p> <p>Respirators are an effective method of protection against designated hazards when properly selected and worn. Respirator use is encouraged, even when exposures are below the exposure limit, to provide an additional level of comfort and protection for workers. However, if a respirator is used improperly or not kept clean, the respirator itself can become a hazard to the worker. Sometimes, workers may wear respirators to avoid exposures to hazards, even if the amount of hazardous substance does not exceed the limits set by OSHA standards. If your employer provides respirators for your voluntary use, or if you provide your own respirator, you need to take certain precautions to be sure that the respirator itself does not present a hazard.</p> <p>You should do the following:</p> <ol style="list-style-type: none"><li>1. Read and heed all instructions provided by the manufacturer on use, maintenance, cleaning and care, and warnings regarding the respirator's limitations.</li><li>2. Choose respirators certified for use to protect against the contaminant of concern. NIOSH, the National Institute for Occupational Safety and Health of the U.S. Department of Health and Human Services, certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging. It will tell you what the respirator is designed for and how much it will protect you.</li><li>3. Do not wear your respirator into atmospheres containing contaminants for which your respirator is not designed to protect against. For example, a respirator designed to filter dust particles will not protect you against gases, vapors, or very small solid particles of fumes or smoke.</li><li>4. Keep track of your respirator so that you do not mistakenly use someone else's respirator.</li></ol>	
<p>I acknowledge that I have received and reviewed the information presented on this form.</p>	
Employee Name: _____ Date: _____	
Employee Signature: _____	
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