



U.S. Department of Justice  
National Drug Intelligence Center



# Gulf Coast High Intensity Drug Trafficking Area



## Drug Market Analysis 2011

## **Source Summary Statement**

The National Drug Intelligence Center (NDIC) has high confidence in this drug market analysis as it is based on multiple sources of information that have proved highly reliable in prior NDIC, law enforcement, and intelligence community reporting. Quantitative data, including seizure, eradication, and arrest statistics, were drawn from data sets maintained by federal, state, or local government agencies. Discussions of the prevalence and consequences of drug abuse are based on published reports from U.S. Government agencies and interviews with public health officials deemed reliable because of their expertise in the diagnosis and treatment of drug abuse. Trends and patterns related to drug production, trafficking, and abuse were identified through detailed analysis of coordinated counterdrug agency reporting and information. NDIC intelligence analysts and field intelligence officers obtained this information through numerous interviews with law enforcement and public health officials (federal, state, and local) in whom NDIC has a high level of confidence based on previous contact and reporting, their recognized expertise, and their professional standing and reputation within the U.S. counterdrug community. This report was reviewed and corroborated by law enforcement officials who have jurisdiction in the Gulf Coast High Intensity Drug Trafficking Area and possess an expert knowledge of its drug situation.



**U.S. Department of Justice  
National Drug Intelligence Center**



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This assessment is an outgrowth of a partnership between the NDIC and HIDTA Program for preparation of annual assessments depicting drug trafficking trends and developments in HIDTA Program areas. The report has been coordinated with the HIDTA, is limited in scope to HIDTA jurisdictional boundaries, and draws upon a wide variety of sources within those boundaries.



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## Executive Summary

The overall drug threat in the Gulf Coast High Intensity Drug Trafficking Area (HIDTA) region remained fairly consistent from 2009 through 2010. Cocaine distribution and abuse are the principal drug threats to the region. Methamphetamine production, distribution, and abuse and controlled prescription drug (CPD) distribution and abuse present significant and growing threats. Methamphetamine remains widely available throughout the region; however, a change in pseudoephedrine and ephedrine sales regulations in Mississippi has led to decreased methamphetamine production in the state. Marijuana distribution and abuse are secondary drug threats but pose a persistent problem in the region. Heroin availability and abuse are limited overall; however, the drug poses a significant threat in some areas, including Birmingham and Huntsville (AL), Memphis (TN), and New Orleans (LA). The abuse of synthetic cannabinoids and synthetic cathinone products, especially by teens and young adults, is an issue of concern in the region.

Key issues identified in the Gulf Coast HIDTA region include the following:

- Cocaine poses the greatest drug threat to the Gulf Coast HIDTA region because of its strong and stable availability in most drug markets in the region and the crime associated with its trafficking and abuse.
- Methamphetamine is widely available throughout most of the Gulf Coast HIDTA region. Most of the available methamphetamine is locally produced; however, Mexican ice methamphetamine is widely available in Arkansas, where Mexican traffickers have established a regional distribution hub.
- A Mississippi law that requires a prescription for the purchase of pseudoephedrine or ephedrine products has led to a significant decrease in the number of methamphetamine laboratories seized in the state and has forced illicit pseudoephedrine purchasers into neighboring states.
- The availability and abuse of prescription opioids have increased in the Gulf Coast HIDTA region over the past 12 to 18 months.

## Key Issues<sup>a</sup>

**Cocaine poses the greatest drug threat to the Gulf Coast HIDTA region because of its strong and stable availability in most drug markets in the region and the crime associated with its trafficking and abuse.**

Cocaine is the greatest drug threat to the Gulf Coast HIDTA region because of its widespread availability and the challenges that cocaine distribution present to law enforcement.<sup>1</sup> According to the National Drug Intelligence Center (NDIC) National Drug Threat Survey (NDTS) 2011, 39 of the 96 law enforcement agency respondents in the Gulf Coast HIDTA region identify cocaine (crack or powder) as the drug that poses the greatest threat to their jurisdictions.<sup>b, 2</sup> Furthermore, cocaine-related criminal activities create significant law enforcement challenges in the region as officers attempt to curtail the negative impact of cocaine trafficking and abuse. This impact is reflected in NDTS 2011 data revealing that 61 of the 96 law enforcement respondents in the Gulf Coast HIDTA region identify either crack or powder cocaine as the drug that most contributes to violent crime in their jurisdictions, and 56 of the 96 report the same for property crime.<sup>3</sup> Additionally, interviews with law enforcement officers and drug treatment providers indicate that crack cocaine abuse is prevalent throughout the region, further straining law enforcement and drug treatment systems.<sup>4</sup>

