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BEFORE THE
UNITED STATES SENTENCING COMMISSION

HEARING ON
SENTENCING POLICY FOR METHAMPHETAMINE

AUGUST 5, 2025
WASHINGTON, D.C.

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INTRODUCTION

Chair Reeves and members of the Sentencing Commission, on behalf of the Drug Enforcement Administration (DEA), Louisville Field Division, and the Appalachia High Intensity Drug Trafficking Area (AHIDTA), thank you for this opportunity to discuss the topic of methamphetamine (meth), trafficking trends, and hazards associated with this dangerous drug.

As a Supervisory Special Agent, I currently serve as the HIDTA Task Force Commander for the Chattanooga Resident Office. I have served as a federal law enforcement officer working in clandestine laboratory enforcement with the DEA for over 25 years. I hold numerous DEA certifications regarding investigating clandestine laboratories and the hazards associated with illicit drug manufacturing methods, chemicals hazards associated with clandestine laboratory operations, the law enforcement operations within hazardous environments, and essential operational planning of HazMat operations and hazardous waste disposal operations. I am also a certified DEA Emergency Medical Technician (EMT) through the National Registry of EMTs (NREMT).

I have also served as the DEA Mexico City Country Office Clandestine Laboratory Coordinator responsible for overseeing chemical and clan lab investigations. In that role, I assisted in re-establishing the Government of Mexico's Clandestine Laboratory mitigation program through the development of a bilateral training program through bilateral meetings with Mexican Attorney General's office. During this time, I worked closely with Mexican government officials, forensic chemists, and various other Mexican agencies and departments to respond to seized clandestine laboratories in Mexico and study and analyze illicit production methods by Mexican drug trafficking organizations.

I have also served as a DEA training academy course developer and instructor on domestic clandestine laboratories, where I coordinated and instructed courses for approximately 1200 students every year from federal, state, and local law enforcement. I was later promoted to Unit Chief/Senior Instructor supervising one of DEA's four international training teams responsible for training foreign law enforcement, forensic chemists, and regulatory personnel in the international arena, focusing on clandestine laboratory manufacturing methods of illicit drugs (i.e. methamphetamine and synthetic drugs), processing of illicit clandestine laboratories and hazardous waste mitigation, chemical diversion, and emerging trends in synthetic drugs.

METHAMPHETAMINE

Methamphetamine Hydrochloride is a Schedule II stimulant under the Controlled Substances Act due to its high potential for abuse. Its illicit production methods create toxic environments for producers, first responders, communities, and property owners.

Law Enforcement Officers typically encounter five forms of methamphetamine:

- Powder: usually a white, or off-white powder typically emblematic of a lower purity (adulterated) form of methamphetamine, which can be snorted, injected or taken orally;
- Base: varies in appearance but generally a damp or oily substance with a white, yellow, or brown color, that typically has a higher purity than powder, and can be injected or swallowed;
- High-purity crystalline (sometimes known as “Ice”): ranges from translucent to white and presents in crystalline appearance, and is usually smoked or injected;
- Pill form: illicitly-produced “fake” or “counterfeit” pills manufactured using a counterfeit dye and pill press to imprint a realistic-looking logos such as “M30” (Oxycodone), “XANAX (Alprazolam), or “M367” (hydrocodone), or a novelty logo, such as automobile logos, or the various types of characters. These illicitly manufactured pills contain small amounts of methamphetamine and are often combined with other illicit substances such as ketamine or fentanyl. Because they are illicitly-produced, the exact chemicals and quantities are often unknown and extremely dangerous to ingest.
- Methamphetamine in liquid solution (liquid meth): a form that is often used for easier transportation and smuggling, the methamphetamine must be extracted from the liquid solution (a process known as re-crystallization) prior to consumption.

Experienced manufacturers, habitual users, and trained law enforcement officers may be able to distinguish highly-pure methamphetamine from lower purity methamphetamine that has been heavily adulterated, based on the drug’s appearance (color and texture), smell, and packaging. In the manufacturing phase, methamphetamine has a distinguishable chemical odor. But methamphetamine that is smoked has a distinguishable, sweet smell. Current trends in distribution and the adulteration of methamphetamine with other illicit substances, other than MSM (dimethyl sulfone), like fentanyl, cocaine, ketamine, benzodiazepine, heroine, may make it harder to identify and distinguish.

Users of methamphetamine are very particular with their product, savvy, and often seek the best high from a known product. They often do not buy products that do not closely resemble the methamphetamine that they are accustomed to getting and are often weary of purchasing adulterated methamphetamine. They seek to buy from reputable sellers, who they know can acquire good product, and if the product fails to result in the expected high, they will either look for a new source of supply or confront the seller at the next purchase. On occasion, some of these confrontations can become violent.

