

# Group Environmental Management Company

RO 241

**S. T. Hooton**  
Portfolio Manager

295 SW 41<sup>st</sup> Street  
Bldg. 13, STE N  
Renton, WA 98055  
Phone: (425) 251-0689  
Fax: (425) 251-0736  
E-Mail: hootonst@bp.com

April 23, 2003

Mr. Don Hwang  
Alameda County Health Care Services  
Agency  
1131 Harbor Bay Parkway  
Alameda, CA 94502-6577

Alameda County  
APR 29 2003  
Environmental Health

Re: **STID# 3105**  
Former BP Oil Site No. 11127  
5425 Martin Luther King Jr., Way  
Oakland, CA

Dear Ms. Hwang:

This letter follows-up BP's 7 May and 3 June 1997 and 1 December 1999 request for a finding for "no further action" and "case closure".

The only fuel constituent detected in groundwater at the BP site at a concentration exceeding a drinking water primary MCL is benzene. You might recall that the benzene MCL was last reported to have been exceeded in groundwater samples collected during September, 1992. It is also noteworthy that the toluene taste and odor threshold<sup>1</sup> has not been exceeded, and that the ethylbenzene and xylene taste and odor thresholds have not been exceeded since February, 1992. Liquid petroleum hydrocarbons have not been observed in any of the monitoring wells at the BP site.

In contrast to the BP site, Liquid petroleum hydrocarbon has been detected at the Chevron outlet, and aromatic hydrocarbons concentrations have exceeded drinking water MCLs since 1983. Recent (4/1/97) assessment data obtained on behalf of Chevron by Blaine shows that MTBE is present in the groundwater at the Chevron site, and that groundwater is flowing to the southeast (the BP site is located south of the Chevron site), with MTBE detected in Chevron's offsite well MW-6. The areal extent of MTBE associated with the Chevron site was not established in the Blaine report. I think that you can agree that the presence of MTBE in groundwater beneath the BP site resulting from an offsite release should not be a relevant to BP's request for a finding for "no further action" and "case closure."

<sup>1</sup> Federal Register, Vol. 54, No. 97, pp.22138, 22139

April 23, 2003

Please contact me at (425) 251-0689 so that we can conclude this matter in the very near future.

Sincerely,



Scott Hooton

cc: site file  
P. Supple – Atlantic Richfield  
K. Christie – Atlantic Richfield  
Liz Sewell – ConocoPhillips

S. T. Hooton  
Team Leader  
Environmental Remediation Management



**BP OIL**

*RO# 241  
open loop*

BP Exploration & Oil Inc.  
295 SW 41<sup>st</sup> Street, Bldg., 13, STE N  
Renton, WA 98055-4931  
Phone: 425-251-0689  
Fax: 425-251-0736

December 1, 1999

Alameda County Health Care Services Agency  
Attention Ms. Susan L. Hugo - Senior Hazardous Materials Specialist  
UST Local Oversight Program  
1131 Harbor Bay Parkway  
Alameda, CA 94502-6577

RE: BP Oil Site No. 11127  
5425 Martin Luther King, Jr. Way  
Oakland, CA 94609  
STID# 3105

Dear Ms. Hugo:

This letter follows-up BP's 7 May and 3 June 1997 request for a finding for "no further action" and "case closure".

The only fuel constituent detected in groundwater at the BP site at a concentration exceeding a drinking water primary MCL is benzene. You might recall that the benzene MCL was last reported to have been exceeded in groundwater samples collected during September, 1992. It is also noteworthy that the toluene taste and odor threshold<sup>1</sup> has not been exceeded, and that the ethylbenzene and xylene taste and odor thresholds have not been exceeded since February, 1992. Liquid petroleum hydrocarbons have not been observed in any of the monitoring wells at the BP site.

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Please contact me at (425) 251-0689 so that we can conclude this matter in the very near future.

Sincerely,

Scott Hooton

cc: site file  
CRWQCB-SFBR

<sup>1</sup> Federal Register, Vol. 54, No. 97, pp.22138, 22139

99 DEC -3 PM 2:57  
ENVIRONMENTAL PROTECTION



**BP OIL**

BP Oil Company  
Environmental Remediation Management  
295 SW 41st Street  
Renton, Washington 98055-4931  
(425) 251-0667  
Fax No: (425) 251-0736

June 3, 1997

Alameda County Health Care Services Agency  
Attention Ms. Susan L. Hugo - Senior Hazardous Materials Specialist  
UST Local Oversight Program  
1131 Harbor Bay Parkway  
Alameda, CA 94502-6577

RE: BP Oil Site No. 11127  
5425 Martin Luther King, Jr. Way  
Oakland, CA 94609  
STID# 3105

Dear Ms. Hugo:

This letter follows-up BP's 7 May 1997 request for a finding for "no further action" and "case closure" and my telephone message this morning. I have just reviewed Blaine Tech Services 1 May 1997 groundwater monitoring report, and it occurred to me that the MTBE concentration data associated with the Chevron outlet located north of the BP site might factor into your response. I explained my intention to obtain permits to remove or destroy the wells at the BP site, but upon review of the Blaine Tech report, I suspect that Chevron may desire access to the BP wells for the purpose of completing Chevron's site assessment.

The only fuel constituent detected in groundwater at the BP site at a concentration exceeding a drinking water primary MCL is benzene. You might recall that the benzene MCL was last reported to have been exceeded in groundwater samples collected during September, 1992. It is also noteworthy that the toluene taste and odor threshold<sup>1</sup> has not been exceeded, and that the ethylbenzene and xylene taste and odor thresholds have not been exceeded since February, 1992. Liquid petroleum hydrocarbons have not been observed in any of the monitoring wells at the BP site.

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Please contact me at (206) 251-0689 so that we can conclude this matter in the very near future.

Sincerely,

Scott Hooton  
Environmental Remediation Management

cc: site file  
CRWQCB-SFBR, Attention Mr. K. Graves, 2101 Webster Street, Ste. 500, Oakland, CA 94612

<sup>1</sup> Federal Register, Vol. 54, No. 97, pp.22138, 22139



BP OIL

RECEIVED  
ENVIRONMENTAL PROTECTION  
97 MAY 12 AM 10:05

HL 60  
RD 241

BP Oil Company  
Environmental Remediation Management  
295 SW 41st Street  
Renton, Washington 98055-4931  
(425) 251-0667  
Fax No: (425) 251-0736

May 7, 1997

Alameda County Health Care Services Agency  
Attention Ms. Susan L. Hugo - Senior Hazardous Materials Specialist  
UST Local Oversight Program  
1131 Harbor Bay Parkway  
Alameda, CA 94502-6577

RE: BP Oil Site No. 11127  
5425 Martin Luther King, Jr. Way  
Oakland, CA 94609  
**STID# 3105**

Dear Ms. Hugo:

This letter follows-up a December 16, 1996 request for a finding for "no further action" and "case closure". I understand that further monitoring and sampling will not be required at this time. I plan to obtain the permits necessary to remove or destroy the monitoring wells upon confirmation that a closure letter is forthcoming. Let me know if you require further assistance to expedite our request.

Please give me a call if you have any further comments or questions. I can be reached at (206) 251-0689.