Strong and stable supplies of cocaine to most drug markets in the region<sup>c</sup> contribute to the threat posed by the drug.<sup>5</sup> For instance, 86 of the 96 law enforcement agency respondents to the NDTS 2011 reported that crack cocaine is available at moderate or high levels in their jurisdictions.<sup>6</sup> Cocaine seizures also increased in the Gulf Coast HIDTA region in 2010, further supporting the assertion of stable availability at high levels. Cocaine seized through Gulf Coast HIDTA initiatives in 2010 totaled 1,339 kilograms—a 58 percent increase from the more than 846 kilograms seized in 2009.<sup>7</sup> (See Table B1 in Appendix B.) Moreover, law enforcement officers report that cocaine is available in sufficient quantities to meet demand and that cocaine prices have remained relatively stable over the past 12 months in most Gulf Coast HIDTA drug markets.<sup>8</sup> For example, midlevel prices for cocaine in Mobile (AL), where law enforcement officers report that availability is stable, have remained unchanged at approximately \$1,000 per ounce from early 2010 to early 2011.<sup>9</sup>

**Methamphetamine is widely available throughout most of the Gulf Coast HIDTA region. Most of the available methamphetamine is locally produced; however, Mexican ice methamphetamine is widely available in Arkansas, where Mexican traffickers have established a regional distribution hub.**

a. For a general overview of the drug threat in the Gulf Coast HIDTA region, see Appendix A.

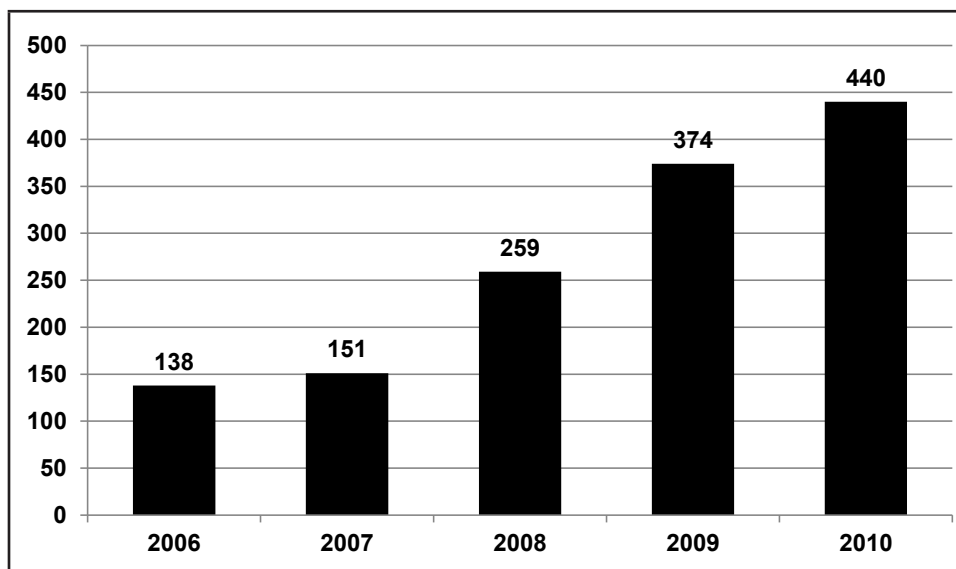
b. The NDTS is conducted annually by NDIC to solicit information from a representative sample of state and local law enforcement agencies. NDIC uses this information to produce national, regional, and state estimates of various aspects of drug trafficking activities. NDTS data reflect agencies' perceptions based on their analysis of criminal activities that occurred within their jurisdictions during the past year. NDTS 2011 data cited in this report are raw, unweighted responses from federal, state, and local law enforcement agencies solicited through either NDIC or the Office of National Drug Control Policy (ONDCP) HIDTA program as of March 30, 2011.

c. The Drug Enforcement Administration (DEA) Atlanta Division and Gulf Coast HIDTA report that Shelby County (TN) is still experiencing a restriction in cocaine availability following the widely reported cocaine shortage in most U.S. markets starting in 2007. Cocaine availability in other Gulf Coast HIDTA markets has rebounded since 2007 to levels that meet local demand.



