



**OKLAHOMA**  
**NON-MINING BLASTING PERMIT**  
**APPLICATION**

**AUSTIN POWDER CS, LLC**

**POSTED FROM**

**05/26/2026 to 06/10/2026**

State of Oklahoma  
Department of Mines  
2915 N. Classen Blvd., Ste. 213  
Oklahoma City, OK 73106  
Phone: (405) 427-3859

**The Oklahoma Explosives and Blasting Regulation Act**  
**REQUEST FOR NON-MINING**  
**BLASTING PERMIT**

*In accordance with Title 63 O.S (1995) Section 123.1 et. Seq.*

Check # <u>Mo</u> <u>4735</u>	ODM Receipt # <u>79389</u>
----------------------------------	-------------------------------

DATE: 5-8-2026

PERMIT TYPE:

One Time       Limited Time       Continuous Blasting Operations

If this is for renewal of a current blasting permit, list your permit number: P-050

CORPORATION/BUSINESS NAME AUSTIN POWDER CS, LLC

6901 S. HIGHWAY 253      HUNTINGTON AR      72940

Mailing Address (Street, R.F.D., Box No.)      City      State      Zip

6901 S. HIGHWAY 253      MIDLAND AR      72945

Physical Address of Business (Location where blasting records are held for review)

20-2062352      479-639-2231      NA

Federal Tax ID#      Business Telephone Number      Fax Number

I hereby make application for a permit to use explosives or engage in blasting in the State of Oklahoma.

**NOTE: ANSWER ALL QUESTIONS ON THIS FORM. (If no answer, write "none").  
PROPERLY IDENTIFY AND SECURE ANY ATTACHED EXHIBITS, IF USED.  
PLEASE REFER TO THE SPECIFIC ITEM NUMBER OF THIS FORM.**

**RECEIVED**

MAY 26 2026

DEPT. OF MINES

**IDENTIFICATION OF INTERESTS:** In compliance with section 460:25-5-5 of the Rules and Regulations for Blasting, the APPLICANT is required to furnish the following:

- Please provide the names of every officer, partner, director, or other person performing similar to director of the applicant.

**Marty Dake**

Location Mgr

Name	Address	City	State	Zip	Position
------	---------	------	-------	-----	----------

Thomas C. O'Donnell

Treasurer

Name	Address	City	State	Zip	Position
------	---------	------	-------	-----	----------

**Kevin E. Jones**

Secretary

Name	Address	City	State	Zip	Position
------	---------	------	-------	-----	----------

**Jason Madewell**

President

Name	Address	City	State	Zip	Position
------	---------	------	-------	-----	----------

**Scott Plourde**

Board of Mgrs

Name	Address	City	State	Zip	Position
------	---------	------	-------	-----	----------

**COMPLIANCE INFORMATION**

**460:25-5-6**

- Has the applicant for the permit, or any subsidiary, affiliate or by or under common control with the applicant had a suspended or revoked permit in the last five (5) years?  Yes  No

- If the answer to the above question was yes, applicant should provide the following information:

**460:25-5-6(2)(A)**

Permit Identification # \_\_\_\_\_ Date of Issuance \_\_\_\_\_

**460:25-5-6(2)(B)**

What is the current status of the permit involved?

**RECEIVED**

MAY 26 2026

DEPT. OF MINES

**460:25-5-6 (2)(C)**

Provide the date, location and type of any administrative or judicial proceedings initiated concerning the suspension, revocation or forfeiture:

Date	Location	Type
------	----------	------

**460:25-5-6(2)(D)**

What is the current status of these proceedings?

**RECEIVED**

MAY 26 2026

DEPT. OF MINES

**PLEASE ATTACH COPIES OF THE FOLLOWING:**

- Copy of current Blasters Certificates
- Any information concerning administrative or judicial proceedings in which the applicant is involved and the current status; notification of permit suspension or revocation (460:25-6)
- Proof of Liability Insurance (460:25-11-3)

**VERIFICATION OF BLASTING PERMIT APPLICATION**

In accordance with 460:25-5-8 of the State of Oklahoma Blasting Regulations this is verification that the information contained in this application is true and correct to the best of my information and belief; and the applicant has not had a permit suspended or revoked in the last five years.

