

JF gettler — ryan inc.

general contractors

July 27, 1990

Alameda County Health Agency
Department of Environmental Health
80 Swan Way, Room 200
Oakland, California 94621

Attention: Mr. Barney Chan

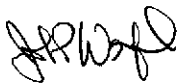
Reference: Unocal Service Station No. 5325
3220 Lakeshore Avenue
Oakland, California 94610

Gentlemen:

Enclosed are copies of the Uniform Hazardous Waste Manifests documenting the transport and disposal of three underground storage tanks and approximately 550 cubic yards of contaminated soil from the above referenced location. A copy of the Petro-tite precision tank and line test results are also enclosed.

Please do not hesitate to call should you have any questions or comments.

Sincerely,



John P. Werfal
Project Manager

JPW/ch

enclosure

cc: Mr. Ron Bock, Unocal Corporation

FORWARDED: 7-24-90

Data Chart for Tank System Tightness Test

JOB
2255

PLEASE PRINT

1. OWNER Property Tank(s)

Name	UNOCAL	Address	3220 LAKESHORE	Zip		Representative		Telephone	893-1675
Name	SS# S325	Address		Zip		Representative		Telephone	

2. OPERATOR

Name		Address		Zip		Telephone	
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3. REASON FOR TEST
(Explain Fully)

NEW TANKS

4. WHO REQUESTED TEST AND WHEN

Name	DON TERRY	Title	ENGINEER	Company or Affiliation	UNOCAL	Date	8/15/90
Address		Zip		Telephone			

5. TANK INVOLVED
Use additional lines for manifolded tanks

Identify by Direction	Capacity	Brand/Supplier	Grade	Approx. Age	Steel/Fiberglass
FARTHEST FROM STREET	520	UNOCAL	DRAIN OIL	NEW	DOUBLE WALL STEEL

6. INSTALLATION DATA

Location	Cover	Fills	Vents	Siphones	Pumps
FRONT OF LUBE ROOM	CONCRETE	4"	2"	NONE	NONE
North inside driveway, Rear of station, etc.	Concrete, Black Top, Earth, etc.	Size, Titelfill make, Drop tubes, Remote Fills	Size, Manifolded	Which tanks?	Suction, Remote. Make if known

7. UNDERGROUND WATER

Depth to the water table from grade 160'

Is the water over the tank? Yes No

8. FILL-UP ARRANGEMENTS

Tanks to be filled 800 hr. 7/9/90 Date Arranged by _____ Name _____ Telephone _____

Extra product to "top off" and run tank tester. How and who to provide? Consider NO Lead.

9. CONTRACTOR, MECHANICS, any other contractor involved

GETTLER - RYAN INC
JIM REED
SCOTT MOORE

10. OTHER INFORMATION OR REMARKS

TESTED COMPLETE SYSTEM

Additional information on any items above. Officials or others to be advised when testing is in progress or completed. Visitors or observers present during test, etc.

11. TEST METHOD

PETRO TITE PETRO COMP QUICK CHECK 2000

11a. TEST RESULTS

Tests were made on the above tank systems in accordance with test procedures prescribed for as detailed on attached test charts with results as follows:

Tank Identification	Tight	Leakage Indicated	Date Tested
520 GALLON DRAIN OIL	YES	-0397	7/9/90

12. SENSOR CERTIFICATION

Date _____

Serial No. of Thermal Sensor _____

13. CONTRACTOR CERTIFICATION

Technicians

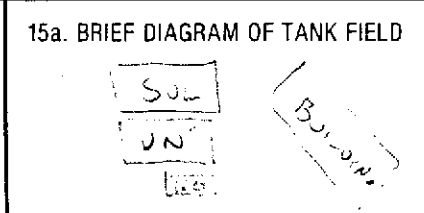
1. J. REED STATE # 901027 GETTLER - RYAN INC. Testing Contractor or Company. By: James P. Reed Signature

Certification # 414813017 2150 W. WINTON AVE Address HAWAIIAN CI

2. S. MOORE

Certification # 414812279 STATE # 91-1034

15. TANK TO TEST
 FURNEST TANK SYSTEM
 Identify by position
 DRAW OIL TANK (WIDE MOUTH)
 Brand and Grade

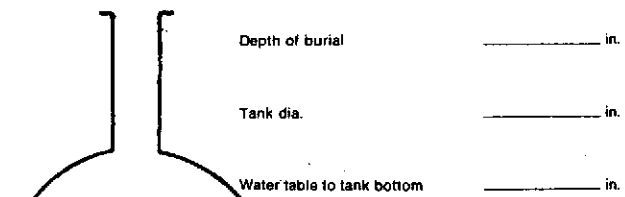


16. CAPACITY
 Nominal Capacity 530 Gallons
 By most accurate capacity chart available 517 Gallons
 From:
 Station Chart
 Tank Manufacturer's Chart
 Company Engineering Data
 Charts supplied with Tank Tester
 Other

17. FILL-UP FOR TEST
 Stick Water Bottom before Fill-up Full in. to 1/4" Gallons Tank Diameter in.
 Inventory in Tank 517
 Water Bottom -
 Top off equipment + 30
 Total Quantity 537 547
 Total Gallons ea. Reading

18. SPECIAL CONDITIONS AND PROCEDURES TO TEST THIS TANK
 Water in tank Line(s) being tested with LVLLT
 High water table in tank excavation
 See manual sections applicable. Check below and record procedure in log (27).
 Use maximum allowable test pressure for all tests. Four pound rule does not apply to doublewalled tanks.
 Complete section below:

1. Is four pound rule required? Yes No
 2. Height to 12" mark from bottom of tank _____ in.
 3. Pressure at bottom of tank _____ P.S.I.
 4. Pressure at top of tank _____ P.S.I.



19. TANK MEASUREMENTS FOR TSTT ASSEMBLY
 Bottom of tank to grade* 96 in.
 Add 30" for "T" probe assy. 30 in.
 Total tubing to assemble - approximate 126 in.

20. EXTENSION HOSE SETTING
 Tank top to grade* 48 in.
 Extend hose on suction tube 6" or more below tank top 58 in.
 *If fill pipe extends above grade, use top of fill.

USE WITH THERMAL SENSOR PN5039 (Blue Box)
 22. Thermal-Sensor reading after circulation 14819 digits
 67.68 °F
 Between 326
 23. Digits per °F in range of expected change

21. VAPOR RECOVERY SYSTEM Stage I Stage II

24b. COEFFICIENT OF EXPANSION RECIPROCAL METHOD
 Type of Product _____
 Hydrometer Employed _____ H
 Temperature in Tank After Circulation _____ °F
 Temperature of Sample _____ °F
 Difference (+/-) _____ °F
 Observed A.P.I. Gravity _____
 Reciprocal _____ Page # _____
 Total quantity in full tank (17) + Reciprocal = Volume change in this tank per °F
 Transfer to Line 26a.

24a. IF USING THERMAL SENSOR DTS-2000 OR QC-2000 WHICH READ 1000 DIGITS PER °F TRANSFER 1000 TO LINE 26, DIGITS PER °F IN TEST RANGE.

24c. FOR TESTING WITH WATER see Table C & D
 Water Temperature after Circulation Table C from Thermal Sensor 67.4 °F
 Coefficient of Water Table D .0001291
 Added Surfactant? Yes No Transfer COE to Line 25b.

The above calculations are to be used for dry soil conditions to establish a positive pressure advantage, or when using the four pound rule to compensate for the presence of subsurface water in the tank area.
 Refer to N.F.P.A. 30, Sections 2-3.2.4 and 2-7.2 and the tank manufacturer regarding allowable system test pressures.

25. (a) 537 × (b) .0001291 = (c) .06963267 gallons
 Total quantity in full tank (17) Coefficient of expansion for involved product Volume change in this tank per °F
 26. (a) .06963267 + (b) 326 = .0062 This is test factor (a)
 Volume change per °F (25 or 24b) Digits per °F in test Range (23 or 24a) Volume change per digit Compute to 4 decimal places.

27. Sensor Calibration _____		30. HYDROSTATIC PRESSURE CONTROL		31. VOLUME MEASUREMENTS (V) RECORD TO 001 GAL			34. TEMPERATURE COMPENSATION USE FACTOR (u)			38. NET VOLUME CHANGING EACH READING	39. ACCUMULATED CHANGE	
LOG OF TEST PROCEDURES		29. Reading No.	Standpipe Level in Inches		32. Product in Graduate		33. Product Replaced (-)	35. Thermal Sensor Reading	36. Change Higher (+) Lower (-)	37. Compensation (a) = (a) + Expansion + Contraction	Temperature Adjustment Volume Minus Expansion (+) or Contraction (-) (33V) - (+37V)	At Low Level compute Change per Hour (MFA) criteria
DATE	Record details of setting up and running test. (Use full length of line if needed.)		Beginning of Reading	Level to which Restored	Before Reading	After Reading	Product Recovered (+)					
1015	TOPPED OFF TANK											
1025	ADDED LDC											
1030	SET UP TESTER											
1050	FILL TO TESTER + ALLOW OFF AIR											
1100	RAISING TO 42"											
1130	READING AT 42"	1	42		540			14819				
1145		2	41.8	42	540	520	-020	14952	+39	+009	-023	
1200		3	41.8	42	520	500	-020	14886	+28	+006	-026	
1215		4	41.9	42	500	490	-010	14923	+37	+007	-017	
1217	LOWERING TO 12"		42	12								
1230	READING AT 12"	5	11.9	12	490	480	-010	14956	+33	+007	-017	
1245		6	11.9	12	480	470	-010	14991	+35	+007	-017	
1257		7	12.0	12	470	470	-	15004	+13	+003	-003	
1258		8	12.0	12	470	470	-	15016	+12	+002	-002	
1300		9	12.0	12	470	470	-	15028	+12	+002	-002	
1305		10	12.0	12	470	470	-	15041	+13	+003	-003	
1310		11	12.0	12	470	470	-	15053	+12	+002	-002	
1315		12	11.9	12	470	460	-010	15063	+10	+002	-012	
1320		13	12.0	12	460	460	-	15077	+14	+003	-003	
1325		14	12.0	12	460	460	-	15089	+12	+002	-007	
1330		15	12.0	12	460	460	-	15099	+10	+002	-007	
1335		16	12.0	12	460	460	-	15113	+14	+003	-003	
1340		17	12.0	12	460	460	-	15127	+14	+003	-003	
1345		18	12.0	12	460	460	-	15140	+13	+003	-003	
1350		19	12.0	12	460	460	-	15152	+12	+002	-002	
1355		20	12.0	12	460	460	-	15163	+11	+002	-002	
1400		21	12.0	12	460	460	-	15173	+10	+002	-002	
1405		22	12.0	12	460	460	-	15187	+14	+003	-003	

1410	READING AT 12"	23	12.0	12	460	460	-	15200	+13	+003	-003	
1415		24	11.9	12	460	450	-010	15213	+13	+002	-012	
1420		25	12.0	12	450	450	-	15226	+13	+003	-003	
1425		26	12.0	12	450	450	-	15239	+13	+003	-003	
1430		27	12.0	12	450	450	-	15251	+12	+002	-002	
1435		28	12.0	12	450	450	-	15264	+13	+003	-003	
1440		29	12.0	12	450	450	-	15276	+12	+002	-002	
1445		30	12.0	12	450	450	-	15288	+12	+002	-002	-0397
1450		31	12.0	12	450	450	-	15301	+13	+003	-003	-0397

* TANK TILT *
LAST HOUR READING -0397

P-T Tank Test Data Chart
Additional Info

1. Net Volume Change at Conclusion of Precision Test 102.5 bph
Signature of Tester: James P. Reed
Date: 7/9/90

2. Statement:
- Tank and product handling system has been tested tight according to the Precision Test Criteria as established by regulatory agency. This is not intended to indicate permission of a leak.
- OR
- Tank and product handling system has failed the tank tightness test according to the Precision Test Criteria as established by regulatory agency.
- OR
- Test invalid due to environmental or mechanical factors beyond control of the testing equipment.

It is the responsibility of the owner and/or operator of this system to immediately advise state and local authorities of any implied hazard and the possibility of any reportable pollution to the environment as a result of the indicated failure of this system. The manufacturer of this test method does not assume any responsibility or liability for any loss of product to the environment.

Tank Owner/Operator _____
Date _____

FORWARDED: 7-24-90

Data Chart for Tank System Tightness Test

JOB
2255

PLEASE PRINT

1. OWNER Property Tank(s)

UNOCAL 3200 LAKESHORE/LAKESIDE 893-1675

Name Address Zip Representative Telephone

2. OPERATOR

Name Address Zip Telephone

3. REASON FOR TEST (Explain Fully)

NEW TANKS

4. WHO REQUESTED TEST AND WHEN

DON TERRY ENGINEER UNOCAL 6/15/90

Name Title Company or Affiliation Date

Address Zip Telephone

5. TANK INVOLVED

Use additional lines for manifolded tanks

Identify by Direction	Capacity	Brand/Supplier	Grade	Approx. Age	Steel/Fiberglass
CLOSEST TO STREET	12,000	UNOCAL	SUPER UNMANAGED	?	DOUBLE WIRE STEEL

6. INSTALLATION DATA

Location	Cover	Fills	Vents	Siphones	Pumps
FRONT OF LUBEROOM	FULL SLAB	4"	2	NONE	REMOTE
North inside driveway, Rear of station, etc.	Concrete, Black Top, Earth, etc.	Size, Titefill make, Drop lubes, Remote Fills	Size, Manifolded	Which tanks?	Suction, Remote, Make if known

7. UNDERGROUND WATER

Depth to the water table from grade 160" ±

Is the water over the tank? Yes No

8. FILL-UP ARRANGEMENTS

Tanks to be filled 300 hr. 7-9-90 Date Arranged by UNOCAL

Extra product to 'top off' and run tank tester. How and who to provide? Consider NO Lead.