Sincerely,

Scott Hooton  
Environmental Remediation Management

attachment

cc: site file  
CRWQCB-SFBR, Attention Mr. K. Graves, 2101 Webster Street, Ste. 500, Oakland,  
CA 94612



**BP OIL**

BP Oil Company  
Environmental Resources Management  
Building 13, Suite N  
295 SW 41st Street  
Renton, Washington 98055-4931  
(206) 251-0667  
Fax No: (206) 251-0736

November 20, 1995

Alameda County Health Care Services Agency  
Attention Ms. Susan L. Hugo - Senior Hazardous Materials Specialist  
UST Local Oversight Program  
1131 Harbor Bay Parkway  
Alameda, CA 94502-6577

RE: BP Oil Site No. 11127  
5425 Martin Luther King, Jr. Way  
Oakland, CA 94609  
**STID# 3105**

Dear Ms. Hugo:

This letter responds to correspondence from the Alameda County Health Care Services Agency dated September 20, 1995, and transmits a report titled Groundwater Monitoring and Sampling Report, dated August 29, 1995. You may recall that we have been sampling this site on a semi-annual basis per BP's February 2, 1993 letter to Rafat Shahid and Eddy So.

Upon review of the results reported in the enclosed report, you will note that fuel constituents (TPH-G, TPH-D, and ethylbenzene) and solvents (1,1-DCA, 1,2-DCA, 1,1,1-TCA) were detected in at least one sample collected from well MW-2. Figure 2, Potentiometric Groundwater Elevation Contour Map, shows a westerly direction of groundwater flow.

In accordance with your request, BP will perform another sampling event so that we can provide the information requested to evaluating this site for site closure. By copy of this letter to Brady Nagle at Alisto Engineering Group, the following activities should occur:

1. Monitoring well MW-3 will not be sampled.
2. Monitoring wells MW-1, MW-2, and MW-4 will be sampled for TPH-G, BTEX and MTBE.
3. Groundwater level measurements are to be coordinated with Chevron<sup>i</sup>.

If levels of petroleum hydrocarbons are still detected at the site, I understand that a fate and transport assessment can be performed to provide a rationale for site closure or further modifications of the sampling regime.

NOV 27 PM 3:35

NON-REGULATORY

Please give me a call if you have any further comments or questions. I can be reached at (206) 251-0689.

Sincerely,



Scott Hooton  
Environmental Remediation Management

attachment

cc: site file  
B. Nagle - AEG  
CRWQCB-SFBR, Attention Mr. E. So, 2101 Webster Street, Ste. 500, Oakland, CA  
94612 (w/attachment)

---

<sup>1</sup> Chevron U.S.A. Products Company, Mr. Mark Miller, 2410 Camino Ramon, San Ramon, CA 94583, GTI,  
Mr. Tim Watchers, 4057 Port Chicago Highway, Concord, CA 94520

**ALAMEDA COUNTY  
HEALTH CARE SERVICES  
AGENCY**

DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, DIRECTOR

DEPARTMENT OF ENVIRONMENTAL HEALTH  
State Water Resources Control Board  
Division of Clean Water Programs  
UST Local Oversight Program  
1131 Harbor Bay Parkway  
Alameda, CA 94502-6577  
(510) 567-6700

September 20, 1995  
STID# 3105

Mr. Scott Hooton  
BP Oil Company  
Environmental Resources Management  
Building 13, Suite N  
295 SW 41st Street  
Renton, Washington 98055- 4931

RE: Groundwater Monitoring Program  
BP Oil - 5425 Martin Luther King, Jr. Way, Oakland, CA 94609

Dear Mr. Hooton:

The Alameda County Department of Environmental Health, Environmental Protection Division has completed review of the case file concerning the removal of four underground storage tanks at the referenced site.

Two groundwater monitoring wells (MW-1 and MW-2) were installed in April 1991. Additional subsurface investigation was conducted in February 1993 with the installation of monitoring wells MW-3 and MW-4. The groundwater elevation measurements were coordinated with a neighboring site, Chevron Station located at 5509 Martin Luther King, Jr. Way to better understand the fluctuating flow direction found at the site. Based on the six coordinated monitoring events ( 11/90, 5/91, 8/91, 11/91, 2/92 and 9/92), it appears that the groundwater flows toward the west to northwest direction at the subject site.

During the sampling event conducted on March, 1994, two on-site wells (MW-1 and MW-4) detected TPH gasoline concentration up to 220 ppb. The last groundwater sampling occurred in December, 1994 and only one well (MW-2) was sampled. TPH gasoline (79 ppb), TCA (4.8 ppb), and chloroform (2.3 ppb) were detected.

This agency recommends that at a minimum, one monitoring event should be conducted before evaluating the site for closure and the following parameters should be considered:

- 1) Monitoring well MW-3 can be dropped from the sampling program.
- 2) Monitoring wells MW-1, MW-2, and MW-4 shall be sampled and analyzed for TPH gasoline, BTEX and MTBE ( methyl tertiary butyl ether ).
- 3) Groundwater level measurements shall be collected on all the four on-site wells and coordinated with the Chevron site if possible.



Mr. Scott Hooton  
RE: 5425 Martin Luther King Way, Jr., Oakland, CA 94609  
September 20, 1995  
Page 2 of 2

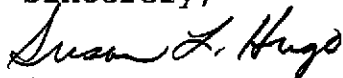
A report must be submitted to this agency within **60 days** after completion of the above mentioned work at the site. The case closure recommendation with the rationale for closing the case may be included in this report. If low levels of petroleum hydrocarbon are still detected at the site, you may conduct a fate and transport assessment of these contaminants. In addition, the following items must be incorporated in your report:

- a cover letter from the responsible party or tank owner stating the accuracy of the report and whether he/she concurs with the conclusions and recommendations in the report or work plan
- site map delineating contamination contours for soil and groundwater based on recent data should be included and the status of the investigation and cleanup must be identified
- proposed continuing or next phase of investigation / cleanup activities must be included to inform this department of the responsible party or tank owner's intention
- any changes in the groundwater flow direction and gradient based on the measured data since the last sampling event must be explained
- historical records of groundwater level in each well must be tabulated to indicate the fluctuation in water levels
- tabulate analytical results from all previous sampling events; provide laboratory reports (including quality control/quality assurance) and chain of custody documentation

All reports and proposals must be submitted under seal of a California Registered Geologist or Registered Civil Engineer with a statement of qualifications for each lead professionals involved with the project.

If you have any questions concerning this letter, please call me at (510) 567-6780.

Sincerely,



Susan L. Hugo  
Senior Hazardous Materials Specialist

cc: Jun Makishima, Interim Director, Environmental Health  
George Young, Acting Chief, Environmental Protection / files  
Kevin Graves, San Francisco Bay RWQCB

**BP OIL**

BP Oil Company  
Aetna Bldg., Suite 360  
2868 Prospect Park Drive  
Rancho Cordova, California 95670-6020  
(916) 631-0733

90 AUG -14 PM 2:43

September 12, 1990

Alameda County  
Att: Susan Hugo  
Hazardous Materials Specialist  
80 Swan Way, Room 200  
Oakland, CA 94621

RE: BP OIL FACILITY #11127  
5425 GROVE STREET  
OAKLAND, CA

Dear Ms. Hugo:

In response to your letter to Mr. W.J. Hollis, dated August 29, 1990, please find enclosed the Underground Storage Tank Unauthorized Release (Leak) Contamination Site Report on the subject facility.

BP Oil Company is now soliciting bid proposals to various contractors for a Phase I site assessment, and a contractor will be selected in approximately two weeks.

Please accept my apology for the delay in responding to this matter. There has been a change in personnel and I have just recently assumed the Environmental Coordinator position with BP Oil Company.