*Matt Dole*

Signature of an Official of the Company

**LOCATION MANAGER**

Title of Official

ATTEST:

Subscribed and sworn to before me this 8<sup>th</sup> day of May 20 24

*Debra Ann Bailey*  
Notary Public

My Commission Expires:

April 27<sup>th</sup> 2032

Updated 9/2023



State of Oklahoma Department of Mines  
2915 N. Classen Blvd., Ste. 213  
Oklahoma City, OK 73106  
Phone: (405) 427-3859

**CERTIFIED BLASTERS\***  
FOR INFORMATIONAL PURPOSES ONLY

OAC 460:25-13-6 (b) states "The blaster certification shall be carried by the blaster or shall be on file at the blasting area during the blasting operation."

---

BLASTER'S STATE CERTIFICATION NUMBER: 1112 OKLAHOMA  
ISSUED DATE: 2/28/25 EXPIRATION DATE: 2/28/27  
Name of Certified Blaster: EDWARD S. McBRIDE Telephone Number: 479-461-5001

---

BLASTER'S STATE CERTIFICATION NUMBER: 1400 OKLAHOMA  
ISSUED DATE: 2/28/25 EXPIRATION DATE: 2/28/27  
Name of Certified Blaster: BRENT K. McBRIDE Telephone Number: 479-461-5004

---

BLASTER'S STATE CERTIFICATION NUMBER: 1897 OKLAHOMA  
ISSUED DATE: 2/28/25 EXPIRATION DATE: 2/28/27  
Name of Certified Blaster: JACOB TAYLOR Telephone Number: 479-255-9656

---

BLASTER'S STATE CERTIFICATION NUMBER: 1968 OKLAHOMA  
ISSUED DATE: 5/31/25 EXPIRATION DATE: 5/31/27  
Name of Certified Blaster: ANDREW McBRIDE Telephone Number: 479-255-8126

---

BLASTER'S STATE CERTIFICATION NUMBER: \_\_\_\_\_  
ISSUED DATE: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_  
Name of Certified Blaster: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

---

BLASTER'S STATE CERTIFICATION NUMBER: \_\_\_\_\_  
ISSUED DATE: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_  
Name of Certified Blaster: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

**RECEIVED**  
MAY 26 2026  
DEPT. OF MINES

**\*A current certification is required to conduct blasting.**

**RECEIVED**

MAY 26 2026

DEPT. OF MINES

Date: 02-28-2025  
Expires: 02-28-2027

OMTID: 2836  
Certificate NO. 1112



This certifies that **SHANE MCBRIDE**  
has completed 8 Recertification hours for Certified Blaster  
as prescribed by the Oklahoma Department of Mines.

*Michael Reed*  
Director

RECEIVED

MAY 26 2026

DEPT. OF MINES

Plate 0228 2025  
Expires 02/26/2027

This certifies that **BRENT K. MCGRIDE**  
has completed a Recertification hours for Certified Blaster  
as prescribed by the Oklahoma Department of Mines.



Director

*Michael David*

DATE: 05/26/2026  
Certificate No. 1400

Date: 02-28-2025  
Expires: 02-28-2027

OMTI ID: 17214  
Certificate NO: 1897

STATE OF OKLAHOMA  
MINING COMMISSION  
BLASTER CERTIFICATE

This certifies that **JACOB M. TAYLOR**  
has completed 8 Recertification hours for Certified Blaster  
as prescribed by the Oklahoma Department of Mines.

*Michael Reed*  
Director

**RECEIVED**

MAY 26 2026

DEPT. OF MINES

Date: 05/20/2025  
Expires: 05/31/2027

OMTI ID: 20536  
Certificate NO: 1968



This certifies that **ANDREW KADE MCBRIDE**  
has completed 24 initial hours for Certified Blaster  
as prescribed by the Oklahoma Department of Mines.

*Michael Reed*  
Director

**RECEIVED**  
MAY 26 2026  
DEPT. OF MINES