Terminal or other contact for notice or inquiry

Company Name Telephone

9. CONTRACTOR, MECHANICS, any other contractor involved

GOTTLOB - RYAN INC
JIM REED

10. OTHER INFORMATION OR REMARKS

1) TESTED COMPLETE SYSTEM EXCEPT PRODUCT LINE
2) TESTED PRODUCT LINE WITH LINE TESTOR

Additional information on any items above. Officials or others to be advised when testing is in progress or completed. Visitors or observers present during test, etc.

11. TEST METHOD

PETRO TITE PETRO COMP QUICK CHECK 2000

11a. TEST RESULTS

Tests were made on the above tank systems in accordance with test procedures prescribed for as detailed on attached test charts with results as follows:

Tank Identification	Tight	Leakage Indicated	Date Tested
12,000 GALLON SUPER UNMANAGED	YES	-0.023	7/11/90

12. SENSOR CERTIFICATION

Date

Serial No. of Thermal Sensor

13. CONTRACTOR CERTIFICATION

Technicians

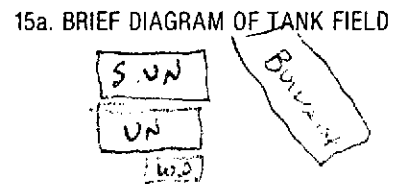
1. Jim Reed
STATE # 90-1027
Certification # 414813017

GOTTLOB - RYAN INC. James P. Reed
Testing Contractor or Company. By: Signature
2150 W. WINTON AVE HAWAIIAN
Address

2. _____

Certification # _____

15. TANK TO TEST
CLOSED TO STREET
 Identity by position
UNOCAL SUPER UNLEADED
 Brand and Grade



16. CAPACITY
 Nominal Capacity 12,345 Gallons
 By most accurate capacity chart available 12248 Gallons

- From
 Station Chart
 Tank Manufacturer's Chart
 Company Engineering Data
 Charts supplied with Tank Tester
 Other _____

17. FILL-UP FOR TEST

Stick Water Bottom before Fill-up 0 in. to 1/4"
 Gallons _____ Tank Diameter 9 1/2 in.

Total Gallons ea. Reading
 Inventory in Tank 12248
 Water Bottom 0
 Top off equipment 100
 Total Quantity 12345

18. SPECIAL CONDITIONS AND PROCEDURES TO TEST THIS TANK
 Water in tank Line(s) being tested with LVLLT
 High water table in tank excavation.

See manual sections applicable. Check below and record procedure in log (27).

Use maximum allowable test pressure for all tests. Four pound rule does not apply to doublewalled tanks.

Complete section below:

1. Is four pound rule required? Yes No
2. Height to 12" mark from bottom of tank _____ in.
3. Pressure at bottom of tank _____ P.S.I.
4. Pressure at top of tank _____ P.S.I.

19. TANK MEASUREMENTS FOR TSTT ASSEMBLY
 Bottom of tank to grade* 150 in.
 Add 30" for "T" probe assy. _____ 30 in.
 Total tubing to assemble — approximate 180 in.

20. EXTENSION HOSE SETTING
 Tank top to grade* 54 in.
 Extend hose on suction tube 6" or more below tank top 64 in.
 *If Fill pipe extends above grade, use top of fill.

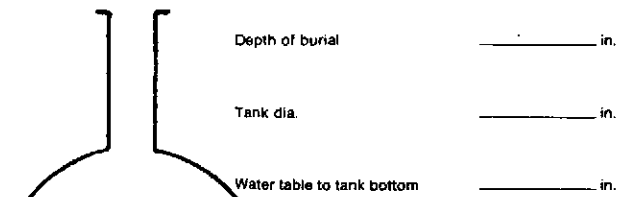
USE WITH THERMAL SENSOR PN5039 (Blue Box)
 22. Thermal-Sensor reading after circulation 15174 digits
68/69 °F
 23. Digits per °F in range of expected change 326 digits

21. VAPOR RECOVERY SYSTEM Stage I Stage II

24b. COEFFICIENT OF EXPANSION RECIPROCAL METHOD
 Type of Product SUPER UNLEADED
 Hydrometer Employed 6 H
 Temperature in Tank After Circulation 69.4 °F (68)
 Temperature of Sample 77 °F
 Difference (+/-) +9 °F
 Observed A.P.I. Gravity 53.5
 Reciprocal 1558 Page # 57
12,345 + 1558 = 7.92362
 Total quantity in full tank (17) Reciprocal Volume change in this tank per °F
 Transfer to Line 26a.

24c. FOR TESTING WITH WATER see Table C & D

Water Temperature after Circulation Table C from Thermal Sensor _____ °F
 Coefficient of Water Table D _____
 Added Surfactant? Yes No Transfer COE to Line 25b.



NOTES:

The above calculations are to be used for dry soil conditions to establish a positive pressure advantage, or when using the four pound rule to compensate for the presence of subsurface water in the tank area.

Refer to N.F.P.A. 30, Sections 2-3.2.4 and 2-7.2 and the tank manufacturer regarding allowable system test pressures.

24a. IF USING THERMAL SENSOR DTS-2000 OR QC-2000 WHICH READ 1000 DIGITS PER °F TRANSFER 1000 TO LINE 26, DIGITS PER °F IN TEST RANGE.

25. (a) _____ × (b) _____ = (c) _____ gallons
 Total quantity in full tank (17) Coefficient of expansion for involved product Volume change in this tank per °F

26. (a) 7.92362 + (b) 326 = (c) .0243
 Volume change per °F (25 or 24b) Digits per °F in test Range (23 or 24a) Volume change per digit Compute to 4 decimal places. This is test factor (a)

27. Sensor Calibration _____ / _____		30. HYDROSTATIC PRESSURE CONTROL		31. VOLUME MEASUREMENTS (V) RECORD TO .001 GAL			34. TEMPERATURE COMPENSATION USE FACTOR (a)			38. NET VOLUME CHANGING EACH READING	39. ACCUMULATED CHANGE	
LOG OF TEST PROCEDURES		29. Reading No.	Standpipe Level in Inches		32. Product in Graduate		33. Product Replaced (-) / Product Recovered (+)	35. Thermal Sensor Reading	36. Change Higher (+) / Lower (-)	37. Computation (a) = (a) = Expansion (+) / Contraction (-)	Temperature Adjustment: Volume Minus Expansion (+) or Contraction (-) (33(V) - 37(T))	At Low Level compute Change per Hour (MFA Critical)
DATE	Record details of setting up and running test. (Use full length of line if needed.)		Beginning of Reading	Level to which Restored	Before Reading	After Reading						
1400	TOPPED OFF TANK											
1415	SET UP TESTER											
1430	FUELED TESTER & RAISED LEVEL								Factor	0.243		
1500	RAISED TO 42"											
1600	READING AT 42"	1	42		.990			15174				
1615		2	41.6	42	.990	.940	-050	15179	+5	+122	-172	
1630		3	41.0	42	.940	.850	-090	15185	+6	+146	-236	
1645		4	41.5	42	.850	.780	-070	15191	+2	+049	-119	
1700		5	41.7	42	.780	.750	-030	15187	-	-	-030	
1715		6	42.0	42	.750	.750	-	15190	+3	+073	-073	
1730		7	42.1	42	.750	.760	+010	15194	+4	+097	-087	
1745		8	42.1	42	.750	.760	+010	15198	+4	+097	-087	
1747	LOWEDED TO 12"		42	12								
1800	READING AT 12"	9	13.2	12	.760	.890	+130	15201	+3	+073	+057	
1815		10	13.0	12	.890	1.000	+110	15206	+5	+122	-012	
1820		11	12.4	12	.090	.130	+040	15207	+1	+024	+016	
1825		12	12.3	12	.130	.160	+030	15208	+1	+024	+008	
1830		13	12.3	12	.160	.180	+020	15209	+1	+024	-004	
1835		14	12.3	12	.180	.200	+020	15210	+1	+024	-004	
1840		15	12.3	12	.200	.230	+030	15211	+1	+024	+004	
1845		16	12.3	12	.230	.260	+030	15212	+1	+024	+006	
1850		17	12.3	12	.260	.290	+030	15213	+1	+024	+006	
1855		18	12.2	12	.290	.310	+020	15214	+1	+024	-004	
1900		19	12.2	12	.310	.330	+020	15215	+1	+024	-004	
1905		20	12.2	12	.330	.350	+020	15216	+1	+024	-004	
1910		21	12.3	12	.350	.380	+030	15217	+1	+024	+006	
1915		22	12.3	12	.380	.400	+020	15218	+1	+024	-004	+022
1920		23	12.2	12	.400	.420	+020	15220	+2	+049	-029	

1925	READING AT 12"	24	12.2	12	.420	.430	+010	15221	+1	+024	-014	
1930		25	12.2	12	.430	.440	+010	15222	+1	+024	-014	
1935		26	12.2	12	.440	.460	+020	15222	-	-	+020	
1940		27	12.2	12	.460	.470	+010	15223	-	-	+010	
1945		28	12.2	12	.470	.490	+020	15222	-	-	+020	
1950		29	12.2	12	.480	.490	+010	15223	+1	+024	-014	
1955		30	12.2	12	.490	.500	+010	15224	+1	+024	-014	
2000		31	12.2	12	.500	.510	+010	15225	+1	+024	-014	
2005		32	12.2	12	.510	.520	+010	15225	-	-	+010	
2010		33	12.2	12	.520	.530	+010	15225	-	-	+010	
2015		34	12.2	12	.530	.550	+020	15226	+1	+024	-004	-0130
2020		35	12.2	12	.550	.570	+020	15227	+1	+024	-004	-0230

* TANK TIGHT *
LAST HOUR READING - 0230

P-T Tank Test Data Chart
Additional Info

1. Net Volume Change at Conclusion of Precision Test 0.230 gph
Signature of Tester: James P. Reed
Date: 7/11/90

2. Statement:
- Tank and product handling system has been tested tight according to the Precision Test Criteria as established by regulatory agency. This is not intended to indicate permission of a test.
- OR
- Tank and product handling system has failed the tank tightness test according to the Precision Test Criteria as established by regulatory agency.
- OR
- Test invalid due to environmental or mechanical factors beyond control of the testing equipment.

It is the responsibility of the owner and/or operator of this system to immediately advise state and local authorities of any implied hazard and the possibility of any reportable pollution to the environment as a result of the indicated failure of this system. The manufacturer of this test method does not assume any responsibility or liability for any loss of product to the environment.

Tank Owner/Operator _____
Date _____

forwarded 7-24-90

DATA CHART
For Use With

petro THE TESTER

1 LOCATION: 3200 LAKE SHORES / LAKE PARK OAKLAND CA Telephone No. 893-1675
Street No. and/or Corner City State

2 OWNER: UNOCAL
Name Address Representative Position Telephone No.

3 OPERATOR: _____
Name Dealer, Mgr. or Other Address (if different than Location) Telephone No.

4 REASON FOR TEST: NEW LINE

5 TEST REQUESTED BY: DON TERRY ENGINEER
Name Position Order No. Billing Address

6 SPECIAL INSTRUCTIONS: _____

7 CONTRACTOR OR COMPANY MAKING TEST MECHANIC(S) NAME: General Pump Inc. - Jim Ross

8 IS A TANK TEST TO BE MADE WITH THIS LINE TEST? YES NO

9 MAKE AND TYPE OF PUMP OR DISPENSERS: WAYNE DISPENSERS / RED JACKET PUMPS

10 WEATHER: FAIR TEMPERATURE IN TANKS _____ °F _____ °C COVER OVER LINES: CONCRETE APPROXIMATE BURIAL DEPTH: 24"-43"
Concrete, Black Top, etc.