Law enforcement officials report that methamphetamine availability is consistently high throughout most of the Gulf Coast HIDTA region.<sup>10</sup> For instance, NDTs 2011 data reveal that 73 of the 96 law enforcement agency respondents in the Gulf Coast HIDTA region indicate that methamphetamine is available at high or moderate levels in their jurisdictions.<sup>11</sup> Most of the methamphetamine available in the Gulf Coast HIDTA region, especially in Alabama, Louisiana, Mississippi, and Tennessee, is produced locally.<sup>12</sup> According to National Seizure System (NSS) data, the number of methamphetamine laboratories seized in all Gulf Coast HIDTA counties increased nearly 220 percent from 2006 through 2010.<sup>13</sup> (See Figure 1, below, and Table B2 in Appendix B.) However, as a result of recent legislation in Mississippi, seizures in the state decreased during the latter half of 2010. (See text discussion on page 4.) Most of the methamphetamine laboratories seized in the region are small-capacity laboratories, which typically yield less than 2 ounces of methamphetamine per production cycle.<sup>14</sup> Many of these laboratories are one-pot laboratories that use a simplified production method and are operated by Caucasian independent dealers.<sup>15, d</sup> Methamphetamine production by the one-pot method has increased significantly in the Gulf Coast HIDTA region over the last 5 years;<sup>16</sup> in response, legislators in Alabama<sup>e</sup> and Mississippi<sup>f</sup> have enacted new laws aimed at better regulating the sale of products containing pseudoephedrine and ephedrine.<sup>17, g</sup>

**Figure 1. Methamphetamine Laboratories Seized in Gulf Coast HIDTA Counties, 2006–2010**



Source: National Seizure System, data run date May 10, 2011.

- d. The one-pot methamphetamine production method is a variation of the lithium ammonia method, also commonly referred to as the Nazi or Birch method of production. Instead of producing methamphetamine through a series of sequential steps, the one-pot method is concluded in a single reaction vessel (typically a 2-liter plastic soda bottle), and all ingredients are added at once. The mixture is left to react, producing the necessary ammonia, which then reacts with the lithium metal to convert the pseudoephedrine into methamphetamine.
- e. Alabama enacted a law requiring all retailers to log each purchase of any product containing pseudoephedrine or ephedrine into an electronic tracking database that blocks illicit purchases. This tracking system became operational on January 1, 2011.
- f. Mississippi enacted a law that requires a prescription for purchasing any product containing pseudoephedrine or ephedrine. This law went into effect on July 1, 2010.
- g. Pseudoephedrine and ephedrine are precursor chemicals used to produce methamphetamine.

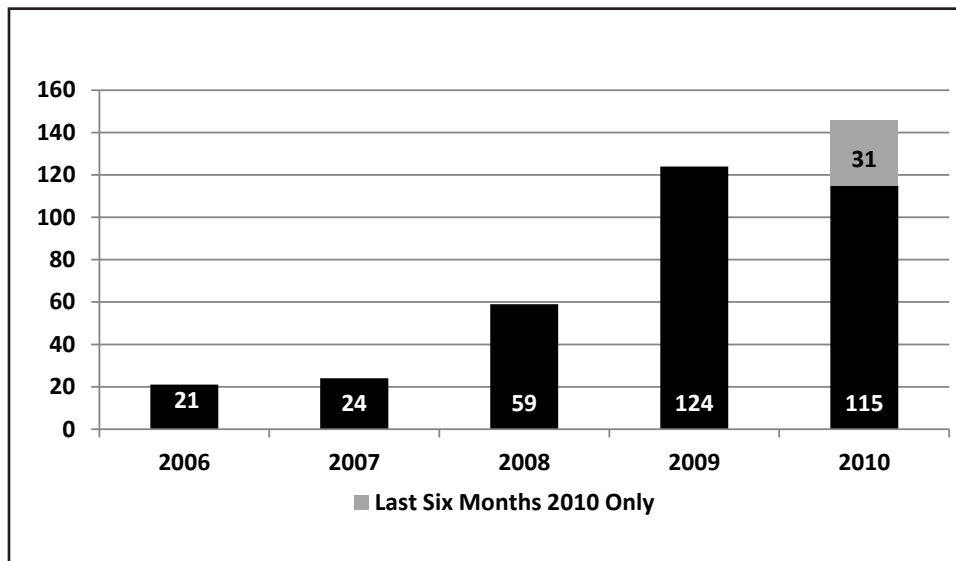
Mexican drug trafficking organizations (DTOs) have increased their ice methamphetamine trafficking operations in Arkansas over the past 12 months.<sup>18</sup> They have established distribution operations in small towns and suburban areas in central Arkansas and are supplying ice methamphetamine to drug markets throughout Arkansas and the Midwest.<sup>19</sup> For example, a federal indictment in October 2010 related to Operation Ice Princess<sup>h</sup> revealed that a Mexican DTO was operating in Arkansas and Kansas City (KS) and was supplying multipound quantities of ice methamphetamine to Gulf Coast HIDTA counties in Arkansas.<sup>20</sup> This DTO had direct ties to several towns in Mexico and was supplied by affiliates of the Gulf and Tijuana Cartels.<sup>21</sup> Additionally, Mexican DTOs have begun distributing small quantities of ice methamphetamine in Alabama and Mississippi over the past 12 months.<sup>22</sup> The methamphetamine market in these states is currently dominated by locally produced methamphetamine.<sup>23</sup> However, law enforcement officials believe that Mexican DTOs are taking advantage of the unreliable availability of locally produced methamphetamine in Alabama and Mississippi resulting from the recent enactment of more stringent regulations on pseudoephedrine and ephedrine sales in those states and are introducing ice methamphetamine to the local abuser population.<sup>24</sup>