When testing methamphetamine by law enforcement, it can be tested in the field or in a forensic laboratory. Following a seizure, drug exhibits are transferred to a drug forensic laboratory by law enforcement for confirmatory analysis and substance determination. DEA uses their own Special Testing and Research Laboratories (SFL) for analysis. Other federal, state and

local law enforcement agencies send their exhibits to their agency's respective forensic laboratories or may use DEA's. Each laboratory complies with their protocols and policies in analysis. For DEA, the analytical results are what is used as the official analysis report on the actual substance. Use of the term "methamphetamine" or "ice" varies amongst agencies. For example, AHIDTA generally uses "ice" for methamphetamine and its variants. But DEA, differentiates between "methamphetamine", or "Ice", or another description. The finalized laboratory report states "methamphetamine" with a percentage of purity and list of other substances, if pertinent.

The DEA laboratories provide reports of analysis to the field agents once analysis has been completed. These laboratory reports indicate the identified substance(s), weight submitted, substance purity (when able), and amount of pure substance as identifiable. As an example, the DEA Chattanooga Resident office submitted 13 drug exhibits for methamphetamine testing between July 2024 and July 2025. These exhibits were obtained via controlled buys or search warrants. Of these exhibits, seven contained the adulterant MSM with a purity range of between 78% to 98%; and four exhibits without an additive with a purity range between 78% to 95% (a mean of 88.8%). The overall purity mean of the 13 exhibits was 87.46%. Generally, methamphetamine being seized (both adulterated and unadulterated) in the AHIDTA region is of a high purity. It is relevant to note that these exhibits are DEA only and are a representative sample of what has been seized in a 17-county area of responsibility that has more than 50 federal state and local law enforcement agencies involved in drug investigations.

TRAFFICKING PATTERNS

The Appalachia High Intensity Drug Trafficking (AHIDTA) region consists of the states of Tennessee, Kentucky, West Virginia and the Western portion of Virginia. Within those states the ADHITA has 91 counties designated as HIDTA counties. The Chattanooga Resident office, where I am assigned, covers 8 of those counties (within a 17 counties area of responsibility). The breakdown of the counties is as follows: Tennessee – 31 counties, Kentucky – 35 counties, West Virginia – 16 counties, and Western Virginia – 9 counties.

Within the AHIDTA region, the forms of methamphetamine being seized include pill, powder and high-purity crystalline methamphetamine, with the overwhelming preference for high-purity crystalline methamphetamine. Also, methamphetamine categorized as "Ice" remains the largest volume apex drug seized in the AHIDTA region.

The AHIDTA region law enforcement and intelligence reporting shows the high availability of high-purity methamphetamine continues to pose a significant and escalating threat, and ranks as the second greatest drug threat behind fentanyl.

- In 2024, there were 3,323 seizures of methamphetamine in the AHIDTA region. Of these, 3,300 involved high-purity crystalline methamphetamine, 6 involved powder, 7 involved pills, and 9 seizures of methamphetamine in liquid solution.
- As of July 1, 2025, there have been 1,175 seizures of methamphetamine in the AHIDTA region in Calendar Year 2025. Of these, 1,156 involved high-purity crystalline

methamphetamine, 4 involved powder, 5 involved pills, and 10 seizures of methamphetamine in liquid solution, totaling 936 kg thus far.

Generally, the preferred or most trafficked form of methamphetamine in the Appalachia region is crystalline methamphetamine, what AHIDTA labels as “ice” in their reported seizure data. “Ice” has shown a year-over-year increase as the preferred consumer form of drug, followed by illicit pill form, then methamphetamine in liquid solution. The AHIDTA statistics provided for the years 2022, 2023, and 2024 show the availability of methamphetamine based on the reported volume seized in the AHIDTA region. This table, with comparisons to cocaine and fentanyl seizures for the same years, reflect those volumes seized.

Drug	2022	2023	2024
Methamphetamine	1,034 kg	1,358 kg	3,888 kg
Cocaine	457 kg	640 kg	1,369 kg
Fentanyl	413 kg	283 kg	347 kg

(Appalachia HIDTA reported seizures)

These numbers show seizures of the methamphetamine have risen sharply - by approximately 190% compared to the previous year and 281% relative to levels reported two years prior. Current seizure trends further suggest sustained high levels of trafficking activity.

Methamphetamine traffickers. Traffickers may use violence and intimidation to maintain control over their trade and avoid detection. DEA continues to see an increase in guns seized as part of methamphetamine drug investigations. Traffickers employ sophisticated techniques, including encrypted communication and complex smuggling methods, to evade law enforcement. Traffickers generally have ties to both domestic and international organized crime enterprises. Traffickers hide secret shipments of methamphetamine within ordinary products, such as baby wipe containers, produce shipments, parcel delivery, fruit drink bottles, other packaged food and many other types as they learn to evolve in trafficking trends.