11 IDENTIFY EACH LINE AS TESTED	12 TIME (MILITARY)	13 LOG OF TEST PROCEDURES, AMBIENT TEMPERATURE, WEATHER, ETC.	14 PRESSURE psi OR kPa		15 VOLUME READING		NET CHANGE	16 TEST RESULTS CONCLUSIONS, REPAIRS AND COMMENTS
			BEFORE	AFTER	BEFORE	AFTER		
<u>SWAN</u>		<u>SET UP TESTER</u>						
<u>UNOCAL</u>		<u>FILLED TESTER & BLEW</u>						
		<u>PUMPED UP TO 50 PSI</u>						
	<u>11 00</u>	<u>RESTORED TO 50 PSI</u>		<u>50</u>		<u>.011</u>		
	<u>11 15</u>		<u>60</u>	<u>50</u>	<u>.011</u>	<u>.018</u>	<u>+0.007</u>	
	<u>11 30</u>		<u>60</u>	<u>50</u>	<u>.018</u>	<u>.025</u>	<u>+0.007</u>	
	<u>11 45</u>		<u>59</u>	<u>50</u>	<u>.025</u>	<u>.032</u>	<u>+0.007</u>	
	<u>12 00</u>		<u>58</u>	<u>50</u>	<u>.032</u>	<u>.038</u>	<u>+0.006</u>	
	<u>12 15</u>		<u>57</u>	<u>50</u>	<u>.038</u>	<u>.043</u>	<u>+0.005</u>	
	<u>12 30</u>		<u>56</u>	<u>50</u>	<u>.043</u>	<u>.047</u>	<u>+0.004</u>	
	<u>12 45</u>		<u>55</u>	<u>50</u>	<u>.047</u>	<u>.050</u>	<u>+0.003</u>	
	<u>13 00</u>		<u>53</u>	<u>50</u>	<u>.050</u>	<u>.053</u>	<u>+0.003</u>	
	<u>13 15</u>		<u>52</u>	<u>50</u>	<u>.053</u>	<u>.054</u>	<u>+0.001</u>	
	<u>13 30</u>		<u>52</u>	<u>50</u>	<u>.054</u>	<u>.055</u>	<u>+0.001</u>	
	<u>13 45</u>		<u>51</u>	<u>50</u>	<u>.055</u>	<u>.054</u>	<u>+0.001</u>	
	<u>13 47</u>	<u>BLEED BACK CHECK</u>	<u>50</u>	<u>50</u>	<u>.056</u>	<u>.085</u>	<u>+0.029</u>	

LINE TIGHT
LAST HOUR
READING +.005

[Handwritten signature]

FORWARDED: 7-24-90

Data Chart for Tank System Tightness Test

JOB
2255

PLEASE PRINT

1. OWNER Property Tank(s)

UNOCAL 3220 LAKESHORE 893-1675
 Name Address Zip Representative Telephone
 SS# 5325

2. OPERATOR

Name Address Zip Telephone

3. REASON FOR TEST (Explain Fully)

NEW TANK

4. WHO REQUESTED TEST AND WHEN

DON TERRY ENGINEER UNOCAL 6/15/90
 Name Title Company or Affiliation Date
 Address Zip Telephone

5. TANK INVOLVED

Identify by Direction	Capacity	Brand/Supplier	Grade	Approx. Age	Steel/Fiberglass
CENTER TANK	12,000	UNOCAL	UNLEADED 87	NEW	DOUBLE WALL STEEL

Use additional lines for manifolded tanks

6. INSTALLATION DATA

Location	Cover	Fills	Vents	Siphones	Pumps
FRONT OF LUBE ROOM North inside driveway, Rear of station, etc.	FULL SLAB Concrete, Black Top, Earth, etc.	4" Size, Tilefill make, Drop tubes, Remote Fills	2" Size, Manifolded	NONE Which tanks?	REMOTE Suction, Remote, Make if known

7. UNDERGROUND WATER

Depth to the water table from grade 160' +

Is the water over the tank? Yes No

8. FILL-UP ARRANGEMENTS

Tanks to be filled 8000 hr. 7/9/90 Date Arranged by _____ Name Telephone

Extra product to 'top off' and run tank tester. How and who to provide? Consider NO Lead.

Terminal or other contact for notice or inquiry _____ Company Name Telephone

9. CONTRACTOR, MECHANICS, any other contractor involved

COITLER - RYAN INC.
J. REED
S. MOORE

10. OTHER INFORMATION OR REMARKS

1) TESTED CONTACT SYSTEM EXCEPT PRODUCT LINE
 2) PRODUCT LINE TESTED WITH P-T LINE TESTER

Additional information on any items above. Officials or others to be advised when testing is in progress or completed. Visitors or observers present during test, etc.

11. TEST METHOD

PETRO TITE PETRO COMP QUICK CHECK 2000

11a. TEST RESULTS

Tests were made on the above tank systems in accordance with test procedures prescribed for as detailed on attached test charts with results as follows:

Tank Identification	Tight	Leakage Indicated	Date Tested
12,000 GALLON UNLEADED 87	YES	+.02	7/9/90

12. SENSOR CERTIFICATION

Date _____

Serial No. of Thermal Sensor _____

13. CONTRACTOR CERTIFICATION

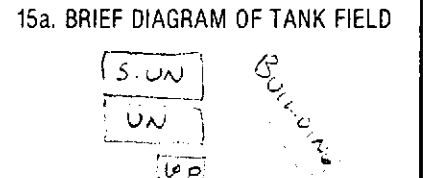
Technicians

1. JIM REED
STATE # 90-1027
Certification # 414813017

2. SCOTT MOORE
STATE # 91-1034
Certification # 414812377

COITLER - RYAN INC. James P. Reed
Testing Contractor or Company. By Signature
2150 W. WINTON AVE HAYWARD CA
Address

15. TANK TO TEST
CONCRETE TANK
 Identity by position
UNOCAL UNLEADED 87
 Brand and Grade



16. CAPACITY
 Nominal Capacity 12,000 Gallons
 By most accurate capacity chart available 12245 Gallons

- From
 Station Chart
 Tank Manufacturer's Chart
 Company Engineering Data
 Charts supplied with Tank Tester
 Other _____

17. FILL-UP FOR TEST

Stick Water Bottom before Fill-up <u>0</u> in.	Gallons _____	Tank Diameter <u>96"</u> in.	Total Gallons ea. Reading
			Inventory in Tank <u>12245</u>
			Water Bottom <u>0</u>
			Top off equipment <u>+ 100</u>
			Total Quantity <u>12345</u>

18. SPECIAL CONDITIONS AND PROCEDURES TO TEST THIS TANK
 Water in tank Line(s) being tested with LVLLT
 High water table in tank excavation

See manual sections applicable. Check below and record procedure in log (27).
 Use maximum allowable test pressure for all tests. Four pound rule does not apply to doublewalled tanks.
 Complete section below:

1. Is four pound rule required? Yes No
2. Height to 12" mark from bottom of tank _____ in.
3. Pressure at bottom of tank _____ P.S.I.
4. Pressure at top of tank _____ P.S.I.

19. TANK MEASUREMENTS FOR TSTT ASSEMBLY
 Bottom of tank to grade* 152 in.
 Add 30" for "T" probe assy. 30 in.
 Total tubing to assemble - approximate 182 in.

20. EXTENSION HOSE SETTING
 Tank top to grade* 66 in.
 Extend hose on suction tube 6" or more below tank top 76 in.
 *If Fill pipe extends above grade, use top of fill.

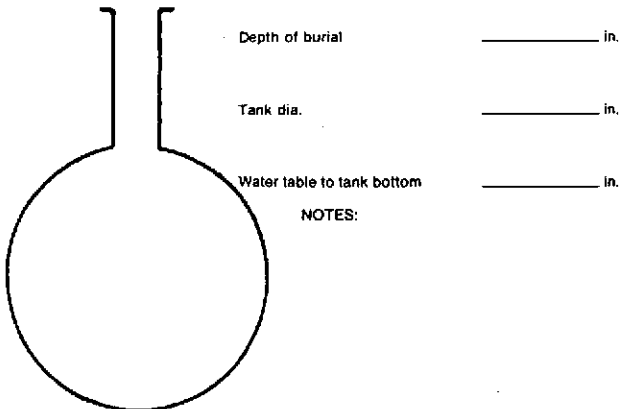
USE WITH THERMAL SENSOR PN5039 (Blue Box)
 22. Thermal-Sensor reading after circulation 14230 digits
65/66 °F
 23. Digits per °F in range of expected change 326 digits

24a. IF USING THERMAL SENSOR DTS-2000 OR QC-2000 WHICH READ 1000 DIGITS PER °F TRANSFER 1000 TO LINE 26, DIGITS PER °F IN TEST RANGE.

21. VAPOR RECOVERY SYSTEM Stage I Stage II

24b. COEFFICIENT OF EXPANSION RECIPROCAL METHOD
 Type of Product UNLEADED 87
 Hydrometer Employed 6 H
 Temperature in Tank After Circulation 65.6 °F
 Temperature of Sample 67 °F
 Difference (+/-) + 1.4(1) °F
 Observed A.P.I. Gravity 56.4
 Reciprocal 1507 Page # 60
12345 / 1507 = 8.1917717
 Total quantity in full tank (17) Reciprocal Volume change in this tank per °F
 Transfer to Line 26a.

24c. FOR TESTING WITH WATER see Table C & D
 Water Temperature after Circulation Table C from Thermal Sensor _____ °F
 Coefficient of Water Table D _____
 Added Surfactant? Yes No Transfer COE to Line 25b.



The above calculations are to be used for dry soil conditions to establish a positive pressure advantage, or when using the four pound rule to compensate for the presence of subsurface water in the tank area.

Refer to N.F.P.A. 30, Sections 2-3.2.4 and 2-7.2 and the tank manufacturer regarding allowable system test pressures.

25. (a) _____ x (b) _____ = (c) _____ gallons
 Total quantity in full tank (17) Coefficient of expansion for involved product Volume change in this tank per °F

26. (a) 8.1917717 + (b) 326 = (c) .0251
 Volume change per °F (25 or 24b) Digits per °F in test Range (23 or 24a) This is test factor (a)
 Compute to 4 decimal places.

27. Sensor Calibration			30. HYDROSTATIC PRESSURE CONTROL		31. VOLUME MEASUREMENTS (V) RECORD TO 001 GAL			34. TEMPERATURE COMPENSATION USE FACTOR (U)			38. NET VOLUME CHANGING EACH READING	39. ACCUMULATED CHANGE
LOG OF TEST PROCEDURES			Standpipe Level in Inches		32. Product in Graduate		33. Product Replaced (-)	35. Thermal Sensor Reading	36. Change Higher + Lower - (C)	37. Computation (C) + (A) + Expansion + Contraction -	Temperature Adjustment Volume Minus Expansion (+) or Contraction (-) (XV) - (XVI)	At Low Level compute Change per Hour (NFA Critical)
28. DATE	Record details of setting up and running test. (Use full length of line if needed.)	29. Reading No.	Beginning of Reading	Level to which Restored	Before Reading	After Reading	Product Recovered (+)					
800	TANKED ARRIVED											
945	TANKER TOPPED OFF											
1000	SET UP TESTER											
1015	FILLED TESTER & BLED OFF AIR										.0251	
1040	RAISED TO 42"											
1145	READING AT 42"	1		42		997		14230				
1200		2	38.7	42	980	630	-350	14226	-4	-100	-250	
1215		3	40.0	42	630	520	-090	14216	-11	-276	+150	
1230		4	42.1	42	520	530	+010	14221	+6	+151	-141	
1245		5	42.8	42	530	600	+070	14228	+7	+176	-106	
1300		6	43.1	42	600	710	+110	14240	+12	+301	-191	
1315		7	43.4	42	710	810	+100	14250	+10	+251	-121	
1330		8	43.5	42	840	980	+140	14260	+10	+251	-111	
1332	LOWESTRESS TO 12"		42	12								
1345	READING AT 12"	9	14.3	12	050	320	+270	14273	+13	+326	-056	
1400		10	15.0	12	320	610	+290	14284	+11	+276	+014	
1405		11	12.8	12	610	690	+080	14287	+3	+075	+005	
1410		12	12.7	12	690	760	+070	14289	+2	+050	+070	
1415		13	12.7	12	760	810	+050	14291	+2	+050	+020	
1420		14	12.5	12	810	870	+060	14293	+2	+050	+010	
1425		15	12.5	12	870	930	+060	14295	+2	+050	+010	
1430		16	12.5	12	930	190	+050	14297	+2	+050	+000	
1435		17	12.5	12	190	250	+060	14299	+2	+050	+010	
1440		18	12.5	12	250	300	+050	14301	+2	+050	+000	
1445		19	12.5	12	300	350	+050	14303	+2	+050	+000	
1450		20	12.4	12	350	370	+020	14304	+2	+050	-010	
1455		21	12.5	12	370	440	+070	14306	+2	+050	+000	
1500		22	12.4	12	440	490	+050	14307	+2	+050	-010	+050

1505	READING AT 12"	23	12.4	12	480	520	+040	14309	+2	+050	-010	
1510		24	12.4	12	520	560	+040	14311	+2	+050	-010	
1515		25	12.5	12	560	610	+050	14313	+2	+050	-010	
1520		26	12.4	12	610	650	+040	14314	+1	+025	+015	
1525		27	12.4	12	650	690	+040	14316	+2	+050	-010	
1530		28	12.3	12	690	720	+030	14317	+1	+025	+005	
1535		29	12.4	12	720	760	+040	14319	+2	+050	-010	
1540		30	12.5	12	760	800	+040	14321	+2	+050	-010	
1545		31	12.4	12	800	840	+040	14322	+1	+025	+015	
1550		32	12.5	12	840	890	+050	14324	+2	+050	+000	
1555		33	12.5	12	890	940	+050	14326	+2	+050	+000	
1600		34	12.4	12	940	980	+040	14328	+2	+050	-010	+0278
1605		35	12.4	12	050	090	+040	14330	+2	+050	-010	+0204

* TANK TIGHT *
LAST HOUR READING +0204

**P-T Tank Test Data Chart
Additional Info**

1. Net Volume Change at Conclusion of Precision Test ⁺⁰²⁰⁴ gph
Signature of Tester: James O. Reed
Date: 7-9-90

2. Statement:

Tank and product handling system has been tested tight according to the Precision Test Criteria as established by regulatory agency. This is not intended to indicate permission of a leak.