Respectfully,



Peter J. DeSantis  
Environmental Coordinator

PJD:dj

Enclosure

cc: Rafat A. Shahid, County of Alameda  
Lester Feldman, San Francisco Bay RWQCB  
J.R. Rocco, BP Oil Company

# UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		FOR LOCAL AGENCY USE ONLY I HEREBY CERTIFY THAT I AM A DESIGNATED GOVERNMENT EMPLOYEE AND THAT I HAVE REPORTED THIS INFORMATION TO LOCAL OFFICIALS PURSUANT TO SECTION 25180.7 OF THE HEALTH AND SAFETY CODE. SIGNED: <u>Susan L. Hugo</u> DATE: <u>9-17-90</u>	
REPORT DATE 0 <u>9</u> <u>1</u> <u>1</u> <u>9</u> <u>0</u>		CASE # _____			
REPORTED BY	NAME OF INDIVIDUAL FILING REPORT Peter J. DeSantis		PHONE (916) 631-6919		SIGNATURE <u>Peter J. DeSantis</u> 9-11-90
	REPRESENTING <input checked="" type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> OTHER _____		COMPANY OR AGENCY NAME B P Oil Company		
	ADDRESS 2868 Prospect Park Dr. #360 Rancho Cordova CA 95670 <small>STREET CITY STATE ZIP</small>				
RESPONSIBLE PARTY	NAME B P Oil Company <input type="checkbox"/> UNKNOWN		CONTACT PERSON Peter J. DeSantis		PHONE (916) 631-6919
	ADDRESS 2868 Prospect Park Dr., #360 Rancho Cordova CA 95670 <small>STREET CITY STATE ZIP</small>				
SITE LOCATION	FACILITY NAME (IF APPLICABLE) Park BP, Facility #11127		OPERATOR Chung Y. Park		PHONE (415) 655-0803
	ADDRESS 5425 Grove Street (formerly) Oakland Alameda 94609 <small>STREET CITY COUNTY ZIP</small>				
	CROSS STREET Fifty-Fifth		TYPE OF AREA <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> RURAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> OTHER <u>Unknown</u>		TYPE OF BUSINESS <input checked="" type="checkbox"/> RETAIL FUEL STATION <input type="checkbox"/> FARM <input type="checkbox"/> OTHER _____
IMPLEMENTING AGENCIES	LOCAL AGENCY AGENCY NAME Alameda County Care Services		CONTACT PERSON Susan Hugo		PHONE (415) 271-4320
	REGIONAL BOARD Regional Water Quality Control		CONTACT PERSON Scott Hugenberger		PHONE (415) 464-1255
SUBSTANCES INVOLVED	(1) NAME QUANTITY LOST (GALLONS) 1987 Type Unknown (Reports supplied BP by Mobil) <input checked="" type="checkbox"/> UNKNOWN				
	(2) 1986 Waste Oil (Reports supplied BP by Mobil Oil) <input checked="" type="checkbox"/> UNKNOWN				
DISCOVERY/ABATEMENT	DATE DISCOVERED 8 <u>0</u> <u>9</u> <u>0</u>		HOW DISCOVERED <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS <input type="checkbox"/> TANK TEST <input type="checkbox"/> TANK REMOVAL <input checked="" type="checkbox"/> OTHER <u>PURRING CONSTRUCTION</u>		
	DATE DISCHARGE BEGAN _____		METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input type="checkbox"/> REMOVE CONTENTS <input type="checkbox"/> REPLACE TANK <input type="checkbox"/> CLOSE TANK <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> REPAIR PIPING <input type="checkbox"/> CHANGE PROCEDURE <input type="checkbox"/> OTHER <u>NA</u>		
	HAS DISCHARGE BEEN STOPPED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE <u>NA</u>				
SOURCE/CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> TANK LEAK <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> PIPING LEAK <input type="checkbox"/> OTHER _____		TANKS ONLY/CAPACITY _____ GAL. AGE _____ YRS <input type="checkbox"/> UNKNOWN		MATERIAL <input type="checkbox"/> FIBERGLASS <input type="checkbox"/> STEEL <input type="checkbox"/> OTHER _____
	CAUSE(S) <input type="checkbox"/> OVERFILL <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> CORROSION <input type="checkbox"/> UNKNOWN <input type="checkbox"/> SPL. <input type="checkbox"/> OTHER _____				
CASE TYPE	CHECK ONE ONLY <input type="checkbox"/> UNDETERMINED <input checked="" type="checkbox"/> SOIL ONLY <input type="checkbox"/> GROUNDWATER <input type="checkbox"/> DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)				
CURRENT STATUS	CHECK ONE ONLY <input type="checkbox"/> SITE INVESTIGATION IN PROGRESS (DEFINING EXTENT OF PROBLEM) <input checked="" type="checkbox"/> CLEANUP IN PROGRESS <input type="checkbox"/> SIGNED OFF (CLEANUP COMPLETED OR UNNECESSARY) <input type="checkbox"/> NO ACTION TAKEN <input type="checkbox"/> POST CLEANUP MONITORING IN PROGRESS <input type="checkbox"/> NO FUNDS AVAILABLE TO PROCEED <input checked="" type="checkbox"/> EVALUATING CLEANUP ALTERNATIVES				
REMEDIAL ACTION	CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS) <input type="checkbox"/> CAP SITE (CO) <input checked="" type="checkbox"/> EXCAVATE & DISPOSE (ED) <input type="checkbox"/> REMOVE FREE PRODUCT (FP) <input type="checkbox"/> ENHANCED BIO DEGRADATION (IT) <input type="checkbox"/> CONTAINMENT BARRIER (CB) <input type="checkbox"/> EXCAVATE & TREAT (ET) <input type="checkbox"/> PUMP & TREAT GROUNDWATER (GT) <input type="checkbox"/> REPLACE SUPPLY (RS) <input type="checkbox"/> TREATMENT AT HOOKUP (HU) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input type="checkbox"/> OTHER (OT) _____				
COMMENTS	This information was taken from the reports supplied to BP Oil Company by Mobil Oil Corporation.  Contamination found during construction on site by BP Oil Company.				



BP OIL

BP Oil Company  
Aetna Bldg., Suite 360  
2868 Prospect Park Drive  
Rancho Cordova, California 95670-6020  
(916) 631-0733

September 12, 1990

Alameda County  
Att: Susan Hugo  
Hazardous Materials Specialist  
80 Swan Way, Room 200  
Oakland, CA 94621

RE: BP OIL FACILITY #11127  
5425 GROVE STREET  
OAKLAND, CA 609

Dear Ms. Hugo:

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BP Oil Company is now soliciting bid proposals to various contractors for a Phase I site assessment, and a contractor will be selected in approximately two weeks.

Please accept my apology for the delay in responding to this matter. There has been a change in personnel and I have just recently assumed the Environmental Coordinator position with BP Oil Company.