**A Mississippi law that requires a prescription for the purchase of pseudoephedrine or ephedrine products has led to a significant decrease in the number of methamphetamine laboratories seized in the state and has forced illicit pseudoephedrine purchasers into neighboring states.**

Mississippi House Bill 512, which requires a prescription for the purchase of any product containing pseudoephedrine or ephedrine in the state, was enacted on July 1, 2010.<sup>25</sup> Mississippi is the second state to pass a law requiring prescriptions for pseudoephedrine and ephedrine products (Oregon was the first, in 2006).<sup>26</sup> Legislators enacted this law in response to the rapidly growing number of methamphetamine laboratory seizures in Mississippi in recent years.<sup>27</sup> In the last 6 months of 2010, after the law was enacted, the number of methamphetamine laboratory seizures declined significantly throughout the state, including in the Gulf Coast HIDTA counties, owing to the lack of readily available pseudoephedrine supplies.<sup>28</sup> (See Figure 2 on page 5.) NSS data reveal a sharp decrease in the number of methamphetamine laboratories seized in Gulf Coast HIDTA counties in Mississippi from the first half of 2010 (115 laboratories) to the second half (31 laboratories).<sup>29</sup> Furthermore, the Narcotics Task Force of Jackson County documented a sharp decrease in the number of methamphetamine laboratories seized during the same period, from 121 laboratories to 60 laboratories.<sup>30</sup> These figures, along with numerous statements made by law enforcement officers in 2011 regarding the impact of the new law on methamphetamine production, indicate that the law has been effective in reducing methamphetamine production in Mississippi.<sup>31</sup>

h. The federal, state, and local agencies that participated in Operation Ice Princess are as follows: Bureau of Alcohol, Tobacco, Firearms and Explosives; DEA, Little Rock District Office; DEA Little Rock HIDTA Group 61, composed of Federal Bureau of Investigation, Internal Revenue Service, Arkansas Highway Police, Little Rock Police Department, Jacksonville Police Department, and Pine Bluff Police Department; U.S. Attorneys Office, Eastern District of Arkansas; U.S. Marshals Service; Arkansas National Guard; Arkansas State Police, Arkansas Highway Police; Central Arkansas Drug Task Force; 2nd Judicial District Drug Task Force; 16th Judicial District Drug Task Force; 20th Judicial District Drug Task Force; 2nd Judicial District Prosecuting Attorney's Office; 16th Judicial District Prosecuting Attorney's Office; 20th Judicial District Prosecuting Attorney's Office; Craighead County Sheriff's Office; Independence County Sheriff's Office; Jackson County Sheriff's Office; White County Sheriff's Office; Jonesboro Police Department; and Searcy Police Department.

**Figure 2. Methamphetamine Laboratories Seized in Gulf Coast HIDTA Counties in Mississippi, 2006–2010**



Source: National Seizure System, data run date May 10, 2011.

Note: Most of the methamphetamine laboratories seized in 2010 were confiscated before Mississippi House Bill 512 was enacted. Of the 146 laboratories seized in 2010, 115 were seized in the first 6 months of the year, and 31 were seized in the last 6 months of the year (after enactment).