OR

Tank and product handling system has failed the tank tightness test according to the Precision Test Criteria as established by regulatory agency.

OR

Test invalid due to environmental or mechanical factors beyond control of the testing equipment.

It is the responsibility of the owner and/or operator of this system to immediately advise state and local authorities of any implied hazard and the possibility of any reportable pollution to the environment as a result of the indicated failure of this system. The manufacturer of this test method does not assume any responsibility or liability for any loss of product to the environment.

Tank Owner/Operator _____

Date _____

FORWARDED: 7-24-90

DATA CHART
For Use With

petro-tile
THE BEST

UNOCAL
CA
7
Year Mo. Day

1 LOCATION: Unocal Lakeshore / Lakepark Oakland Ca. Job # 2255
Street No. and/or Corner City State Telephone No.

2 OWNER: _____
Name Address Representative Position Telephone No.

3 OPERATOR: _____
Name Date: Mgt. or Other Address (if different than Location) Telephone No.

4 REASON FOR TEST New Installation

5 TEST REQUESTED BY: _____
Name Position Order No. Billing Address

6 SPECIAL INSTRUCTIONS: _____

7 CONTRACTOR OR COMPANY MAKING TEST Coffler Ryan Inc.
MECHANIC(S) NAME

8 IS A TANK TEST TO BE MADE WITH THIS LINE TEST? YES NO

9 MAKE AND TYPE OF PUMP OR DISPENSERS Prod Socket - Whynes.

10 WEATHER Sunny Warm TEMPERATURE IN TANKS ? °F ? °C COVER OVER LINES _____ APPROXIMATE BURIAL DEPTH _____
Concrete, Black Top, etc.

11 IDENTIFY EACH LINE AS TESTED	12 TIME (MILITARY)	13 LOG OF TEST PROCEDURES, AMBIENT TEMPERATURE, WEATHER, ETC.	14 PRESSURE		15 VOLUME		16 TEST RESULTS	
			psi OR kPa		READING			
			BEFORE	AFTER	BEFORE	AFTER		NET CHANGE
			50	0	bleed back	.025	bleed back okay -	
<u>B7</u>	<u>1900</u>	<u>Pressurized line</u>	<u>50</u>	<u>55</u>		<u>n/a</u>		
<u>Unleaded</u>	<u>1915</u>		<u>50</u>	<u>54</u>	<u>.0500</u>	<u>.0525</u>		<u>+0.025</u>
	<u>1930</u>		<u>50</u>	<u>54</u>	<u>.0525</u>	<u>.0550</u>		<u>+0.025</u>
	<u>1945</u>		<u>50</u>	<u>53</u>	<u>.0550</u>	<u>.0570</u>		<u>+0.020</u>
	<u>2000</u>		<u>50</u>	<u>53</u>	<u>.0570</u>	<u>.0590</u>		<u>+0.020</u>
	<u>2015</u>	<u>Remove Test</u>	<u>50</u>	<u>0</u>	<u>bleed back</u>	<u>.0270</u>	<u>(+0.090) GPH</u>	

Please print or type. (Form designed for use on *pitch* typewriter).

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8602; WITHIN CALIFORNIA CALL 1-800-852-7550
 GENERATOR
 TRANSPORTER
 FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 1 0 1 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address UNOCAL P. O. Box 5155, San Ramon, CA 94583						A. State Manifest Document Number 90038092							
4. Generator's Phone (415) 867-0760						B. State Generator's ID							
5. Transporter 1 Company Name H & H Ship Service Company			6. US EPA ID Number C A D 0 0 4 7 7 1 1 6 8			C. State Transporter's ID 103599		D. Transporter's Phone (415) 543-4835					
7. Transporter 2 Company Name						E. State Transporter's ID							
8. US EPA ID Number						F. Transporter's Phone							
9. Designated Facility Name and Site Address H & H Ship Service Company 220 China Basin Street San Francisco, CA 94107						10. US EPA ID Number C A D 0 0 4 7 7 1 1 6 8		G. State Facility's ID C A D 0 1 0 1 4 7 7 1 1 6 8					
H. Facility's Phone (415) 543-4835													
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		I. Waste No.	
a. RESIDUE GASOLINE TANK NON-RCRA HAZARDOUS WASTE SOLID						No. Type		Quantity		Unit Wt/Vol		State EPA/Other	
						0 10 11 T IP		1 10 10 10 10		P		State 512 EPA/Other	
b. RESIDUE WASTE OIL TANK NON-RCRA HAZARDOUS WASTE SOLID						0 10 11 T IP		0 10 12 18 10		P		State 512 EPA/Other	
c. JOB 2255												State EPA/Other	
d.												State EPA/Other	
J. Additional Descriptions for Materials Listed Above PUMPED OUT 10,000 gallon and 280 gallon tanks last containing gasoline and waste oil. Tanks inerted with dry ice for transport.						K. Handling Codes for Wastes Listed Above							
						a. 01		b. 01		c.		d.	
15. Special Handling Instructions and Additional Information JOB #4745 APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATOR.						JOB SITE: UNOCAL STATION, #5325 3220 Lakeshore Avenue Oakland, California							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled; and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name FOR UNOCAL (BY DENNIS GAN)			Signature <i>Dennis GAN</i>			Month Day Year 10 6 1 19 90							
17. Transporter 1 Acknowledgement of Receipt of Materials			Printed/Typed Name STEVEN W. FOSTER			Signature <i>Steve Foster</i>			Month Day Year 10 6 1 19 90				
18. Transporter 2 Acknowledgement of Receipt of Materials			Printed/Typed Name			Signature			Month Day Year				
19. Discrepancy Indication Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name			Signature			Month Day Year							

Do Not Write Below This Line

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-6802; WITHIN CALIFORNIA CALL 1-800-852-7550
 GENERATOR
 TRANSPORTER
 FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8 0 0 0 0 2		Manifest Document No. 2		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address UNOCAL P. O. Box 5155, San Ramon, CA 94583 (415) 867-0760						A. State Manifest Document Number 90038093							
4. Generator's Phone () 867-0760						B. State Generator's ID							
5. Transporter 1 Company Name H & H Ship Service Company				6. US EPA ID Number C A D 0 0 4 7 7 1 1 6 8		C. State Transporter's ID 103565							
7. Transporter 2 Company Name						D. Transporter's Phone (415) 543-4835							
7. Transporter 2 Company Name						E. State Transporter's ID							
7. Transporter 2 Company Name						F. Transporter's Phone							
9. Designated Facility Name and Site Address H & H Ship Service Company 220 China Basin Street San Francisco, CA 94107				10. US EPA ID Number C A D 0 0 4 7 7 1 1 6 8		G. State Facility's ID C A D 0 0 4 7 7 1 1 6 8							
9. Designated Facility Name and Site Address						H. Facility's Phone (415) 543-4835							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		I. Waste No.	
a. RESIDUE GASOLINE TANK NON-RCRA HAZARDOUS WASTE SOLID						0 0 1 T P		1 0 0 0 0		P		State 512 EPA/Other	
b.												State EPA/Other	
c.												State EPA/Other	
d.												State EPA/Other	
J. Additional Descriptions for Materials Listed Above PUMPED OUT 10,000 gallon tank last containing gasoline. Tank inerted with dry ice for transport.						K. Handling Codes for Wastes Listed Above a. 01 b. c. d.							
15. Special Handling Instructions and Additional Information JOB #4745 APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATOR. JOB SITE: UNOCAL STATION, #5325 3220 Lakeshore Avenue Oakland, California													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name JAMES P. REED FOR UNOCAL						Signature James P Reed				Month Day Year 10 16 19 90			
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name JONAL JAY GUITTARD						Signature Jonal Jay Guttard				Month Day Year 10 16 19 90			
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name						Signature				Month Day Year			
19. Discrepancy Indication Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name													
						Signature				Month Day Year			

Please print or type. (Form designed for use on elite (12-pitch typewriter).

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **C A D 9 8 2 0 5 6 3 6 8** Manifest Document No. **0 0 0 0 1**

2. Page 1 of 1 Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
UNOCAL MARKETING
P. O. Box 3155
San Ramon, Ca. 94583
4. Generator's Phone **(415) 277-2366**

Site: **3220 Lakeshore**
Oakland

A. State Manifest Document Number
90026563

B. State Generator's ID
H Y H Q 3 6 0 0 8 0 0 1

5. Transporter 1 Company Name
DILLARD TRUCKING, INC.

6. US EPA ID Number
C A D 9 8 1 6 9 2 8 0 9

C. State Transporter's ID
D. Transporter's Phone **415-634-0567**

7. Transporter 2 Company Name
Asured Ag.

8. US EPA ID Number
CA0092205202

E. State Transporter's ID **01289101240**
F. Transporter's Phone **4087537303**

9. Designated Facility Name and Site Address
GSX - Lokern Facility
Lokern Road
Buttonwillow, California

10. US EPA ID Number
C A D 9 8 0 6 7 5 2 7 6

G. State Facility's ID
C A D 9 8 0 6 7 5 2 7 6
H. Facility's Phone **805 762-7341**

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
	No.	Type			
a. Soil with Gasoline Non RCRA Hazardous Waste Solid	0 0	D T	0 0 0 2 4	T	State 611 EPA/Other
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above
Soil 99%+
Gasoline <1%

K. Handling Codes for Wastes Listed Above
a.
b.
c.
d.

15. Special Handling Instructions and Additional Information
Acceptance #G-1189GEN
Station #5325
PROPER PROTECTIVE CLOTHING

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name **FOR UNOCAL Steve Parker** Signature **FOR UNOCAL Steve Parker** Month Day Year **07 1 190**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name **Bill England** Signature **Bill England** Month Day Year **07 1 190**

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name _____ Signature _____ Month Day Year _____

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name _____ Signature _____ Month Day Year _____

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

Please print or type. (Form designed for use on elite (12-pitch typewriter).

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2366						Site: 3220 Lakeshore Oakland							
5. Transporter 1 Company Name DILLARD TRUCKING, INC.						6. US EPA ID Number C A D 9 8 1 6 9 2 8 0 9		A. State Manifest Document Number 90026564					
7. Transporter 2 Company Name						8. US EPA ID Number		B. State Generator's ID H Y R Q 3 6 0 0 8 0 0 1					
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California						10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6		C. State Transporter's ID 13602 13603					
								D. Transporter's Phone 415-634-0567					
								E. State Transporter's ID					
								F. Transporter's Phone					
								G. State Facility's ID					
								H. Facility's Phone 805 762-7341					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit		1. Waste No.	
a. Soil with Gasoline Non RCRA Hazardous Waste Solid						No. Type		Quantity		Wt/Vol		State 611	
						0 0 2 D T		0 0 0 1 8		T		EPA/Other	
b.												State	
												EPA/Other	
c.												State	
												EPA/Other	
d.												State	
												EPA/Other	
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
Soil 99%+ Gasoline <1%						a.		b.		c.		d.	
15. Special Handling Instructions and Additional Information													
Acceptance #G-1189GEN PROPER PROTECTIVE CLOTHING						Station #5325							
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.													
Printed/Typed Name				Signature				Month Day Year					
FOR UNOCAL Steve Parker				FOR UNOCAL Steve Parker				07/11/90					
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name				Signature				Month Day Year					
MAURICE J O'BRIEN				Maurice J O'Brien				07/11/90					
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name				Signature				Month Day Year					
19. Discrepancy Indication Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.													
Printed/Typed Name				Signature				Month Day Year					

Please print or type. (Form designed for use on elite (12-pitch typewriter).