Types of consumers (demographics). Law enforcement officers encounter methamphetamine users comprising all races and socioeconomic classes. A considerable number of offenders have a history of prior criminal activity. While difficult to characterize, generally methamphetamine users fall into several categories: young ecstasy users who will snort speed or smoke “ice” methamphetamine with friends at events, concerts, etc.; older injecting heroin users who will also inject methamphetamine; or individuals who regard methamphetamine as their drug of choice tend to inject the drug once to several times a week.

Crimes, including theft, are increasingly associated with meth users. While identify theft is normally associated with elaborate computer schemes, when officials in Colorado and other western states looked at a rise in meth use and a rise in mailbox break-ins and theft of documents from garbage cans, a connection became apparent. Because meth users are awake for days and can fixate on small details, identity theft is the perfect drug habit support system. Methamphetamine users are able to look for or check credit card numbers and then convert the stolen identities to money, drugs, or ingredients to make more meth. Theft, domestic violence, and rape are also associated with meth users and products.

Dangers to consumers. Methamphetamine-related overdose deaths in the early 2000s, were around 1,000 annually. These numbers have significantly increased over the years. In May 2025, the CDC reported an estimated 37,096 overdose deaths occurred in 2023 related to methamphetamine-related overdoses. Methamphetamine mixed with fentanyl is a major factor in these deaths, as high-purity and adulterated methamphetamine is being sold on the streets.

Law enforcement has observed chronic methamphetamine users to exhibit violent behavior, anxiety, confusion, insomnia, and psychotic feature including paranoia, aggression, visual and auditory hallucinations, mood disturbances, and delusions. Additional “tell tale” signs include skin abscesses, “meth mouth” (rotting and deteriorating teeth), and weight loss. Physical deterioration can be very rapid in chronic users.

HAZARDS

Although domestic clandestine laboratories have significantly dropped across the United States, according to the numbers reported to the DEA El Paso Intelligence Center (EPIC), these illicit manufacturing operations still pose a threat to communities and law enforcement. Domestic methamphetamine production or extraction exposes communities, first responders, and law enforcement officers to significant health and safety concerns due, in part, to hazardous by-products consisting of toxic chemicals and solvents being utilized, in addition to List I and List II chemicals. The chemicals used to produce or extract methamphetamine are extremely hazardous. Some are highly volatile and may ignite or explode if mixed or stored improperly. Fire and explosion pose risks due to the evaporation of solvents and fuel and pose a hazard to the individuals producing the drug as well as to anyone in the surrounding area, including children, neighbors, and passerby. The persistent presence of these chemicals in the environment can pose significant risks to human health, increasing likelihood of respiratory issues, and other health complications for those processing the site or of those near the contaminated area.

During my years of responding to illicit clandestine laboratories, I encountered unimaginable conditions in the various structures I entered. Some were fire damaged, other contained toxic chemical stains and chemical residue through the structure. These structures included not only residential homes, but hotel and motel rooms, commercial properties, barns, motorhomes, campers, and automobiles. The most memorable were the homes with contaminated floors, carpet walls, sinks, etc. with infants and children who were crawling, playing, and residing in this hazardous environment.

Communities must expend significantly more financial resources to ensure that their law enforcement and first responders are adequately trained in recognizing and responding to domestic methamphetamine labs. In addition to increased training expenses, community resources must be expended to ensure proper equipment to include PPE and SCBA gear. Additionally, communities must expend significant resources to remediate hazardous clandestine laboratories that have been shut down.

CONCLUSION

Illicit methamphetamine trafficking, distribution and consumption has a devastating impact on our communities, tears at the inner fabric of the United States, and brings violence to our streets. Methamphetamine wastes young lives and wreaks havoc on families. Methamphetamine also saps millions of dollars out of our economy due to the high cost of illicit clandestine laboratory clean up costs and drains resources of our criminal justice and health systems. Drugs such as methamphetamine make criminal enterprises across the country – and around the world – richer, stronger and more formidable.

DEA will continue to address this threat by pursuing those who have brought tremendous harm to our communities and using all available tools to identify, target, disrupt, and dismantle individuals and organizations responsible for the illicit distribution of controlled substances in violation of the Controlled Substances Act. We will continue to work with our federal, state, local, and international partners to disrupt production pipelines, dismantle trafficking networks, and drive coordinated enforcement efforts against transnational criminal organizations. We look forward to working with the Commission on this important issue.