Respectfully,

Peter J. DeSantis  
Environmental Coordinator

PJD:dj

Enclosure

cc: Rafat A. Shahid, County of Alameda  
Lester Feldman, San Francisco Bay RWQCB  
J.R. Rocco, BP Oil Company

# UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	FOR LOCAL AGENCY USE ONLY I HEREBY CERTIFY THAT I AM A DESIGNATED GOVERNMENT EMPLOYEE AND THAT I HAVE REPORTED THIS INFORMATION TO LOCAL OFFICIALS PURSUANT TO SECTION 25180.7 OF THE HEALTH AND SAFETY CODE. SIGNED: <u>Susan J. Hugo</u> DATE: <u>9-17-90</u>
REPORT DATE 09/10/90	CASE #	SIGNED: _____ DATE: _____

REPORTED BY	NAME OF INDIVIDUAL FILING REPORT Peter J. DeSantis	PHONE (916) 631-6919	SIGNATURE <u>Peter J. DeSantis</u> DATE: <u>9-11-90</u>
	REPRESENTING <input checked="" type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> OTHER	COMPANY OR AGENCY NAME B P Oil Company	

ADDRESS  
 2868 Prospect Park Dr. #360 Rancho Cordova CA 95670  
STREET CITY STATE ZIP

RESPONSIBLE PARTY	NAME B P Oil Company <input type="checkbox"/> UNKNOWN	CONTACT PERSON Peter J. DeSantis	PHONE (916) 631-6919
	ADDRESS 2868 Prospect Park Dr., #360 Rancho Cordova CA 95670 <small>STREET CITY STATE ZIP</small>		

SITE LOCATION	FACILITY NAME (IF APPLICABLE) Park BP, Facility #11127	OPERATOR Chung Y. Park	PHONE (415) 655-0803
	ADDRESS 5425 Grove Street <u>MARTIN LUTHER KING WAY (former)</u> Oakland Alameda 94609 <small>STREET CITY COUNTY ZIP</small>		
CROSS STREET Fifty-Fifth		TYPE OF AREA <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> RURAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> OTHER <u>Unknown</u>	TYPE OF BUSINESS <input checked="" type="checkbox"/> RETAIL FUEL STATION <input type="checkbox"/> FARM <input type="checkbox"/> OTHER

IMPLEMENTING AGENCIES	LOCAL AGENCY Alameda County Care Services	CONTACT PERSON Susan Hugo	PHONE (415) 271-4320
	REGIONAL BOARD Regional Water Quality Control		CONTACT PERSON Scott Hugenberger

SUBSTANCES INVOLVED	NAME 1987 Type Unknown (Reports supplied BP by Mobil)	QUANTITY LOST (GALLONS)	<input checked="" type="checkbox"/> UNKNOWN
	1986 Waste Oil (Reports supplied BP by Mobil Oil) <input checked="" type="checkbox"/> UNKNOWN		

DISCOVERY/ABATEMENT	DATE DISCOVERED 8/9/90	HOW DISCOVERED <input type="checkbox"/> TANK TEST <input type="checkbox"/> TANK REMOVAL <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS <input checked="" type="checkbox"/> OTHER <u>DURING CONSTRUCTION</u>	DATE DISCHARGE BEGAN _____ <input checked="" type="checkbox"/> UNKNOWN
	HAS DISCHARGE BEEN STOPPED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE _____		METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input type="checkbox"/> REMOVE CONTENTS <input type="checkbox"/> REPLACE TANK <input type="checkbox"/> CLOSE TANK <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> REPAIR PIPING <input type="checkbox"/> CHANGE PROCEDURE <input type="checkbox"/> OTHER <u>NA</u>
	SOURCE OF DISCHARGE <input type="checkbox"/> TANK LEAK <input checked="" type="checkbox"/> UNKNOWN		

SOURCE/CAUSE	TANKS ONLY: CAPACITY _____ GAL AGE _____ YRS <input type="checkbox"/> UNKNOWN	MATERIAL <input type="checkbox"/> FIBERGLASS <input type="checkbox"/> STEEL <input type="checkbox"/> OTHER	CAUSE(S) <input type="checkbox"/> OVERFILL <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> CORROSION <input type="checkbox"/> UNKNOWN <input type="checkbox"/> SPILL <input type="checkbox"/> OTHER
	SOURCE OF DISCHARGE <input type="checkbox"/> TANK LEAK <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> PIPING LEAK <input type="checkbox"/> OTHER		

CHECK ONE ONLY  
 UNDETERMINED  SOIL ONLY  GROUNDWATER  DRINKING WATER - (CHECK ONLY IF WATER WELL<sup>2</sup> HAVE ACTUALLY BEEN AFFECTED)

CHECK ONE ONLY  
 SITE INVESTIGATION IN PROGRESS (DEFINING EXTENT OF PROBLEM)  CLEANUP IN PROGRESS  SIGNED OFF (CLEANUP COMPLETED OR UNNECESSARY)  
 NO ACTION TAKEN  POST CLEANUP MONITORING IN PROGRESS  NO FUNDS AVAILABLE TO PROCEED  EVALUATING CLEANUP ALTERNATIVES

CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS)

<input type="checkbox"/> CAP SITE (CS)	<input checked="" type="checkbox"/> EXCAVATE & DISPOSE (ED)	<input type="checkbox"/> REMOVE FREE PRODUCT (FP)	<input type="checkbox"/> ENHANCED BIO DEGRADATION (IT)
<input type="checkbox"/> CONTAINMENT BARRIER (CB)	<input type="checkbox"/> EXCAVATE & TREAT (ET)	<input type="checkbox"/> PUMP & TREAT GROUNDWATER (GT)	<input type="checkbox"/> REPLACE SUPPLY (RS)
<input type="checkbox"/> TREATMENT AT HOOKUP (HU)	<input type="checkbox"/> NO ACTION REQUIRED (NA)	<input type="checkbox"/> OTHER (OT)	

COMMENTS  
 This information was taken from the reports supplied to BP Oil Company by Mobil Oil Corporation.  
 Contamination found during construction on site by BP Oil Company.

Am  
9/19

# UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	FOR LOCAL AGENCY USE ONLY I HEREBY CERTIFY THAT I AM A DESIGNATED GOVERNMENT EMPLOYEE AND THAT I HAVE REPORTED THIS INFORMATION TO LOCAL OFFICIALS PURSUANT TO SECTION 25180.7 OF THE HEALTH AND SAFETY CODE. SIGNED: <u>Susan L. Hugo</u> DATE: <u>9-17-90</u>
REPORT DATE 0 <u>9</u> <u>1</u> <u>1</u> <u>9</u> <u>0</u>	CASE #	

REPORTED BY	NAME OF INDIVIDUAL FILING REPORT Peter J. DeSantis	PHONE (916) 631-6919	SIGNATURE <u>Peter J. DeSantis</u>	DATE 9-11-90
	REPRESENTING <input checked="" type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> OTHER	COMPANY OR AGENCY NAME B P Oil Company		

RESPONSIBLE PARTY	NAME B P Oil Company	<input type="checkbox"/> UNKNOWN	CONTACT PERSON Peter J. DeSantis	PHONE (916) 631-6919
	ADDRESS 2868 Prospect Park Dr., #360 Rancho Cordova CA 95670			

SITE LOCATION	FACILITY NAME (IF APPLICABLE) Park BP, Facility #11127	OPERATOR Chung Y. Park	PHONE (415) 655-0803	
	ADDRESS 5425 Grove Street (formerly) <u>MARTIN LUTHER KING WAY</u> Oakland Alameda 94609			
	CROSS STREET Fifty-Fifth	TYPE OF AREA <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> RURAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> OTHER <u>Unknown</u>	TYPE OF BUSINESS <input checked="" type="checkbox"/> RETAIL FUEL STATION <input type="checkbox"/> FARM <input type="checkbox"/> OTHER	

IMPLEMENTING AGENCIES	LOCAL AGENCY Alameda County Care Services	AGENCY NAME	CONTACT PERSON Susan Hugo	PHONE (415) 271-4320
	REGIONAL BOARD Regional Water Quality Control		CONTACT PERSON Scott Hugenberger	PHONE (415) 464-1255

SUBSTANCE INVOLVED	(1) NAME 1987 Type Unknown (Reports supplied BP by Mobil)	QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN
	(2) NAME 1986 Waste Oil (Reports supplied BP by Mobil Oil)	QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN