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 0 1 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2366						A. State Manifest Document Number 90026565							
Site: 3220 Lakeshore Oakland						B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1							
5. Transporter 1 Company Name DILLARD TRUCKING, INC.			6. US EPA ID Number C A D 9 8 1 1 6 9 2 8 0 9			C. State Transporter's ID							
7. Transporter 2 Company Name H BAUGALE Trucking			8. US EPA ID Number C A D 9 8 0 5 7 1 5 7 8 4			D. Transporter's Phone 415-634-0567							
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California						E. State Transporter's ID 0 1 3 5 0 0 1 3 5 5 1							
10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6						F. Transporter's Phone 707-921-1321							
G. State Facility's ID						H. Facility's Phone 805 762-7341							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		15. Waste No.	
a. Soil with Gasoline Non RCRA Hazardous Waste Solid						0 0 D T		0 0 0 2		T		State 611 EPA/Other	
b.												State EPA/Other	
c.												State EPA/Other	
d.												State EPA/Other	
J. Additional Descriptions for Materials Listed Above Soil 99%+ Gasoline <1%						K. Handling Codes for Wastes Listed Above a. b. c. d.							
15. Special Handling Instructions and Additional Information Acceptance #G-1189GEN Station #5325 PROPER PROTECTIVE CLOTHING													
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Printed/Typed Name For UNOCAL/Steve Parker				Signature Steve Parker For UNOCAL				Month Day Year 9/21/90					
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name		Signature		Month Day Year			
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name Richard A. Santos		Signature Richard A. Santos		Month Day Year 9/21/90			
18. Discrepancy Indication Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.													
Printed/Typed Name						Signature				Month Day Year			

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR TRANSPORTER FACILITY

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550
 GENERATOR
 TRANSPORTER
 FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2366				Site: 3220 Lakeshore Oakland.		A. State Manifest Document Number 90026562							
5. Transporter 1 Company Name DILLARD TRUCKING, INC.				6. US EPA ID Number C A D 9 8 1 6 9 2 8 0 9		B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1							
7. Transporter 2 Company Name				8. US EPA ID Number		C. State Transporter's ID 101296/297							
8. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California				10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6		D. Transporter's Phone 415-634-0567							
						E. State Transporter's ID							
						F. Transporter's Phone							
						G. State Facility's ID							
						H. Facility's Phone 805 782-7341							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		1. Waste No.	
a. Soil with Gasoline Non RCRA Hazardous Waste Solid						No. Type 0,02 D,T		0,000,119		T		State 611 EPA/Other	
b.												State EPA/Other	
c.												State EPA/Other	
d.												State EPA/Other	
J. Additional Descriptions for Materials Listed Above Soil 99%+ Gasoline <1%						K. Handling Codes for Wastes Listed Above a. b. c. d.							
15. Special Handling instructions and Additional Information Acceptance #G-1189GEN Station #5325 PROPER PROTECTIVE CLOTHING													
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Printed/Typed Name FOR UNOCAL Steve Parker				Signature FOR UNOCAL [Signature]				Month Day Year					
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Ray Morgan				Signature [Signature]				Month Day Year 07/11/90					
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature				Month Day Year					
19. Discrepancy Indication Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name													
				Signature				Month Day Year					

Please print or type. (Form designed for use on elite (12-pitch typewriter).

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CA 1 D 9 1 8 1 2 1 0 5 1 6 3 8 8 0 1 0 1 0 1		Manifest Document No.	2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583				Site: 3220 Lakeshore Oakland		A. State Manifest Document Number 90026589		
4. Generator's Phone (415) 277-2366				6. US EPA ID Number H Y H 1 0 3 6 0 0 8 0 0 1		B. State Generator's ID		
5. Transporter 1 Company Name DILLARD TRUCKING, INC.		7. Transporter 2 Company Name		8. US EPA ID Number C A 1 D 9 1 8 1 1 6 9 2 8 0 9		C. State Transporter's ID 100973		
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California				10. US EPA ID Number C A 1 D 9 1 8 0 6 7 5 2 7 6		D. Transporter's Phone 415 634 0567		
						E. State Transporter's ID		
						F. Transporter's Phone		
						G. State Facility's ID		
						H. Facility's Phone 805 762-7341		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)					12. Containers	13. Total Quantity	14. Unit	I. Waste No.
					No.	Type	Wt/Vol	
a. Soil with Gasoline Non RCRA Hazardous Waste Solid					0101	D/T	0101212	T State 611 EPA/Other
b.								State EPA/Other
c.								State EPA/Other
d.								State EPA/Other
J. Additional Descriptions for Materials Listed Above Soil 99%+ Gasoline <1%						K. Handling Codes for Wastes Listed Above		
						a.		
						b.		
						c.		
						d.		
15. Special Handling Instructions and Additional Information Acceptance #G-1189GEN Station #5325 PROPER PROTECTIVE CLOTHING								
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.								
Printed/Typed Name Matt Janowick				Signature <i>Matt Janowick for UNOCAL</i>		Month Day Year 10 7 11 2 90		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Douglas Stephens				Signature <i>Douglas Stephens</i>		Month Day Year 10 21 2 90		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature		Month Day Year		
19. Discrepancy Indication Space								
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.								
Printed/Typed Name				Signature		Month Day Year		

Do Not Write Below This Line

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8902; WITHIN CALIFORNIA CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CIAID981205636800001		Manifest Document No. 00001		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2368						Site: 3220 Lakeshore Oakland			
5. Transporter 1 Company Name DILLARD TRUCKING, INC		6. US EPA ID Number CIAID9811692809		A. State Manifest Document Number 90026590		B. State Generator's ID HYHQ36008001			
7. Transporter 2 Company Name		8. US EPA ID Number		C. State Transporter's ID 100970		D. Transporter's Phone 415-634-0567			
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California		10. US EPA ID Number CIAID980675276		E. State Transporter's ID		F. Transporter's Phone			
				G. State Facility's ID CIAID980675276		H. Facility's Phone 805 762-7341			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers		13. Total Quantity		14. Unit Wt/Vol		1. Waste No.
a. Soil with Gasoline Non RCRA Hazardous Waste Solid			0 0 1 D T		0 0 0 2 3		T		State 611 EPA/Other
b.									State EPA/Other
c.									State EPA/Other
d.									State EPA/Other
J. Additional Descriptions for Materials Listed Above Soil 99%+ Gasoline <1%						K. Handling Codes for Wastes Listed Above a. b. c. d.			
15. Special Handling Instructions and Additional Information Acceptance #G-1189GEN Station #5325 PROPER PROTECTIVE CLOTHING									
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Printed/Typed Name Matt Janowiak				Signature Matt Janowiak for UNOCAL				Month Day Year 10 7 11 2 19 10	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name PHIL ROGERS				Signature Phil Rogers				Month Day Year 10 7 11 2 9 0	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature				Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name									
Signature				Month Day Year					

Do Not Write Below This Line

Blue: GENERATOR SENDS THIS COPY TO DOHS WITHIN 30 DAYS
 To: P.O. Box 400, Sacramento, CA 95812-0400

Please print or type. (Form designed for use on elite, 12-pitch typewriter).

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **C A D 9 8 2 0 5 6 3 6 8 0 0 0 0 1**
Manifest Document No. **0 0 0 0 1**

2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
**UNOCAL MARKETING
P. O. Box 5155
San Ramon, Ca. 94583**
4. Generator's Phone (415) 277-2366
Site: **3220 Lakeshore
Oakland**

A. State Manifest Document Number
90026591

B. State Generator's ID
H Y H Q 3 6 0 0 8 0 0 1

5. Transporter 1 Company Name
DILLARD TRUCKING, INC.
6. US EPA ID Number
C A D 9 8 1 6 9 2 8 0 9

C. State Transporter's ID
700969
D. Transporter's Phone
415-634-0567

7. Transporter 2 Company Name
8. US EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
**GSX - Lokern Facility
Lokern Road
Buttonwillow, California**
10. US EPA ID Number
C A D 9 8 0 6 7 5 2 7 6

G. State Facility's ID
C A D 9 8 0 6 7 5 2 7 6

H. Facility's Phone
805 762-7341

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
	No.	Type			
a. Soil with Gasoline Non RCRA Hazardous Waste Solid	0, 0	D, T	0, 0, 0, 2, 2	T	State 611 EPA/Other
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above
**Soil 99%+
Gasoline <1%**

K. Handling Codes for Wastes Listed Above
a. b. c. d.

15. Special Handling Instructions and Additional Information
**Acceptance #G-1189GEN Station #5325
PROPER PROTECTIVE CLOTHING**

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Printed/Typed Name **Matt Janowiak** Signature *Matt Janowiak for UNOCAL* Month Day Year **10 7 1 2 9 10**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name **JOHN HERMAN** Signature *John Herman* Month Day Year **10 7 1 2 9 10**

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name Signature Month Day Year

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8902; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C I A D 9 8 2 0 5 6 3 6 8 0 0 0 0 1		Manifest Document No. 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2368						Site: 3220 Lakeshore Oakland							
5. Transporter 1 Company Name DILLARD TRUCKING, INC						6. US EPA ID Number C I A D 9 8 1 6 9 2 8 0 0							
7. Transporter 2 Company Name						8. US EPA ID Number							
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California						10. US EPA ID Number C I A D 9 8 0 6 7 5 2 7 6							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit		15. Waste No.	
						No. Type		Quantity		Wt/Vol		State	
a. Soil with Gasoline Non RCRA Hazardous Waste Solid						0 3 D I T		0 0 0 2 2 2		T		EPA/Other 611	
b.												State	
c.												EPA/Other	
d.												State	
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above							
Soil 99%+ Gasoline <1%						a.		b.		c.		d.	
15. Special Handling Instructions and Additional Information													
Acceptance #G-1189GEN PROPER PROTECTIVE CLOTHING										Station #5325			
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Printed/Typed Name Matt Janowick						Signature Matt Janowick for UNOCAL				Month Day Year 10/7/12 1910			
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name LARRY MCGUIRAN						Signature Larry McGuigan				Month Day Year 10/21/12 1910			
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name						Signature				Month Day Year			
19. Discrepancy Indication Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name						Signature				Month Day Year			

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8			Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.				
		3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2366						Site: 3220 Lakeshore Oakland					
5. Transporter 1 Company Name DILLARD TRUCKING, INC.						6. US EPA ID Number C A D 9 8 1 6 9 2 8 0 9		A. State Manifest Document Number 90026593		B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1			
7. Transporter 2 Company Name						8. US EPA ID Number		C. State Transporter's ID 103697		D. Transporter's Phone 415-634-0567			
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California						10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6		E. State Transporter's ID		F. Transporter's Phone			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol			
a. Soil with Gasoline Non RCRA Hazardous Waste Solid						0 0 / D T		0 0 0 2 0		T		I. Waste No. State 611	
												EPA/Other	
												State	
												EPA/Other	
b.										State			
c.										State			
d.										State			
J. Additional Descriptions for Materials Listed Above Soil 99%+ Gasoline <1%						K. Handling Codes for Wastes Listed Above a. b. c. d.							
15. Special Handling Instructions and Additional Information Acceptance #G-1189GEN PROPER PROTECTIVE CLOTHING Station #5325													
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Printed/Typed Name Matt Janowiak						Signature <i>Matt Janowiak for UNOCAL</i>			Month Day Year 10/17/12/90				
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name Kenneth L. Restrow						Signature <i>Kenneth L. Restrow</i>			Month Day Year 10/17/12/90				
18. Discrepancy Indication Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name						Signature			Month Day Year				

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GENERATOR

TRANSPORTER

FACILITY

Please print or type. (Form designed for use on elite 2-pitch typewriter).

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550
 GENERATOR
 TRANSPORTER
 FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8 0 0 0 0 1		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.			
		3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2366				Site: 3220 Lakeshore Oakland		A. State Manifest Document Number 90026594		B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1	
5. Transporter 1 Company Name DILLARD TRUCKING, INC.				6. US EPA ID Number I C A D 9 8 1 6 9 2 8 0 9		C. State Transporter's ID 1 0 3 6 9 2 1 0 3 6 9 6		D. Transporter's Phone 4 1 5 6 3 4 0 5 6 7		E. State Transporter's ID	
7. Transporter 2 Company Name				8. US EPA ID Number		F. Transporter's ID		F. Transporter's Phone		G. State Facility's ID C A D 9 8 0 6 7 5 2 7 6	
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California				10. US EPA ID Number I C A D 9 8 0 6 7 5 2 7 6		H. Facility's ID		H. Facility's Phone 805 762-7341			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt./Vol.	
						No.		Type		Quantity	
a. Soil with Gasoline Non RCRA Hazardous Waste Solid						0 0 2		D T		0 0 0 2 3	
b.										State 611 EPA/Other	
c.										State EPA/Other	
d.										State EPA/Other	
J. Additional Descriptions for Materials Listed Above Soil 99%+ Gasoline <1%						K. Handling Codes for Wastes Listed Above a. b. c. d.					
15. Special Handling Instructions and Additional Information Acceptance #G-1189GEN Station #5325 PROPER PROTECTIVE CLOTHING											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.											
Printed/Typed Name Matt Janowiak						Signature Matt Janowiak for UNOCAL			Month Day Year 10/7/11/2/96		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Bill DeBeste						Signature Bill DeBeste			Month Day Year 07/12/90		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name						Signature			Month Day Year		
19. Discrepancy Indication Space											
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name											
Signature						Month Day Year					

Please print or type. (Form designed for use on elite, 12-pitch typewriter).