Law enforcement officers report that the more stringent restrictions on pseudoephedrine sales in Mississippi have led many pseudoephedrine smurfing<sup>i</sup> groups to target pharmacies in the neighboring states of Alabama, Louisiana, and Tennessee in order to continue operations.<sup>32</sup> For instance, Alabama's new electronic pseudoephedrine sales tracking system, a statewide database that rejects purchases of pseudoephedrine products if the purchaser's monthly limit has been reached, blocked 26,354 attempted pseudoephedrine purchases in the first 3 months of 2011.<sup>33, j</sup> While it is not possible to ascertain how many of the blocked attempts were from Mississippi-based smurfing groups, law enforcement officers interviewed in early 2011 indicated a strong likelihood that many of these illicit transactions were attempted by Mississippi residents.<sup>34</sup> In addition, law enforcement officers report increased use of fraudulent identification by pseudoephedrine purchasers in Alabama, who they believe are seeking to circumvent the Mississippi law and Alabama's tracking system.<sup>35</sup> Moreover, pseudoephedrine restrictions in Mississippi have led to increased pseudoephedrine brokering operations by individuals who are motivated by the opportunity to earn high profits from the illicit sale of pseudoephedrine.<sup>36</sup> Law enforcement officers report that pseudoephedrine products, which are purchased legally at retail stores for approximately \$10 per box,<sup>37</sup> are commonly sold illicitly on the street for \$50 or more per box.<sup>38</sup>

**The availability and abuse of prescription opioids have increased in the Gulf Coast HIDTA region over the past 12 to 18 months.**

- i. Pseudoephedrine smurfing is a method used by some methamphetamine producers to acquire large quantities of pseudoephedrine by enlisting the assistance of several friends or associates (often referred to as "smurfers") to make purchases at or below the legal thresholds from multiple retail locations. Smurfers are often addicts who trade the pseudoephedrine for finished methamphetamine.
- j. This tracking system became operational on January 1, 2011, so figures of attempted illicit transactions for prior months and years are unavailable.

Law enforcement officers report that increased diversion of CPDs from rogue pain management clinics (commonly referred to as pill mills) in Florida and Texas has led to increased availability and abuse of these drugs in the Gulf Coast HIDTA region.<sup>39</sup> Officers report that local residents often travel to Florida or Texas to acquire prescription drugs at pill mills and either transport them back by car<sup>40</sup> or, in an attempt to thwart highway interdiction operations, mail the drugs to their home addresses.<sup>41</sup> In addition, some law enforcement officials report that distributors and abusers are diverting CPDs through local doctor-shopping, prescription fraud, and pharmacy robberies.<sup>42</sup> CPD seizures increased in the Gulf Coast HIDTA region in 2010, further supporting the notion of increased availability. In 2010, HIDTA initiatives reported a greater than 15 percent increase in CPD seizures from 2009 (86,279 dosage units) through 2010 (99,612 dosage units).<sup>43</sup> Additionally, NDTs 2011 data indicate that 91 of the 96 law enforcement respondents in the Gulf Coast HIDTA region report that CPDs are available at moderate or high levels in their jurisdictions.<sup>44</sup> Moreover, law enforcement officials noted particular increases in CPD availability in southern Alabama, southern Mississippi, and central and northwestern Louisiana.<sup>45</sup>

The increased availability of CPDs throughout the region has led to increasing abuse. Complete and current data regarding drug treatment for the Gulf Coast HIDTA region are not available; however, law enforcement officials and drug treatment providers indicate that CPD abuse has increased, especially in southern Alabama, southern Mississippi, and central and northwestern Louisiana over the last 12 to 18 months.<sup>46</sup> For example, a treatment provider at a facility in Louisiana indicated that the most significant trend observed there in 2010 was an increase in the number of people seeking treatment for prescription opioid abuse.<sup>47</sup> Similarly, a treatment provider at a facility in southern Mississippi reported that the majority of individuals who seek treatment are doing so for prescription drug addiction.<sup>48</sup> The most commonly abused CPDs in the region are prescription opioid pain relievers containing oxycodone or hydrocodone.<sup>49</sup>

## Outlook

NDIC assesses with medium confidence<sup>k</sup> that cocaine will remain the greatest drug threat to the Gulf Coast HIDTA region over the next 12 months because of the drug's high availability and associated criminal activity. Additionally, crack cocaine abuse will remain prevalent throughout the region.

NDIC assesses with medium confidence that Mississippi House Bill 512 will further reduce local methamphetamine production in Mississippi and will likely cause pseudoephedrine smurfing groups to target pharmacies in neighboring states to continue their operations. Furthermore, NDIC assesses with medium confidence that the implementation of a statewide tracking system for pseudoephedrine and ephedrine purchases in Alabama will likely lead to increased use of fraudulent identification by individuals who attempt to elude the state's tracking system. Additionally,

k. **High Confidence** generally indicates that the judgments are based on high-quality information or that the nature of the issue makes it possible to render a solid judgment. **Medium Confidence** generally means that the information is credibly sourced and plausible but can be interpreted in various ways, or is not of sufficient quality or corroborated sufficiently to warrant a higher level of confidence. **Low Confidence** generally means that the information is too fragmented or poorly corroborated to make a solid analytic inference, or that there are significant concerns or problems with the sources.