DISCOVERY/ABATEMENT	DATE DISCOVERED 8 <u>0</u> <u>9</u> <u>9</u> <u>0</u>	HOW DISCOVERED <input type="checkbox"/> TANK TEST <input type="checkbox"/> TANK REMOVAL <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS <input checked="" type="checkbox"/> OTHER <u>PURGING CONSTRUCTION</u>
	DATE DISCHARGE BEGAN <input checked="" type="checkbox"/> UNKNOWN	METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input type="checkbox"/> REMOVE CONTENTS <input type="checkbox"/> REPLACE TANK <input type="checkbox"/> CLOSE TANK <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> REPAIR PIPING <input type="checkbox"/> CHANGE PROCEDURE <input type="checkbox"/> OTHER <u>NA</u>
	HAS DISCHARGE BEEN STOPPED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE	

SOURCE/CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> TANK LEAK <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> PIPING LEAK <input type="checkbox"/> OTHER	TANKS ONLY/CAPACITY GAL _____ YRS _____ <input type="checkbox"/> UNKNOWN	MATERIAL <input type="checkbox"/> FIBERGLASS <input type="checkbox"/> STEEL <input type="checkbox"/> OTHER	CAUSE(S) <input type="checkbox"/> OVERFILL <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> CORROSION <input type="checkbox"/> UNKNOWN <input type="checkbox"/> SPILL <input type="checkbox"/> OTHER
--------------	--	--	---	--

CASE TYPE	CHECK ONE ONLY <input type="checkbox"/> UNDETERMINED <input checked="" type="checkbox"/> SOIL ONLY <input type="checkbox"/> GROUNDWATER <input type="checkbox"/> DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)
-----------	--

CURRENT STATUS	CHECK ONE ONLY <input type="checkbox"/> SITE INVESTIGATION IN PROGRESS (DEFINING EXTENT OF PROBLEM) <input checked="" type="checkbox"/> CLEANUP IN PROGRESS <input type="checkbox"/> SIGNED OFF (CLEANUP COMPLETED OR UNNECESSARY) <input type="checkbox"/> NO ACTION TAKEN <input type="checkbox"/> POST CLEANUP MONITORING IN PROGRESS <input type="checkbox"/> NO FUNDS AVAILABLE TO PROCEED <input checked="" type="checkbox"/> EVALUATING CLEANUP ALTERNATIVES
----------------	---

REMEDIAL ACTION	CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS) <input type="checkbox"/> CAP SITE (CD) <input checked="" type="checkbox"/> EXCAVATE & DISPOSE (ED) <input type="checkbox"/> REMOVE FREE PRODUCT (FP) <input type="checkbox"/> ENHANCED BIO DEGRADATION (IT) <input type="checkbox"/> CONTAINMENT BARRIER (CB) <input type="checkbox"/> EXCAVATE & TREAT (ET) <input type="checkbox"/> PUMP & TREAT GROUNDWATER (GT) <input type="checkbox"/> REPLACE SUPPLY (RS) <input type="checkbox"/> TREATMENT AT HOOKUP (HJ) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input type="checkbox"/> OTHER (OT)
-----------------	---

COMMENTS  
This information was taken from the reports supplied to BP Oil Company by Mobil Oil Corporation.  
Contamination found during construction on site by BP Oil Company.

ALAMEDA COUNTY  
HEALTH CARE SERVICES

AGENCY  
DAVID J. KEARS, Director



Telephone Number: (415)

Certified mailer #: P 062 128 160

August 29, 1990

Mr. W.J. Hollis  
B.P. Oil Company  
2868 Prospect Park Drive, Suite 360  
Rancho Cordova, California 95670

**RE: Unauthorized Release From Underground Storage Tanks,  
B.P. Oil Company, 5425 Martin Luther King Way  
Oakland, 94609**

Dear Mr. Hollis:

As you know, a considerable amount of Total Petroleum Hydrocarbon was discovered at the above referenced site. Because of the amount of contamination found, the facility is considered to have experienced a confirmed release. Title 23 of the California Code of Regulations requires all such unauthorized releases from underground tanks to be reported. An unauthorized release report must be filed with this office within 5 days of the date of this letter; in addition, you must initiate further investigation and/or cleanup activities at this site.

First, a preliminary assessment should be conducted to determine the extent of soil and groundwater contamination that has resulted from the leaking tank(s). The information gathered by this investigation will be used to assess the need for additional actions at the site. The preliminary assessment should be designed to provide all of the information in the format shown at the end of this letter. This format is based on the Regional Water Quality Control Board (RWQCB's) guidelines. You should be prepared to install one monitoring well, if you can verify the direction of groundwater flow in the immediate vicinity of the site, and three wells or piezometers, if you cannot.

Until cleanup is complete, you will need to submit reports to this office and to the RWQCB every three months (or at a more frequent interval, if specified at any time by either agency). These reports should include information pertaining to further investigative results; the methods and costs of cleanup actions implemented to date; and the method and location of disposal of any contaminated material.

P 062 128 160

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL  
(See Reverse)

Sent to	
Street and No.	
P.O. State and ZIP Code	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom Date and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

PS Form 3800, JULY 1983

**Caution:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1.  Show to whom delivered, date, and addressee's address. (Extra charge)      2.  Restricted Delivery (Extra charge)

3. Article Addressed to:  Mr. W.J. Hollis B.P. Oil Company 2868 Prospect Park Dr. Suite 360 Rancho Cardova, CA 95670	4. Article Number P 062 128 160
5. Signature Address X <i>W.J. Hollis</i>	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
6. Signature - Agent X	Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery 9-4-90	8. Addressee's Address (ONLY if requested and fee paid)



Mr. W.J. Hollis

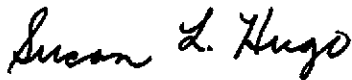
Page 2 of 6

Soils contaminated at hazardous waste concentrations should be transported by a licensed hazardous waste hauler and disposed of or treated at a facility approved by the California Department of Health Services. Soils contaminated below the hazardous threshold may be managed as nonhazardous, but are still subject to the RWQCB's waste discharge requirements.

Your work plan should be submitted to this office within 15 days of the date of this letter. A report describing the results of the preliminary site assessment should be submitted within 30 days of the date of this letter. Copies of the proposal and report should also be sent to the RWQCB (attention: Mr. Lester Feldman). You may implement remedial actions before approval of the work plan, but final concurrence by this office will depend on the extent to which the work done meets the requirements described in this letter.

You will need to submit an additional deposit of \$ 375 to cover costs that the Division of Hazardous Materials incurs during remediation oversight. Should you have any questions about this letter or about remediation requirements established by the RWQCB, please contact me at (415) 271-4320.

Sincerely,



Susan L. Hugo  
Hazardous Materials Specialist

attachment

cc: Rafat A. Shahid, Assistant Agency Director, Environmental Health  
Edgar Howell, Chief, Hazardous Materials Division  
Gil Jensen, District Attorney, Alameda County Consumer and  
Environmental Protection Agency  
Lester Feldman, San Francisco Bay RWQCB  
Howard Hatamaya, State Department of Health Services  
Files

## WORK PLAN FOR INITIAL SUBSURFACE INVESTIGATION

This outline should be followed by professional engineering or geologic consultants in preparing work plans to be submitted to the RWQCB and local agencies. Work plans should be signed by a California-registered engineer or geologist.

This outline should be referred to in context with the "Regional Board Staff Recommendations for Initial Evaluation and Investigation of Underground Tanks" (June 2, 1988).