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No. **C | A | D | 9 | 8 | 2 | 0 | 5 | 6 | 3 | 6 | 8**
Manifest Document No. **0 | 0 | 0 | 0 | 1**

2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
**UNOCAL MARKETING
P. O. Box 5155
San Ramon, Ca. 94583**
4. Generator's Phone **(415) 277-2366**
Site: **3220 Lakeshore
Oakland**

A. State Manifest Document Number
90026595
B. State Generator's ID
H | Y | H | Q | 3 | 6 | 0 | 0 | 8 | 0 | 0 | 1

5. Transporter 1 Company Name
DILLARD TRUCKING, INC.
6. US EPA ID Number
C | A | D | 9 | 8 | 1 | 6 | 9 | 2 | 8 | 0 | 9

C. State Transporter's ID
106059-106060
D. Transporter's Phone
415-634-0587

7. Transporter 2 Company Name
8. US EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
**GSX - Lokern Facility
Lokern Road
Buttonwillow, California**
10. US EPA ID Number
C | A | D | 9 | 8 | 0 | 6 | 7 | 5 | 2 | 7 | 6

G. State Facility's ID
C | A | D | 9 | 8 | 0 | 6 | 7 | 5 | 2 | 7 | 6
H. Facility's Phone
805 762-7341

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
	No.	Type			
a. Soil with Gasoline Non RCRA Hazardous Waste Solid	0 0 2	D, T	0 0 0 2 4	T	State 811 EPA/Other
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above
**Soil 99%+
Gasoline <1%**

K. Handling Codes for Wastes Listed Above
a. b. c. d.

15. Special Handling Instructions and Additional Information
**Acceptance #G-1189GEN Station #5325
PROPER PROTECTIVE CLOTHING**

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name: **Matt Janowski** Signature: *Matt Janowski for UNOCAL* Month Day Year: **10/7/11 12/19/10**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name: **R. Thomas Kinsey** Signature: *Tom Kinsey* Month Day Year: **07/11/21/10**

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name: Signature: Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name: Signature: Month Day Year:

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-9802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

1044 = 17

30020330

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CLAD 982105836800001		Manifest Document No.		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2366						Site: 3220 Lakeshore Oakland							
5. Transporter 1 Company Name DILLARD TRUCKING, INC.						6. US EPA ID Number HLYH 036008001							
7. Transporter 2 Company Name						8. US EPA ID Number 106812							
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California						10. US EPA ID Number CLAD 980675276							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit		15. Waste No.	
a. Soil with Gasoline Non RCRA Hazardous Waste Solid						0 0 / 1 D T		0 0 0 2 1 3		T		State 611 EPA/Other	
b.												State EPA/Other	
c.												State EPA/Other	
d.												State EPA/Other	
J. Additional Descriptions for Materials Listed Above Soil 99%+ Gasoline <1%						K. Handling Codes for Wastes Listed Above a. b. c. d.							
15. Special Handling Instructions and Additional Information Acceptance #G-1189GEN Station #5325 PROPER PROTECTIVE CLOTHING													
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Printed/Typed Name Matt Janowiak				Signature Matt Janowiak				Month Day Year 10/7/1990					
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Jake Wheeler				Signature Jake Wheeler				Month Day Year 10/7/1990					
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature				Month Day Year					
19. Discrepancy Indication Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name													
Signature				Month Day Year									

Please print or type. (Form designed for use on elite 12-pitch typewriter).

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		F. Generator's US EPA ID No. C I A D 9 8 1 2 0 5 6 3 6 8		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2366						A. State Manifest Document Number 90026597					
Site: 3220 Lakeshore Oakland						B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1					
5. Transporter 1 Company Name DILLARD TRUCKING, INC.			6. US EPA ID Number C I A D 9 8 1 1 6 9 2 8 0 9			C. State Transporter's ID 106811		D. Transporter's Phone 415-634-0567			
7. Transporter 2 Company Name			8. US EPA ID Number			E. State Transporter's ID		F. Transporter's Phone			
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California						10. US EPA ID Number C I A D 9 8 0 6 7 5 2 7 6					
G. State Facility's ID						H. Facility's Phone 805 762-7341					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity	14. Unit	15. Waste No.	
a. Soil with Gasoline Non RCRA Hazardous Waste Solid						0, 0, / D, T		0, 0, 0, 2, 2	T	State 611 EPA/Other	
b.										State EPA/Other	
c.										State EPA/Other	
d.										State EPA/Other	
J. Additional Descriptions for Materials Listed Above Soil 98%+ Gasoline <1%						K. Handling Codes for Wastes Listed Above		a.	b.	c.	
15. Special Handling Instructions and Additional Information Acceptance #G-1189GEN PROPER PROTECTIVE CLOTHING Station #5325											
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Printed/Typed Name Matt Janowick			Signature Matt Janowick for UNOCAL			Month Day Year 05/11/1990					
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name Guy Reed		Signature Guy Reed		Month Day Year 10/7/12/1990	
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space											
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Printed/Typed Name		Signature		Month Day Year	

Do Not Write Below This Line

Blue: GENERATOR SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 400, Sacramento, CA 95812-0400

Please print or type (Form designed for use on *elit* -pitch typewriter).

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **CIAID98205636800001**
Manifest Document No. **00001**

2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
**UNOCAL MARKETING
P. O. Box 5155
San Ramon, Ca. 94583**
Site: **3220 Lakeshore
Oakland**
4. Generator's Phone **(415) 277-2366**

A. State Manifest Document Number
90026598

B. State Generator's ID
HYHQ36008001

5. Transporter 1 Company Name
DILLARD TRUCKING, INC.
6. US EPA ID Number
CIAID981692809

C. State Transporter's ID
D. Transporter's Phone
415-634-0567

7. Transporter 2 Company Name
Hansa Trucking inc
8. US EPA ID Number
ICADK18270091419

E. State Transporter's ID
F. Transporter's Phone
*102922 102923
805 584 3441*

9. Designated Facility Name and Site Address
**GSX - Lokern Facility
Lokern Road
Buttonwillow, California**
10. US EPA ID Number
CIAID980675276

G. State Facility's ID
CIAID980675276

H. Facility's Phone
805 762-7341

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13. Total Quantity	14. Unit Wt./Vol	1. Waste No.
	No.	Type			
a. Soil with Gasoline Non RCRA Hazardous Waste Solid	002	DT	00018	T	State 611 EPA/Other
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above
**Soil 99%+
Gasoline <1%**

K. Handling Codes for Wastes Listed Above
a. b. c. d.

15. Special Handling Instructions and Additional Information
**Acceptance #G-1189GEN Station #5325
PROPER PROTECTIVE CLOTHING**

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Printed/Typed Name **Matt Janowiak** Signature *Matt Janowiak for UNOCAL* Month Day Year **10/21/21910**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name *Mel Cecchetti* Signature *Mel Cecchetti* Month Day Year **10/21/21910**

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name *Mel Cecchetti* Signature *Mel Cecchetti* Month Day Year **01/7/21910**

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name Signature Month Day Year

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-9802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

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IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8602; WITHIN CALIFORNIA CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.									
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2366						Site: 3220 Lakeshore Oakland											
5. Transporter 1 Company Name DILLARD TRUCKING, INC.						6. US EPA ID Number I C A D 9 8 1 6 9 2 8 0 9											
7. Transporter 2 Company Name <i>R. Bajerik TKG</i>						8. US EPA ID Number L A D 9 8 0 5 5 5 7 8 P											
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California						10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6											
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit		15. Waste No.					
						No.		Type		Wt/Vol		State		EPA/Other			
						0 0		D T		0 0 0		T		611			
16. J. Additional Descriptions for Materials Listed Above Soil 99+ Gasoline <1%						K. Handling Codes for Wastes Listed Above a. _____ b. _____ c. _____ d. _____											
15. Special Handling Instructions and Additional Information Acceptance #G-1189GEN Station #5325 PROPER PROTECTIVE CLOTHING																	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.																	
Printed/Typed Name FOR UNOCAL Steve Parker				Signature <i>Steve Parker</i>				Month Day Year 07 11 90									
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Richard Brown				Signature <i>Richard Brown</i>				Month Day Year 07 11 90									
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature				Month Day Year									
19. Discrepancy Indication Space Delete No. 6																	
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name																	
Signature				Month Day Year													

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IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802. WITHIN CALIFORNIA CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.									
3. Generator Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583						Site: 3220 Lakeshore Oakland											
4. Generator's Phone (415) 277-2366						A. State Manifest Document Number 90026566											
6. Transporter 1 Company Name DILLARD TRUCKING, INC.						6. US EPA ID Number C A D 9 8 1 6 9 2 8 0 9		B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1									
7. Transporter 2 Company Name <i>Buente Trucking</i>						8. US EPA ID Number C A D 9 8 0 5 7 5 7 8 0		C. State Transporter's ID									
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California						10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6		D. Transporter's Phone 415-634-0567									
						E. State Transporter's ID <i>013352-013353</i>		F. Transporter's Phone <i>408-527-9321</i>									
						G. State Facility's ID C A D 9 8 0 6 7 5 2 7 6		H. Facility's Phone 805 762-7341									
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit		15. Waste No.					
						No.		Type		-		Wt/Vol		State		Waste No.	
						a.		Soil with Gasoline Non RCRA Hazardous Waste Solid		0 0 2 D T		0 0 0 2 4 T		611		EPA/Other	
						b.								State		EPA/Other	
						c.								State		EPA/Other	
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above											
Soil 99%+ Gasoline <1%						a.		b.		c.		d.					
15. Special Handling Instructions and Additional Information																	
Acceptance #G-1189GEN PROPER PROTECTIVE CLOTHING						Station #5325											
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Printed/Typed Name			Signature			Month			Day			Year					
FOR UNOCAL / Steve Parker			FOR UNOCAL / Steve Parker			07			11			90					
17. Transporter 1 Acknowledgement of Receipt of Materials																	
Printed/Typed Name			Signature			Month			Day			Year					
Jim Mastrianni			[Signature]			07			11			90					
18. Transporter 2 Acknowledgement of Receipt of Materials																	
Printed/Typed Name			Signature			Month			Day			Year					
19. Discrepancy Indication Space																	
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.																	
Printed/Typed Name			Signature			Month			Day			Year					

Do Not Write Below This Line

Please print or type. (Form designed for use on elite 12-pitch typewriter).

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

C | A | D | 9 | 8 | 2 | 0 | 5 | 6 | 3 | 6 | 8

0 | 0 | 0 | 0 | 1

3. Generator's Name and Mailing Address

UNOCAL MARKETING
P. O. Box 5155
San Ramon, Ca. 94583
4. Generator's Phone (415) 277-2366

Site: 3220 Lakeshore
Oakland

A. State Manifest Document Number

90026568

B. State Generator's ID

H | Y | H | 0 | 3 | 6 | 0 | 0 | 8 | 0 | 0 | 1

5. Transporter 1 Company Name

DILLARD TRUCKING, INC.

6. US EPA ID Number

C | A | D | 9 | 8 | 1 | 6 | 9 | 2 | 8 | 0 | 9

C. State Transporter's ID

D. Transporter's Phone 415-634-0587

7. Transporter 2 Company Name

ACKLAM TRUCKING

B. US EPA ID Number

CAD 981 428813

E. State Transporter's ID

F. Transporter's Phone 415-935-0766

9. Designated Facility Name and Site Address

GSX - Lokern Facility
Lokern Road
Buttonwillow, California

10. US EPA ID Number

C | A | D | 9 | 8 | 0 | 8 | 7 | 5 | 2 | 7 | 6

G. State Facility's ID

C | A | D | 9 | 8 | 0 | 8 | 7 | 5 | 2 | 7 | 6

H. Facility's Phone

805 762-7341

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

I. Waste No.

a. **Soil with Gasoline**
Non RCRA Hazardous Waste Solid

0 | 0

D | T

0 | 0 | 0 | 2 | 3

T

State 611

EPA/Other

b.

State

EPA/Other

c.

State

EPA/Other

d.

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

Soil 99%+
Gasoline <1%

K. Handling Codes for Wastes Listed Above

a. b. c. d.

15. Special Handling Instructions and Additional Information

Acceptance #G-1189GEN

Station #5325

PROPER PROTECTIVE CLOTHING

16.