NDIC assesses with medium confidence that more stringent regulations on pseudoephedrine and ephedrine sales in Alabama and Mississippi will likely result in an increase in Mexican ice methamphetamine trafficking and availability in these states as Mexican DTOs exploit decreasing local methamphetamine production.

NDIC assesses with medium confidence that the threat posed by CPDs will rise in the Gulf Coast HIDTA region because of increased availability and demand for the drugs. CPDs acquired from pill mills in Florida and Texas, as well as through local doctor-shopping, prescription fraud, and pharmacy robberies, will supply increasing demand.



## Appendix A. Gulf Coast HIDTA Overview

Map A1. Gulf Coast High Intensity Drug Trafficking Area



The Gulf Coast HIDTA region encompasses 26 counties and parishes in Alabama, Arkansas, Louisiana, Mississippi, and Tennessee. The region is a primary transportation corridor for illicit drugs smuggled from the Southwest Border area and Mexico and destined for eastern drug markets, especially Atlanta (GA).<sup>50</sup> (See Map A1.) DTOs transport illicit drugs over the interstate highways that intersect the region, primarily using private vehicles with hidden compartments, rental cars, and commercial tractor-trailers.<sup>51</sup> Mexican DTOs are the principal wholesale suppliers of powder cocaine, ice methamphetamine, commercial-grade marijuana, and Mexican brown powder and black tar heroin to the Gulf Coast region.<sup>52</sup> These organizations supply drugs to most other midlevel and retail drug distributors in the region, particularly African American criminal groups.<sup>53</sup>

The coastal areas of the Gulf Coast HIDTA region were tremendously damaged by Hurricane Katrina in 2005, causing extensive physical destruction that is still under repair in some areas. The hardest-hit areas lie between Biloxi (MS) and New Orleans. The rebuilding effort has caused a significant influx of both legal and illegal Mexican immigrants who traveled to the area in



search of work.<sup>54</sup> Mexican drug traffickers attempt to assimilate into this growing Hispanic population in order to mask their drug trafficking activities.<sup>55</sup>

Cocaine poses the greatest drug threat to the Gulf Coast HIDTA region because of the drug's high level of availability and associated criminal activity.<sup>56</sup> (See [Key Issues on page 2.](#)) Methamphetamine production, distribution, and abuse<sup>57</sup> and CPD distribution and abuse present significant and growing threats to the region.<sup>58</sup> For example, 87 of the 96 law enforcement agency respondents to the NDTs 2011 in the Gulf Coast HIDTA region identify cocaine (39 respondents), methamphetamine (27 respondents), or CPDs (21 respondents) as the greatest drug threat to their jurisdictions.<sup>59</sup>

Marijuana poses a lower threat to the Gulf Coast HIDTA region than cocaine, methamphetamine, and CPDs. Marijuana availability and abuse remain stable at high levels throughout the region.<sup>60</sup> Much of the marijuana available in the region is commercial-grade Mexican marijuana,<sup>61</sup> however, over the past 12 months, the availability of high-potency marijuana supplied from sources in California, Colorado, and Oregon has increased in some markets in the region.<sup>62</sup> In fact, Gulf Coast HIDTA officials report that the diversion and subsequent distribution and abuse of medical marijuana from sources in Colorado have become a concern, particularly in Arkansas.<sup>63</sup> Locally grown marijuana is also available in the region; however, the extent of cannabis grow operations in Gulf Coast HIDTA counties cannot be fully evaluated because county-level cannabis eradication data are not available.<sup>64</sup>

Heroin poses a low threat to the HIDTA region overall. Heroin availability and abuse in the Gulf Coast HIDTA region are most prevalent in the New Orleans metropolitan area. For example, according to NDTs 2011 data, law enforcement agency respondents in New Orleans report that heroin poses the greatest drug threat and is available at high levels in their jurisdictions.<sup>65</sup> Furthermore, Gulf Coast HIDTA officials report that heroin distribution and abuse are significant contributors to crime in New Orleans, where levels of violent and property crime remain high.<sup>66</sup> Heroin also poses a significant threat to Birmingham, Huntsville, and Memphis.<sup>67</sup> Throughout most of the region, however, heroin is available at low levels. For example, 66 of the 96 law enforcement respondents to the NDTs 2011 report that heroin is available at low levels or not available at all in their jurisdictions.<sup>68</sup>