### PROPOSAL FORMAT

#### I. Introduction

- A. State the scope of work
- B. Provide information on site location, background, and history
  1. Describe the type of business and associated activities that take place at the site, including the number and capacity of operating tanks.
  2. Describe previous businesses at the site.
  3. Provide other tank information:
    - number of underground tanks, their uses, and construction material;
    - filing status and copy of unauthorized release form, if not previously submitted;
    - previous tank testing results and dates, including discussion of inventory reconciliation methods and results for the last three years.
  4. Other spill, leak, and accident history at the site, including any previously removed tanks.

#### II. Site Description

- A. Describe the hydrogeologic setting of the site vicinity
- B. Prepare a vicinity map (including wells located on-site or on adjoining lots, as well as any nearby streams)
- C. Prepare a site map

D. Summarize known soil contamination and results of excavation

1. Provide results in tabular form and indicate location of all soil samples (and water samples, if appropriate). Sample dates, the identity of the sampler, and signed laboratory data sheets need to be included, if not already in possession of the County.
2. Describe any unusual problems encountered.
3. Describe methods for storing and disposing of all contaminated soil.

III. Plan for Determining Extent of Soil Contamination

A. Describe method for determining the extent of contamination within the excavation

B. Describe sampling methods and procedures to be used

1. If a soil gas survey is planned, then:

- identify number of boreholes, locations, sampling depths, etc.;
- identify subcontractors, if any;
- identify analytical methods;
- provide a quality assurance plan for field testing.

2. If soil borings are to be used to determine the extent of soil contamination, then:

- identify number, location (mapped), and depth of the proposed borings;
- describe the soil classification system, soil sampling method, and rationale;
- describe the drilling method for the borings, including decontamination procedures;
- explain how borings will be abandoned.

C. Describe how clean and contaminated soil will be differentiated, and describe how excavated soil will be stored and disposed of. If on-site soil aeration is to be used, then describe:

1. The volume and rate of aeration/turning;
2. The method of containment and cover;
3. Wet-weather contingency plans;
4. Results of consultation with the Bay Area Air Quality Management District.

Other on-site treatments (such as bioremediation) require permits issued by the RWQCB. Off-site storage or treatment also requires RWQCB permits.

- D. Describe security measures planned for the excavated hole and contaminated soil

#### IV. Plan for Characterizing Groundwater Contamination

Construction and placement of wells should adhere to the requirements of the "Regional Board Staff Recommendations for Initial Evaluation and Investigation of Underground Tanks."

- A. Explain the proposed locations of monitoring wells (including construction diagrams), and prepare a map to scale
- B. Describe the method of monitoring well construction and associated decontamination procedures
  1. Expected depth and diameter of monitoring wells.
  2. Date of expected drilling.
  3. Locations of soil borings and sample collection method.
  4. Casing type, diameter, screen interval, and pack and slot sizing technique.
  5. Depth and type of seal.
  6. Development method and criteria for determining adequate development.
  7. Plans for disposal of cuttings and development water.
  8. Surveying plans for wells (requirements include surveying to established benchmark to 0.01 foot).
- C. Groundwater sampling plans
  1. Water level measurement procedure.

2. Well purging procedures and disposal protocol.
3. Sample collection and analysis procedures.
4. Quality assurance plan.
5. Chain-of-custody procedures.

V. Prepare a Site Safety Plan

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY  
DEPARTMENT OF ENVIRONMENTAL HEALTH  
HAZARDOUS MATERIALS DIVISION  
80 SWAN WAY, ROOM 200  
OAKLAND, CA 94621  
PHONE NO. 415/271-4320

ACCEPTED

DEPARTMENT OF ENVIRONMENTAL HEALTH  
470 - 27th Street, Third Floor  
Oakland, CA 94612  
Telephone: (415) 271-2007

These plans have been reviewed and found to be acceptable and essentially meet the requirements of State and local health laws. Changes to your plans indicated by this Department are to secure compliance with State and local laws. The project proposed is to be reviewed for issuance of permit and construction permits for construction.

One copy of these plans must be submitted to the job and available to all enforcement and personnel involved with the construction of this project.

Any change in construction of this plan and modification must be submitted to the Department of Environmental Health Services, Department of Health Care Services, Hazardous Materials Division, 80 Swan Way, Room 200, Oakland, CA 94621, at least 48 hours prior to the following activities:

- Excavation
  - Discharge of Tank and Piping
  - Final Inspection
- Issuance of a permit to operate is dependent upon compliance with applicable State and local laws and regulations.

THERE IS A PENALTY FOR NOT OBTAINING THESE INSPECTIONS.

*A system provision that must be done. Please see 7-9-90*

*Need 3 copies*  
NOTE: line leak detectors must be in place on all pressurized piping by Dec. 22, 1990  
[Per Health & Safety Code Section 25292(e)]

~~SOME PIPING REPLACEMENT/EXTENSION OF PIPING TO NEW DISPENSERS UNDERGROUND TANK CLOSURE/MODIFICATION PLANS~~

1. Business Name BPOil Company  
Business Owner BPOil Company
2. Site Address 5425 m.l. King Blvd  
city Oakland zip 94609 Phone 415/655-080
3. Mailing Address 2868 Prospect Park Dr Ste 360  
city Rancho Cordova zip 95670 Phone 415/631-0733
4. Land Owner BPOil Company  
Address 2868 Prospect PK Dr Ste 360 City, State Rancho Cordova CA zip 95670
5. EPA I.D. No. CAL000035351
6. Contractor Paradiso Construction Company  
Address 9220 G Street  
City Oakland, CA 94603 Phone 415-562-5511  
License Type \_\_\_\_\_ ID# \_\_\_\_\_
7. Consultant Tait & Assoc.  
Address 7803 Madison Ave Ste 700  
city Citrus Hts Phone 916/916-9011

## 8. Contact Person for Investigation

Name Annette Smith/Ken Everson Title Project Manager  
 Phone 916) 946-9011

9. Total No. of Tanks at facility 4

10. Have permit applications for all tanks been submitted to this office?  
 Yes [] No []

## 11. State Registered Hazardous Waste Transporters/Facilities

## a) Product/Waste Tranporter

Name N.A. EPA I.D. No. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## b) Rinsate Transporter

Name N.A. EPA I.D. No. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## c) Tank Transporter

Name N.A. EPA I.D. No. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## d) Tank Disposal Site

Name N.A. EPA I.D. No. \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## \*e) Contaminated Soil Transporter

Name Oscar Erickson EPA I.D. No. \_\_\_\_\_  
 Address 255 Parr Blvd.  
 city Richmond State CA Zip 94801

X  
12. Sample Collector

Name Mardo Kaprealian

Company Kaprealian Engineering, Inc.

Address P.O. Box 913

City Benicia State CA Zip 94510 Phone 707-746-6915

13. Sampling Information for each tank or area

Tank or Area		Material sampled	Location & Depth
Capacity	Historic Contents (past 5 years)		
<i>Not Applicable</i>		Soil	6" Samples to be collected along sections of removed piping, beneath removed dispensers from stockpiled soil.
	NOTE: Per Alameda County Records, these tanks were installed in 1987, piping is single walled fiberglass pressure piping.		

X 14. Have tanks or pipes leaked in the past? Yes  No

If yes, describe. 1987 Product Loss Unknown Type or Amount

1986 Waste Oil-volume unknown. This information was taken

from the reports supplied to BP Oil from Mobil Oil Corporation.

15. NFPA methods used for rendering tank inert? Yes  No

If yes, describe. N/A.

An explosion proof combustible gas meter shall be used to verify tank inertness.