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Printed/Typed Name

FOR UNOCAL Steve Parker

Signature

FOR UNOCAL Steve Parker

Month Day Year

02/14/90

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

1000 Acklam

Signature

1000 Acklam

Month Day Year

07/11/90

19. Discrepancy Indication Space

omit #5,6,C,D,17

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8602; WITHIN CALIFORNIA CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 0 0 0 1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2366				Site: 3220 Lakeshore Oakland		A. State Manifest Document Number 90026570					
5. Transporter 1 Company Name DILLARD TRUCKING, INC.		6. US EPA ID Number C A D 9 8 1 6 9 2 8 0 9		D. Transporter's Phone 415-634-0567		B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1					
7. Transporter 2 Company Name <i>Hearn Trucking Inc</i>		8. US EPA ID Number C A D 9 8 2 7 0 0 9 4 9		E. State Transporter's ID 102922 102923		C. State Transporter's ID 102922 102923					
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California				10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6		F. Transporter's Phone 805 5443441					
G. State Facility's ID C A D 9 8 0 6 7 5 2 7 6				H. Facility's Phone 805 762-7341							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers		13. Total Quantity		14. Unit		15. Waste No.	
a. Soil with Gasoline Non RCRA Hazardous Waste Solid				No. Type		Quantity		Wt/Vol		State	
				0, 0, 2 D, T		0, 0, 0, 1, 8		T		611	
b.										EPA/Other	
c.										State	
d.										EPA/Other	
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above					
Soil 99%+ Gasoline <1%						a. b. c. d.					
15. Special Handling Instructions and Additional Information											
Acceptance #G-1189GEN Station #5325 PROPER PROTECTIVE CLOTHING											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.											
Printed/Typed Name <i>Steven Parker for UNOCAL</i>				Signature <i>[Signature]</i>				Month Day Year 07/11/90			
17. Transporter 1 Acknowledgement of Receipt of Materials											
Printed/Typed Name <i>Mel Cecchetti</i>				Signature <i>[Signature]</i>				Month Day Year 07/11/90			
18. Transporter 2 Acknowledgement of Receipt of Materials											
Printed/Typed Name <i>Mel Cecchetti</i>				Signature <i>[Signature]</i>				Month Day Year 07/11/90			
19. Discrepancy Indication Space											
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.											
Printed/Typed Name				Signature				Month Day Year			

Do Not Write Below This Line

Blue: GENERATOR SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 400, Sacramento, CA 95812-0400

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IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.									
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2366						A. State Manifest Document Number 90026569											
Site: 3220 Lakeshore Oakland						B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1											
5. Transporter 1 Company Name DILLARD TRUCKING, INC.				6. US EPA ID Number C A D 9 8 1 6 9 2 8 0 9		C. State Transporter's ID 106059 106060											
7. Transporter 2 Company Name				8. US EPA ID Number		D. Transporter's Phone 415-634-0567											
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California				10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6		E. State Facility's ID C A D 9 8 0 6 7 5 2 7 6											
						F. Transporter's Phone 805 762-7341											
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit		15. Waste No.					
						No.		Type		Quantity		Wt/Vol		State		EPA/Other	
						a.								611			
						Soil with Gasoline Non RCRA Hazardous Waste Solid		0, 0, 2		D, T		0, 0, 0, 2, 3		T			
						b.											
c.																	
d.																	
16. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above											
Soil 99%+ Gasoline <1%						a.			b.								
						c.			d.								
						15. Special Handling Instructions and Additional Information											
Acceptance #G-1189GEN PROPER PROTECTIVE CLOTHING Station #5325																	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.																	
Printed/Typed Name FOR UNOCAL Steve Parker			Signature <i>Steve Parker</i>			Month Day Year 10/21/89											
17. Transporter 1 Acknowledgement of Receipt of Materials																	
Printed/Typed Name Tom Kinsey			Signature <i>Tom Kinsey</i>			Month Day Year 01/21/89											
18. Transporter 2 Acknowledgement of Receipt of Materials																	
Printed/Typed Name			Signature			Month Day Year											
19. Discrepancy Indication Space																	
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.																	
Printed/Typed Name			Signature			Month Day Year											

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550
 GENERATOR
 TRANSPORTER
 FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.			
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2366				Site: 3220 Lakeshore Oakland				A. State Manifest Document Number: 90026571		B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1	
5. Transporter 1 Company Name DILLARD TRUCKING, INC.				6. US EPA ID Number C A D 9 8 1 6 9 2 8 0 9				C. State Transporter's ID 10680-881		D. Transporter's Phone 415-634-0567	
7. Transporter 2 Company Name				8. US EPA ID Number				E. State Transporter's ID		F. Transporter's Phone	
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California				10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6				G. State Facility's ID		H. Facility's Phone 805 762-7341	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol	
a. Soil with Gasoline Non RCRA Hazardous Waste Solid						0,02 D,T		0,0018		T	
b.										State 611 EPA/Other	
c.										State EPA/Other	
d.										State EPA/Other	
J. Additional Descriptions for Materials Listed Above Soil 99%+ Gasoline <1%						K. Handling Codes for Wastes Listed Above a. b. c. d.					
15. Special Handling Instructions and Additional Information Acceptance #G-1189GEN Station #5325 PROPER PROTECTIVE CLOTHING											
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.											
Printed/Typed Name FOR UNOCAL/Steve Parker				Signature FOR UNOCAL/Steve Parker				Month Day Year 07/1/90			
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Leon W Flanders				Signature Leon W Flanders				Month Day Year 07/1/90			
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature				Month Day Year			
19. Discrepancy Indication Space											
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name											
Signature				Month Day Year							

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-6802; WITHIN CALIFORNIA CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2356				Site: 3220 Lakeshore Oakland		A. State Manifest Document Number 90026572			
5. Transporter 1 Company Name DILLARD TRUCKING, INC.		6. US EPA ID Number I C A D 9 8 1 6 9 2 8 0 9		C. State Transporter's ID 403696 103892		B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1			
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 415-634-0567		E. State Transporter's ID			
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California		10. US EPA ID Number I C A D 9 8 0 6 7 5 2 7 6		G. State Facility's ID C A D 9 8 0 6 7 5 2 7 6		F. Transporter's Phone			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		I. Waste No.	
a. Soil with Gasoline Non RCRA Hazardous Waste Solid		0, 0, 2 D, T		0, 0, 0, 2, 3		T		State 611 EPA/Other	
b.								State EPA/Other	
c.								State EPA/Other	
d.								State EPA/Other	
J. Additional Descriptions for Materials Listed Above Soil 99%+ Gasoline <1%				K. Handling Codes for Wastes Listed Above a. b. c. d.					
15. Special Handling Instructions and Additional Information Acceptance #G-1189GEN Station #5325 PROPER PROTECTIVE CLOTHING									
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Printed/Typed Name FOR UNOCAL Steve Parker				Signature FOR UNOCAL Steve Parker		Month Day Year 07/11/90			
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Bill Den Beste				Signature Bill Den Beste		Month Day Year 07/11/90			
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature		Month Day Year			
19. Discrepancy Indication Space									
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name									
Signature				Month Day Year					

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IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-952-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 0 0 0 1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583				Site: 3220 Lakeshore Oakland		A. State Manifest Document Number 90026573	
4. Generator's Phone (415) 277-2366				6. US EPA ID Number C A D 9 8 1 6 9 2 8 0 9		B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1	
5. Transporter 1 Company Name DILLARD TRUCKING, INC.				8. US EPA ID Number		C. State Transporter's ID 100965	
7. Transporter 2 Company Name				10. US EPA ID Number		D. Transporter's Phone 415-634-0567	
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California				12. Containers No. Type		E. State Transporter's ID	
						F. Transporter's Phone	
						G. State Facility's ID C A D 9 8 0 6 7 5 2 7 6	
						H. Facility's Phone 805 762-7341	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)				13. Total Quantity		14. Unit Wt/Vol	
a. Soil with Gasoline Non RCRA Hazardous Waste Solid				0 0 3 D T 0 0 0 2 2		T	
b.						I. Waste No. State 611 EPA/Other	
c.						State EPA/Other	
d.						State EPA/Other	
J. Additional Descriptions for Materials Listed Above Soil 99%+ Gasoline <1%				K. Handling Codes for Wastes Listed Above a. b. c. d.			
15. Special Handling Instructions and Additional Information Acceptance #G-1189GEN Station #5325 PROPER PROTECTIVE CLOTHING							
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Printed/Typed Name LARRY MCGUIGAN Steve Parken				Signature <i>Steve Parken</i>		Month Day Year 02/01/90	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name LARRY MCGUIGAN				Signature <i>Larry McGuigan</i>		Month Day Year 7/1/90	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name				Signature		Month Day Year	
19. Discrepancy Indication Space							
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name DICK UNOCHI							
				Signature <i>Dick Unochi</i>		Month Day Year	

Do Not Write Below This Line

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To: P.O. Box 400, Sacramento, CA 95812-0400

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583						A. State Manifest Document Number 90026574							
4. Generator's Phone (415) 277-2366						B. State Generator's ID H Y H 0 3 6 0 0 8 0 0 1							
5. Transporter 1 Company Name DILLARD TRUCKING, INC.			6. US EPA ID Number C A D 9 8 1 6 9 2 8 0 9			C. State Transporter's ID 706877		D. Transporter's Phone 415-634-0567					
7. Transporter 2 Company Name			8. US EPA ID Number			E. State Transporter's ID		F. Transporter's Phone					
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California						G. State Facility's ID C A D 9 8 0 6 7 5 2 7 6							
10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6						H. Facility's Phone 805 762-7341							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers No. Type		13. Total Quantity		14. Unit Wt/Vol		1. Waste No.	
a. Soil with Gasoline Non RCRA Hazardous Waste Solid						0 0 1 D T		0 0 0 2 2		T		State 611 EPA/Other	
b.												State EPA/Other	
c.												State EPA/Other	
d.												State EPA/Other	
J. Additional Descriptions for Materials Listed Above Soil 99%+ Gasoline <1%						K. Handling Codes for Wastes Listed Above a. b. c. d.							
15. Special Handling Instructions and Additional Information Acceptance #G-1189GEN Station #5325 PROPER PROTECTIVE CLOTHING													
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Printed/Typed Name FOR UNOCAL Steve PARKER						Signature <i>Steve Parker</i>						Month Day Year 02/11/90	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Guy REED						Signature <i>Guy Reed</i>						Month Day Year 02/11/90	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name						Signature						Month Day Year	
19. Discrepancy Indication Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name													
Signature												Month Day Year	

Please print or type. (Form designed for use on elite 2-pitch typewriter).

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8 0 0 0 0 1		Manifest Document No. 01		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.				
3. Generator's Name and Mailing Address FORUNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583					Site: 3220 Lakeshore Oakland							
4. Generator's Phone (415) 277-2366					A. State Manifest Document Number 90026575							
5. Transporter 1 Company Name DILLARD TRUCKING, INC.					6. US EPA ID Number C A D 9 8 1 6 9 2 8 0 9							
7. Transporter 2 Company Name					8. US EPA ID Number							
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California					10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)					12. Containers		13. Total Quantity		14. Unit			
a. Soil with Gasoline Non RCRA Hazardous Waste Solid					No. Type		Quantity		Wt/Vol			
					0 0 / D T		0 0 0 2 2		T			
b.									State 611			
c.									EPA/Other			
d.									State			
J. Additional Descriptions for Materials Listed Above					K. Handling Codes for Wastes Listed Above							
Soil 99%+ Gasoline <1%					a.		b.		c.		d.	
15. Special Handling Instructions and Additional Information					Acceptance #G-1189GEN Station #5325 PROPER PROTECTIVE CLOTHING							
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Printed/Typed Name FORUNOCAL Steve Parker					Signature FORUNOCAL Steve Parker		Month Day Year 07/1/90					
17. Transporter 1 Acknowledgement of Receipt of Materials					Printed/Typed Name Kenneth L. Renfrow		Signature Kenneth L. Renfrow		Month Day Year 07/1/90			
18. Transporter 2 Acknowledgement of Receipt of Materials					Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space												
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					Printed/Typed Name		Signature		Month Day Year			

Do Not Write Below This Line

Please print or type. (Form designed for use on elite, 2-pitch typewriter).

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1

Information in the shaded areas is not required by Federal law.

CA1D191812015161316800001

of 1

3. Generator's Name and Mailing Address
UNOCAL MARKETING
P. O. Box 5155
San Ramon, Ca. 94583

Site: 3220 Lakeshore
Oakland

A. State Manifest Document Number

90026576

B. State Generator's ID

HYHQ316008001

4. Generator's Phone (415) 277-2366

5. Transporter 1 Company Name
DILLARD TRUCKING, INC.

6. US EPA ID Number

CA1D19181161928019

C. State Transporter's ID

100970

D. Transporter's Phone

415-634-0567

7. Transporter 2 Company Name

8. US EPA ID Number

E. State Transporter's ID

F. Transporter's Phone

9. Designated Facility Name and Site Address
GSX - Lokern Facility
Lokern Road
Buttonwillow, California

10. US EPA ID Number

CA1D1918106171512176

G. State Facility's ID

CA1D1918106171512176

H. Facility's Phone

805 762-7341

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers
No. Type

13. Total Quantity

14. Unit
Wt/Vol

I. Waste No.

a. Soil with Gasoline
Non RCRA Hazardous Waste Solid

0101

D1T

0101023

T

State
611

EPA/Other

b.

State

EPA/Other

c.

State

EPA/Other

d.

State

EPA/Other

J. Additional Descriptions for Materials Listed Above

Soil 99%+
Gasoline <1%

K. Handling Codes for Wastes Listed Above

a.

b.

c.

d.

15. Special Handling Instructions and Additional Information

Acceptance #G-1189GEN

Station #5325

PROPER PROTECTIVE CLOTHING

16.

GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

FOR UNOCAL: Steve Parker

Signature

[Signature]

Month Day Year

07/11/90

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

PHIL ROGERS

Signature

[Signature]

Month Day Year

07/11/90

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name

Signature

Month Day Year

7-11-90

DRIVER

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8602; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

TRANSPORTER

FACILITY

Please print or type. (Form designed for use on 11 x 17 2-pitch typewriter).