Law enforcement officials in the region report some abuse of synthetic cannabinoids, such as Spice and K2, especially among teens and young adults.<sup>69</sup> In 2010, every state in the Gulf Coast HIDTA region passed laws or authorized emergency bans prohibiting the sale of products containing the chemicals commonly found in these synthetic cannabinoids.<sup>70</sup> However, law enforcement officers report that manufacturers of these products have responded to the bans by altering the chemical compounds so that the products are no longer prohibited.<sup>71</sup> Consequently, new legal forms of synthetic cannabinoids, similar to Spice and K2, are being sold in some areas in the region.<sup>72</sup>

Law enforcement officials also report abuse of synthetic cathinone products in some areas of the region.<sup>73</sup> Gulf Coast HIDTA officials report that abuse of synthetic cathinone products resulted in two suicides in Louisiana in late 2010 and several poison control calls and emergency department admissions throughout the Gulf Coast HIDTA region in 2010 and early 2011.<sup>74</sup> Synthetic cathinone products, typically marketed as “bath salts” and “plant food” under various



names (such as Ivory Wave and Blizzard) were sold in convenience stores and head shops throughout the region in 2010 and early 2011, as well as on many Internet sites, including popular Internet auction sites.<sup>75</sup> However, laws or emergency bans against the sale of products containing chemicals commonly found in these synthetic cathinone products were enacted in early 2011 in Alabama, Arkansas, Louisiana, and Mississippi, and a law will be enacted on July 1, 2011, in Tennessee.<sup>76</sup>



## Appendix B. Tables

**Table B1. Drugs Seized Through Gulf Coast HIDTA Initiatives, in Kilograms, 2010**

	<b>Powder Cocaine</b>	<b>Crack Cocaine</b>	<b>Methamphetamine</b>	<b>Marijuana</b>	<b>Heroin</b>	<b>CPDs (in dosage units)</b>	<b>MDMA (in dosage units)</b>
<b>Total Seizures</b>	1,318.57	20.48	64.15	11,751.58	15.03	99,612	573,004

Source: Gulf Coast High Intensity Drug Trafficking Area.

**Table B2. Methamphetamine Laboratories Seized in Gulf Coast HIDTA Counties, 2006–2010**

<b>State</b>	<b>County</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
<b>Alabama</b>	Baldwin	3	1	4	4	2
	Jefferson	2	1	22	36	34
	Madison	6	13	17	14	11
	Mobile	2	6	13	11	24
	Montgomery	0	0	0	2	6
	Morgan	16	19	43	42	34
<b>Alabama Total</b>		<b>29</b>	<b>40</b>	<b>99</b>	<b>109</b>	<b>111</b>
<b>Arkansas</b>	Benton	7	11	12	22	23
	Jefferson	7	1	7	5	4
	Pulaski	41	36	32	33	32
	Washington	21	30	34	29	23
<b>Arkansas Total</b>		<b>76</b>	<b>78</b>	<b>85</b>	<b>89</b>	<b>82</b>
<b>Louisiana</b>	Bossier	2	0	0	0	0
	Caddo	0	1	1	5	8
	Calcasieu	0	2	1	6	10
	East Baton Rouge	0	0	0	1	2
	Jefferson	0	0	0	1	1
	Lafayette	0	0	0	0	4
	Orleans	0	0	0	0	0
	Ouachita	3	1	0	14	19
<b>Louisiana Total</b>		<b>5</b>	<b>4</b>	<b>2</b>	<b>27</b>	<b>44</b>
<b>Mississippi</b>	Hancock	1	1	3	10	5
	Harrison	3	12	31	55	34
	Hinds	8	2	1	12	18
	Jackson	3	4	17	36	61
	Lafayette	0	1	1	2	3
	Madison	0	0	1	0	2
	Rankin	6	4	5	9	23
<b>Mississippi Total</b>		<b>21</b>	<b>24</b>	<b>59</b>	<b>124</b>	<b>146</b>
<b>Tennessee</b>	Shelby	7	5	14	25	57
<b>Tennessee Total</b>		<b>7</b>	<b>5</b>	<b>14</b>	<b>25</b>	<b>57</b>
<b>Grand Total</b>		<b>138</b>	<b>151</b>	<b>259</b>	<b>374</b>	<b>440</b>

Source: National Seizure System, data run date May 10, 2011.