X 16. Laboratories

Name Sequoia Analytical Laboratories

Seaport Center

Address 680 Chesapeake Drive

City Redwood City State CA Zip 94063

State Certification No. 145



17. Chemical Methods to be used for Analyzing Samples

Contaminant Sought	EPA, DHS, or Other Sample Preparation Method Number	EPA, DHS, or Other Analysis Number
TPH Gasoline BTX and E	5030 8020 or 8240 prep method	GC-FID (DHS Method) 8020 or 8240  Detection Limits must be as follows: TPHG - 1.0 ppm (for soil) BTXE, E - 0.005 ppm (for soil)

\* 18. Submit Site Safety Plan *Injury on site where they will be taken telephonically*

X19. Workman's Compensation: Yes [X] No [ ]

Copy of Certificate enclosed? Yes [ ] No [ ]

Name of Insurer \_\_\_\_\_

20. Plot Plan submitted? Yes [X] No [ ]

21. Deposit enclosed? Yes [X] No [ ]

22. Please forward to this office the following information within 60 days after receipt of sample results.

- a) Chain of Custody Sheets
- b) Original Signed Laboratory Reports
- c) TSD to Generator copies of wastes shipped and received
- d) Attachment A summarizing laboratory results

I declare that to the best of my knowledge and belief the statements and information provided above are correct and true. I understand that information in addition to that provided above may be needed in order to obtain an approval from the Department of Environmental Health and that no work is to begin on this project until this plan is approved.

I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.

I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel and safety.

I will notify the Department of Environmental Health at least two (2) working days (48 hours) after approval of this closure plan in advance to schedule any required inspections. I understand that site and worker safety are solely the responsibility of the property owner or his agent and that this responsibility is not shared nor assumed by the County of Alameda.

Signature of Contractor

Name (please type) ANTHONY J. MILLER  
Signature *Anthony J. Miller*  
Date 7-2-90

Signature of Site Owner or Operator

Name (please type) Brian P. Duffey  
Signature *Brian P. Duffey*  
Date 9/26/90

NOTES:

1. Any changes in this document must be approved by this Department.
2. Any leaks discovered must be submitted to this office on an underground storage tank unauthorized leak/contamination site report form within 5 days of its discovery.
3. Three (3) copies of this plan must be submitted to this Department. One copy must be at the construction site at all times.
4. After approval of plan, notification of at least two (2) working days (48 hours) must be given to this Department prior to removal of tank(s).
5. A copy of your approved plan must be sent to the landowner.
6. Triple rinse means that:
  - a) Final rinse must contain less than 100 ppm of Gasoline (EPA method 8020 for soil, or EPA method 602 for water) or Diesel (EPA method 418.1). Other methods for halogenated volatile organics (EPA method 8010 for soil, EPA method 601 for water) may be required. The composition of the final rinse must be demonstrated by an original or facsimile report from a laboratory certified for the above analyses.
  - b) Tank interior is shown to be free from deposits or residues upon a visual examination of tank interior.
  - c) Tank should be labelled as "tripled rinsed; laboratory certified analysis available upon request" with the name and address of the contractor.

If all the above requirements cannot be met, the tank must be transported as a hazardous waste.

7. Any cutting into tanks requires local fire department approval.

UNDERGROUND TANK CLOSURE/MODIFICATION PLANS

ATTACHMENT A  
SAMPLING RESULTS

Tank or Area	Contaminant	Location & Depth	Results (specify units)

INSTRUCTIONS2. SITE ADDRESS

Address at which closure or modification is taking place.

5. EPA I.D. NO.

This number may be obtained from the State Department of Health Services, 916/324-1781.

6. CONTRACTOR

Prime contractor for the project.

7. OTHER

List professional consultants here.

12. SAMPLE COLLECTOR

Persons who are collecting samples.

13. SAMPLING INFORMATION

Historic contents - the principal product(s) used in the last 5 years.

Material sampled - i.e., water, oil, sludge, soil, etc.

16. LABORATORIES

Laboratories used for chemical and geotechnical analyses.

17. CHEMICAL METHODS:

All sample collection methods and analyses should conform to EPA or DHS methods.

Contaminant - Specify the chemical to be analyzed.

Sample Preparation Method Number - The means used to prepare the sample prior to analyses - i.e., digestion techniques, solvent extraction, etc. Specify number of method and reference if not an EPA or DHS method.

Analysis Method Number - The means used to analyze the sample - i.e., GC, GC-MS, AA, etc. Specify number of method and reference if not a DHS or EPA method.

NOTE:

Method Numbers are available from certified laboratories.

18. SITE SAFETY PLAN

A plan outlining protective equipment and additional specialized personnel in the event that significant amount of hazardous materials are found. The plan should consider the availability of respirators, respirator cartridges, self-contained breathing apparatus (SCBA) and industrial hygienists.

**19. ATTACH COPY OF WORKMAN'S COMPENSATION****20. PLOT PLAN**

The plan should consists of a scaled view of the facility at which the tank(s) are located and should include the following information:

- a) Scale
- b) North Arrow
- c) Property Line
- d) Location of all Structures
- e) Location of all relevant existing equipment including tanks and piping to be removed
- f) Streets
- g) Underground conduits, sewers, water lines, utilities
- h) Existing wells (drinking, monitoring, etc.)
- i) Depth to ground water
- j) All existing tanks in addition to the ones being pulled

rev. 9/88  
mam

## SITE SAFETY PLAN REQUIREMENTS

According to 29 CFR 1910.120 subparagraphs (a)(1) and (b)(8), a Site Safety Plan shall be available to employees, contractors, and subcontractors involved in:

- (1) Hazardous substance response operations under the Comprehensive Environmental Response, Compensation and Liability Act of 1980 as amended..., including initial investigations at CERCLA sites before the presence or absence of hazardous substances has been ascertained;
- (2) Major corrective actions taken in clean-up operations under the Resource Conservation and Recovery Act of 1976 as amended...;
- (3) Operations involving hazardous waste storage, disposal and treatment facilities regulated under 40 CFR Parts 264 and 265 pursuant to RCRA, except for small quantity generators and those employers with less than 90 days accumulation of hazardous wastes as defined in 40 CFR 262.34;
- (4) Hazardous waste operations sites that have been designated for clean-up by state or local governmental authorities; and
- (5) Emergency response operations for releases of or substantial threats of releases of hazardous substances and post-emergency response operations for such releases.

Per 29 CFR 1910.120 (i)(2)(i), Site Safety Plans shall address the following:

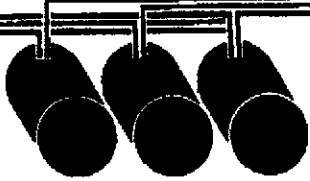
- (a) Names of key personnel; alternates responsible for site safety and health; appointment of a Site Safety and Health Officer.
- (b) A safety and health risk analysis for each site task and operation.
- (c) Employee training assignments.
- (d) Personal protective equipment to be used by employees for each of the site tasks and operations being conducted.
- (e) Medical Surveillance requirements.
- (f) Frequency and types of air monitoring, personnel monitoring, and environmental sampling techniques and instrumentations to be used. Methods of maintenance and calibration of monitoring and sampling equipment to be used.
- (g) Site control measures.
- (h) Decontamination procedures.

- (i) Site's standard operating procedures.
- (j) A contingency plan.
- (k) Confined space entry procedures.