**UNIFORM HAZARDOUS
WASTE MANIFEST**

1. Generator's US EPA ID No. **C | A | D | 9 | 8 | 2 | 0 | 5 | 6 | 3 | 6 | 8 | 0 | 0 | 0 | 0 | 1**
Manifest Document No. **0 | 0 | 0 | 0 | 1**

2. Page 1 of 1
Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
**UNOCAL MARKETING
P. O. Box 5155
San Ramon, Ca. 94583**
Site: **3220 Lakeshore
Oakland**

A. State Manifest Document Number
90026577

B. State Generator's ID
H | Y | H | Q | 3 | 6 | 0 | 0 | 8 | 0 | 0 | 1

5. Transporter 1 Company Name
DILLARD TRUCKING, INC.

6. US EPA ID Number
C | A | D | 9 | 8 | 1 | 6 | 9 | 2 | 8 | 0 | 9

C. State Transporter's ID
100969

7. Transporter 2 Company Name

8. US EPA ID Number

D. Transporter's Phone
415-634-0567

9. Designated Facility Name and Site Address
**GSX - Lokern Facility
Lokern Road
Buttonwillow, California**

10. US EPA ID Number
C | A | D | 9 | 8 | 0 | 6 | 7 | 5 | 2 | 7 | 6

G. State Facility's ID

H. Facility's Phone
805 762-7341

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
	No.	Type			
a. Soil with Gasoline Non RCRA Hazardous Waste Solid	0 0 1	D T	0 0 0 22	T	State 611 EPA/Other
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above
**Soil 99%+
Gasoline <1%**

K. Handling Codes for Wastes Listed Above
a. b. c. d.

15. Special Handling Instructions and Additional Information
**Acceptance #G-1189GEN
PROPER PROTECTIVE CLOTHING Station #5325**

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name **Matt Janowiak** Signature **Matt Janowiak for UNOCAL** Month Day Year **07/1/90**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name **JOHN HERMAN** Signature **[Signature]** Month Day Year **07/1/90**

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name _____ Signature _____ Month Day Year _____

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name _____ Signature _____ Month Day Year _____

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-9802; WITHIN CALIFORNIA CALL 1-800-852-7550

GENERATOR

FACILITY

Do Not Write Below This Line

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **C 1 A D 9 8 2 0 5 6 3 6 8 0 0 0 0 1**
 Manifest Document No. **0 0 0 0 1**

2. Page 1 of 1
 Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
UNOCAL MARKETING
P. O. Box 5155
San Ramon, Ca. 94583
 4. Generator's Phone (**415**) **277-2366**

Site: **3220 Lakeshore**
Oakland

A. State Manifest Document Number
90026578

B. State Generator's ID
H Y H Q 3 6 0 0 8 0 0 1

5. Transporter 1 Company Name
DILLARD TRUCKING, INC.
 6. US EPA ID Number
C 1 A D 9 8 1 6 9 2 8 0 9

C. State Transporter's ID **700971**
 D. Transporter's Phone **415-634-0567**

7. Transporter 2 Company Name
 8. US EPA ID Number

E. State Transporter's ID
 F. Transporter's Phone

9. Designated Facility Name and Site Address
GSX - Lokern Facility
Lokern Road
Buttonwillow, California
 10. US EPA ID Number
C 1 A D 9 8 0 6 7 5 2 7 6

G. State Facility's ID
C 1 A D 9 8 0 6 7 5 2 7 6

H. Facility's Phone
805 762-7341

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
	No.	Type			
a. Soil with Gasoline Non RCRA Hazardous Waste Solid	0 0 /	D T	0 0 0 2 2	T	State 611 EPA/Other
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above
Soil 99%+
Gasoline <1%

K. Handling Codes for Wastes Listed Above
 a.
 b.
 c.
 d.

15. Special Handling Instructions and Additional Information
Acceptance #G-1189GEN
PROPER PROTECTIVE CLOTHING
Station #5325

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Printed/Typed Name: **Math Janowick** Signature: **Math Janowick for UNOCAL 7/11/90** Month Day Year: **7 11 90**

17. Transporter 1 Acknowledgement of Receipt of Materials
 Printed/Typed Name: **TED BROOKS** Signature: **T Brooks** Month Day Year: **10 7 11 90**

18. Transporter 2 Acknowledgement of Receipt of Materials
 Printed/Typed Name: Signature: Month Day Year:

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
 Printed/Typed Name: Signature: Month Day Year:

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8602; WITHIN CALIFORNIA CALL 1-800-852-7550
 GENERATOR
 TRANSPORTER
 FACILITY

Please print or type. (Form designed for use on eli. 2-pitch typewriter).

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-9802; WITHIN CALIFORNIA CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8 9 9 9 9 1		Manifest Document No. 1	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583				Site: 3220 Lakeshore Oakland		A. State Manifest Document Number 90026579	
4. Generator's Phone (415) 277-2366				6. US EPA ID Number C A D 9 8 1 6 9 2 8 0 9		B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1	
5. Transporter 1 Company Name DILLARD TRUCKING, INC.				8. US EPA ID Number		C. State Transporter's ID 100973	
7. Transporter 2 Company Name				10. US EPA ID Number		D. Transporter's Phone 415-634-0567	
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California				12. Containers No. Type 0 0 / D T		E. State Transporter's ID	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) a. Soil with Gasoline Non RCRA Hazardous Waste Solid				13. Total Quantity 0 0 0 2 2		F. Transporter's Phone	
b. c. d.				14. Unit T		G. State Facility's ID C A D 9 8 0 6 7 5 2 7 6	
15. Special Handling Instructions and Additional Information Acceptance #G-1189GEN PROPER PROTECTIVE CLOTHING Station #5325				16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.		H. Facility's Phone 805 762-7341	
J. Additional Descriptions for Materials Listed Above Soil 99%+ Gasoline <1%				K. Handling Codes for Wastes Listed Above a. b. c. d.		I. Waste No. State 611 EPA/Other	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name: Matt Janowiak Signature: <i>Matt Janowiak for UNOCAL</i> Month Day Year: 07/11/90							
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name: Douglas Stephens Signature: <i>Douglas Stephens</i> Month Day Year: 07/11/90							
19. Discrepancy Indication Space							
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name: _____ Signature: _____ Month Day Year: _____							

GENERATOR
TRANSPORTER
FACILITY

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8602; WITHIN CALIFORNIA CALL 1-800-862-7550
 GENERATOR
 TRANSPORTER
 FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583				Site: 3220 Lakeshore Oakland				A. State Manifest Document Number 90026580	
4. Generator's Phone (415) 277-2366				6. US EPA ID Number C A D 9 8 1 6 9 2 8 0 9				B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1	
5. Transporter 1 Company Name DILLARD TRUCKING, INC.				7. Transporter 2 Company Name				C. State Transporter's ID 100969	
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California				10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6				D. Transporter's Phone 415-634-0567	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers		13. Total Quantity		14. Unit Wt./Vol	
a. Soil with Gasoline Non RCRA Hazardous Waste Solid				0, 0, 1 D, T		0, 0, 0, 1, 2		T	
b.								State 811	
c.								EPA/Other	
d.								State	
J. Additional Descriptions for Materials Listed Above				K. Handling Codes for Wastes Listed Above					
Soil 99%+ Gasoline <1%				a.		b.			
15. Special Handling Instructions and Additional Information				c.		d.			
Acceptance #G-1189GEN PROPER PROTECTIVE CLOTHING				Station #5325					
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Printed/Typed Name <i>Matt Janowiak for UNOCAL</i>				Signature <i>Matt Janowiak</i>		Month Day Year 07 1 19 0			
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name <i>Jim Payne</i>		Signature <i>Jim Payne</i>		Month Day Year 07 1 19 0	
18. Transporter 2 Acknowledgement of Receipt of Materials				Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.									
Printed/Typed Name <i>Matt Janowiak for UNOCAL</i>				Signature		Month Day Year			

Please print or type. (Form designed for use on elite (12-pitch typewriter).)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583						Site: 3220 Lakeshore Oakland							
4. Generator's Phone (415) 277-2366						A. State Manifest Document Number 90026581							
5. Transporter 1 Company Name DILLARD TRUCKING, INC.						B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1							
6. US EPA ID Number C A D 9 8 1 6 9 2 8 0 9						C. State Transporter's ID 10284-5							
7. Transporter 2 Company Name						D. Transporter's Phone 415-634-0567							
8. US EPA ID Number						E. State Transporter's ID							
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California						F. Transporter's Phone							
10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6						G. State Facility's ID							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		L. Waste No.	
a. Soil with Waste Oil Non RCRA Hazardous Waste Solid						0, 02		D, T		0, 0, 0, 20		T	
b.												State 611	
c.												EPA/Other	
d.												State	
J. Additional Descriptions for Materials Listed Above Soil 99%+ Waste Oil <1%						K. Handling Codes for Wastes Listed Above							
15. Special Handling Instructions and Additional Information Acceptance #M-658 PROPER PROTECTIVE CLOTHING Station #5325						a.		b.		c.		d.	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						Printed/Typed Name FOR UNOCAL / Steve Parker		Signature FOR UNOCAL / Steve Parker		Month Day Year 00/1/90			
17. Transporter 1 Acknowledgement of Receipt of Materials						Printed/Typed Name PHY Morgan		Signature PHY Morgan		Month Day Year 01/11/90			
18. Transporter 2 Acknowledgement of Receipt of Materials						Printed/Typed Name		Signature		Month Day Year			
19. Discrepancy Indication Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						Printed/Typed Name		Signature		Month Day Year			

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GENERATOR

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UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8		Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2366						A. State Manifest Document Number 90026582							
5. Transporter 1 Company Name DILLARD TRUCKING, INC.						B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1							
6. US EPA ID Number 1 6 A D 9 8 1 0 0 1 0 1						C. State Transporter's ID 5							
7. Transporter 2 Company Name ACKLAM TRUCKING						D. Transporter's Phone 415-631-0500							
8. US EPA ID Number C A D 9 8 1 4 2 0 8 1 3						E. State Transporter's ID 002941							
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California						F. Transporter's Phone 415-935-0766							
10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6						G. State Facility's ID C A D 9 8 0 6 7 5 2 7 6							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		1. Waste No.	
a. Soil with Waste Oil Non RCRA Hazardous Waste Solid						0 0 1 D T		0 0 0 23		T		State 611 EPA/Other	
b.												State EPA/Other	
c.												State EPA/Other	
d.												State EPA/Other	
J. Additional Descriptions for Materials Listed Above Soil 99%+ Waste Oil <1%						K. Handling Codes for Wastes Listed Above a. b. c. d.							
15. Special Handling Instructions and Additional Information Acceptance #M-658 Station #5325 PROPER PROTECTIVE CLOTHING													
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Printed/Typed Name Matt Janowiak						Signature Matt Janowiak for UNOCAL				Month Day Year 10/7/12910			
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name 5						Signature 5				Month Day Year 			
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Todd Acklam						Signature Todd Acklam				Month Day Year 10/7/12910			
19. Discrepancy Indication Space omit #5,6,C,D,17													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.													
Printed/Typed Name						Signature				Month Day Year			

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 GENERATOR
 TRANSPORTER
 FACILITY

Do Not Write Below This Line

Blue: GENERATOR SENDS THIS COPY TO DOHS WITHIN 30 DAYS
P.O. Box 400, Sacramento, CA 95812-0400

Please print or type. (Form designed for use on elite (12-pitch typewriter).

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A D 9 8 2 0 5 6 3 6 8			Manifest Document No. 0 0 0 0 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.		
3. Generator's Name and Mailing Address UNOCAL MARKETING P. O. Box 5155 San Ramon, Ca. 94583 4. Generator's Phone (415) 277-2366						Site: 3220 Lakeshore Oakland					
5. Transporter 1 Company Name DILLARD TRUCKING, INC.						8. US EPA ID Number C A D 9 8 1 6 9 2 8 0 9			A. State Manifest Document Number 90026583		
7. Transporter 2 Company Name						8. US EPA ID Number			B. State Generator's ID H Y H Q 3 6 0 0 8 0 0 1		
9. Designated Facility Name and Site Address GSX - Lokern Facility Lokern Road Buttonwillow, California						10. US EPA ID Number C A D 9 8 0 6 7 5 2 7 6			C. State Transporter's ID 106880-881		
									D. Transporter's Phone 415-634-0567		
									E. State Transporter's ID		
									F. Transporter's Phone		
									G. State Facility's ID		
									H. Facility's Phone 805 762-7341		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)					12. Containers		13. Total Quantity		14. Unit		15. Waste No.
a. Soil with Waste Oil Non RCRA Hazardous Waste Solid					0, 0, 2 D, T		0, 0, 0, 1, 1 T		T		State 611 EPA/Other
b.											State EPA/Other
c.											State EPA/Other
d.											State EPA/Other
J. Additional Descriptions for Materials Listed Above Soil 99%+ Waste Oil <1%						K. Handling Codes for Wastes Listed Above a. b. c. d.					
15. Special Handling Instructions and Additional Information Acceptance #M-658 Station #5325 PROPER PROTECTIVE CLOTHING											
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Printed/Typed Name Matt Janowiak					Signature Matt Janowiak for UNOCAL			Month Day Year 10/7/12/90			
17. Transporter 1 Acknowledgment of Receipt of Materials Printed/Typed Name Leon W Flaniers					Signature Leon W Flaniers			Month Day Year 10/7/12/90			
18. Transporter 2 Acknowledgment of Receipt of Materials Printed/Typed Name					Signature			Month Day Year			
19. Discrepancy Indication Space											
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name											
Signature					Month Day Year						

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GENERATOR

TRANSPORTER

FACILITY