## Endnotes

1. National Drug Intelligence Center (NDIC), National Drug Threat Survey (NDTS) 2011; U.S. Attorneys Office, Southern District of Alabama, interview by NDIC intelligence analyst (IA), March 14, 2011; Federal Bureau of Investigation (FBI), Mobile (AL) Field Division, interview by NDIC IA, March 14, 2011; Mobile Police Department, Mobile County Street Enforcement Narcotics Team (MCSENT), interview by NDIC IA, March 14, 2011; Drug Enforcement Administration (DEA), New Orleans (LA) Division, Mobile (AL) Resident Office, interview by NDIC IA, March 14, 2011; Mobile County Sheriff's Office, interview by NDIC IA, March 15, 2011; FBI, Jackson (MS) Field Division, Pascagoula (MS) Resident Agency, interview by NDIC IA, March 16, 2011; DEA, Atlanta (GA) Division, Memphis (TN) Resident Office, interview by NDIC IA, March 17, 2011; DEA, New Orleans (LA) Division, Jackson (MS) Resident Office, interview by NDIC IA, March 17, 2011.
2. NDIC, NDTS 2011.
3. NDIC, NDTS 2011.
4. U.S. Attorneys Office, Southern District of Alabama, interview by NDIC IA, March 14, 2011; FBI, Mobile (AL) Field Division, interview by NDIC IA, March 14, 2011; Mobile Police Department, MCSENT, interview by NDIC IA, March 14, 2011; Mobile County Sheriff's Office, interview by NDIC IA, March 15, 2011; Foley Police Department, interview by NDIC IA, March 15, 2011; Narcotics Task Force of Jackson County, interview by NDIC IA, March 16, 2011; FBI, Jackson (MS) Field Division, Pascagoula (MS) Resident Agency, interview by NDIC IA, March 16, 2011; DEA, Atlanta (GA) Division, Memphis (TN) Resident Office, interview by NDIC IA, March 17, 2011; DEA, New Orleans (LA) Division, Jackson (MS) Resident Office, interview by NDIC IA, March 17, 2011; Gulf Coast Mental Health Center, Crossroads Recovery Center, interview by NDIC IA, May 6, 2011; O'Brien House, interview by NDIC IA, May 6, 2011.
5. NDIC, NDTS 2011; Mobile Police Department, MCSENT, interview by NDIC IA, March 14, 2011; DEA, New Orleans (LA) Division, Mobile (AL) Resident Office, interview by NDIC IA, March 14, 2011; Mobile County Sheriff's Office, interview by NDIC IA, March 15, 2011; FBI, Jackson (MS) Field Division, Pascagoula (MS) Resident Agency, interview by NDIC IA, March 16, 2011; DEA, New Orleans (LA) Division, Little Rock (AR) Resident Office, interview by NDIC IA, March 17, 2011; Gulf Coast HIDTA, response to NDIC Request for Information (RFI), May 16, 2011; DEA, Atlanta Division, response to NDIC RFI, May 18, 2011.
6. NDIC, NDTS 2011.
7. Gulf Coast HIDTA, response to NDIC RFI, April 14, 2011.
8. Mobile County Sheriff's Office, interview by NDIC IA, March 15, 2011; DEA, New Orleans (LA) Division, Little Rock (AR) Resident Office, interview by NDIC IA, March 17, 2011; DEA, New Orleans (LA) Division, interviews by NDIC Field Intelligence Officer (FIO) for NDIC *National Illicit Drug Prices Year-End 2009 and Mid-Year 2010*; FBI, Jackson (MS) Field Division, Pascagoula (MS) Resident Agency, interview by NDIC IA, March 16, 2011; DEA, New Orleans (LA) Division, Little Rock (AR) Resident Office, interview by NDIC IA, March 17, 2011; NDIC, NDTS 2011; Mobile Police Department, MCSENT, interview by NDIC IA, March 14, 2011; DEA, New Orleans (LA) Division, Mobile Resident Office, interview by NDIC IA, March 14, 2011.
9. Mobile County Sheriff's Office, interview by NDIC IA, March 15, 2011; DEA, New Orleans (LA) Division, interviews by NDIC FIO for NDIC *National Illicit Drug Prices Year-End 2009 and Mid-Year 2010*.
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Foley Police Department  
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Mobile Police Department

### Louisiana

Louisiana State Police

### Mississippi

Mississippi Bureau of Narcotics  
Narcotics Task Force of Jackson County

## Federal

Executive Office of the President  
    Office of National Drug Control Policy  
        Gulf Coast High Intensity Drug Trafficking Area  
U.S. Coast Guard  
    Sector Mobile  
U.S. Department of Commerce  
    U.S. Census Bureau  
U.S. Department of Homeland Security  
    U.S. Immigration and Customs Enforcement  
        Blue Lightning Operations Center  
        Gulfport Office  
        Mobile Office  
U.S. Department of Justice  
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        Atlanta Field Division  
        Memphis Resident Office  
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        El Paso Intelligence Center  
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        New Orleans Field Division  
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        Mobile Resident Office  
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