Rev. 6/89 LMS



**PARADISO CONSTRUCTION CO.**  
GENERAL & PETROLEUM CONTRACTORS



LICENSE NO. 259820  
P.O. BOX 6397  
9220 "G" STREET OAKLAND, CA 94603  
(415) 562-5511

**FAX COVER SHEET**

PARADISO FAX NUMBER 415/638-8156

DATE: 7-11-90

NUMBER OF PAGES INCLUDING COVER SHEET: 3

TO: ALAMEDA county ATTENTION: SUSAN

FAX NUMBER: (415) 568-3706

FROM: TONY MILLER

SUBJECT: BP

MLIK JR/55  
OAKLAND

REMARKS: Insurance certificate  
for Alameda county

Please call our office if you do not receive all pages.

# ACORD CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

2/27/90

**PRODUCER**

R. C. Fischer & Co.  
1655 N. Main Street, Suite 360  
P.O. Box 8101  
Walnut Creek, Ca. 94596-8101

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW

**COMPANIES AFFORDING COVERAGE**

COMPANY LETTER A	COMCO INS CO	LEMAC
COMPANY LETTER B	AMERICAN STATES INSURANCE CO	
COMPANY LETTER C		
COMPANY LETTER D	REPUBLIC INDEMNITY COMPANY	
COMPANY LETTER E		

**CODE**

SUB-CODE

**INSURED**

Paradiso Construction Co.  
P.O. Box 6397  
Oakland CA 94603

**COVERAGES**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY POLICY OR POLICIES WHICH MAY BE APPLICABLE TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES LISTED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY OTHER POLICIES AND CLAIMS.

**INSURED'S COPY**

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS
A	GENERAL LIABILITY	GL960458	2/28/90	2/28/91	GENERAL AGGREGATE \$ 2000 PRODUCTS-COMP/OPS AGGREGATE \$ 1000 PERSONAL & ADVERTISING INJURY \$ 1000 EACH OCCURRENCE \$ 1000 FIRE DAMAGE (Any one fire) \$ 50 MEDICAL EXPENSE (Any one person) \$ 5
X	COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR.				
X	OWNER'S & CONTRACTOR'S PROT.				
B	AUTOMOBILE LIABILITY	CC3956712	2/28/90	2/28/91	COMBINED SINGLE LIMIT \$ 1000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
X	ANY AUTO				
X	ALL OWNED AUTOS				
X	SCHEDULED AUTOS				
X	HIRED AUTOS				
X	NON-OWNED AUTOS				
X	GARAGE LIABILITY				
	EXCESS LIABILITY				EACH OCCURRENCE \$ AGGREGATE \$
D	OTHER THAN UMBRELLA FORM WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY	PC994559	4/01/89	4/01/90	STATUTORY \$ 1000 (EACH ACCIDENT) \$ 1000 (DISEASE-POLICY LIMIT) \$ 1000 (DISEASE-EACH EMPLOYEE)
	OTHER				

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS**

JOB: ALL OPERATIONS OF THE NAMED INSURED

CG 20 10 11 B5 ATTACHED

**CERTIFICATE HOLDER**

COUNTY OF ALAMEDA  
GENERAL SERVICES AGENCY  
ATTN: DARLENE SMITH, DIRECTOR  
4400 MAC ARTHUR BLVD.  
OAKLAND, CA 94619

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

*Jack Lee*

©ACORD CORPORATION 1988

POLICY NUMBER: GL960458  
INSURED: PARADISO CONSTRUCTION CO.

COMMERCIAL GENERAL LIABILITY

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

# ADDITIONAL INSURED — OWNERS, LESSEES OR CONTRACTORS (FORM B)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

### SCHEDULE

Name of Person or Organization: County of Alameda, its Board of Supervisors, officers, agents & employees  
General Services Agency  
Darlene Smith, Director  
4400 MacArthur Blvd.  
Oakland, Ca 94619

JOB: All operations of the named insured  
(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule, but only with respect to liability arising out of "your work" for that insured by or for you.

Primary wording included as per policy terms and conditions

Severability of Interest (Cross Liability) wording included as per policy terms and conditions.



Mail Office:  
800 . . Eckhoff Street  
P.O. Box 4429  
Orange, California 92613  
(714) 634-4800 FAX (714) 634-0303

MESSAGE

SACRAMENTO BRANCH:  
7803 MADISON AVENUE,  
SUITE 700  
CITRUS HEIGHTS, CA 95610  
(916) 966-9011

TO Susan Hugo

DATE 7-2-90  
SUBJECT 5425 M.L. King  
BP Oil

MESSAGE

Enclosed is 3 copies of the signature sheet from the Closure Plan signed by BP Oil & Contractor & 3 copies of the Site Safety Plan. If you need any further info please call me. Please advise me when the Permit is ready to issue & I will send the contractor in.

Thank you

SIGNED

*Annotta*

Please Reply By

No Reply Necessary



TAIT & ASSOCIATES, INC.

Consulting Engineers

LETTER OF TRANSMITTAL

TO: County of Alameda  
Env. Health

DATE: June 29, 1990

S.S. NO. 11127 JOB NO. SP2325

SUBJECT: BP Oil Facility  
2425 M. L. King, Oakland

ATTN: Susan Hugo

Your prompt response will be appreciated.

We are transmitting the following:

Via:	U.S. Mail <input checked="" type="checkbox"/>	Express Mail <input type="checkbox"/>	Certified Mail <input type="checkbox"/>
	U.P.S. <input type="checkbox"/>	Messenger <input type="checkbox"/>	Other <input type="checkbox"/>
	Mylars <input type="checkbox"/>	Vellums <input type="checkbox"/>	Sepias <input type="checkbox"/>
	Bluelines <input type="checkbox"/>	Copies <input type="checkbox"/>	

Of \_\_\_\_\_ For \_\_\_\_\_

Your Checking     Your Signature     Per Your Request     Your Records

Comments:

Susan-

Please find enclosed the original and 2  
copies of the signature page for the closure  
plan for the above referenced BP site. The  
contractor can sign when he picks up the  
Permit. I will also have him prepare a  
site safety plan per your request. If you  
need additional info, please do not hesitate  
to contact me.

Sincerely,

Distribution:

TAIT & ASSOCIATES, INC.

By: Annette

Annette Smith

\* need worker's compensation & site safety plan



LETTER OF TRANSMITTAL

Consulting Engineers

TO: County of Alameda

DATE: May 31, 1990

S.S. NO. 11127 JOB NO. SP2325

SUBJECT: 5425 M.L. King  
Oakland

ATTN: Susan Higo

Your prompt response will be appreciated.

We are transmitting the following:

Via: U.S. Mail \_\_\_\_\_ Express Mail \_\_\_\_\_ Certified Mail \_\_\_\_\_  
 U.P.S. \_\_\_\_\_ Messenger  Other \_\_\_\_\_

Mylars \_\_\_\_\_ Vellums \_\_\_\_\_ Sepias \_\_\_\_\_  
 Blueines \_\_\_\_\_ Copies  originals X

Of \_\_\_\_\_ For \_\_\_\_\_

Your Checking  Your Signature  Per Your Request  Your Records

Comments:

Please find enclosed 3 copies of the underground tank closure / modification plan. Also, enclosed is the state forms "A" & "B". If you have further questions please do not hesitate to contact me. Can the contractor pick up the Permit?

Sincerely, Distribution:  
 TAIT & ASSOCIATES, INC. \_\_\_\_\_  
 \_\_\_\_\_

By: Annette Smith  
 Annette Smith



Main Office:  
800 .. Eckhoff Street  
P.O. Box 4429  
Orange, California 92613  
(714) 634-4800 FAX (714) 634-0303

**MESSAGE**

SACRAMENTO BRANCH:  
7803 MADISON AVENUE,  
SUITE 700  
CITRUS HEIGHTS, CA 95610  
(916) 966-9011

TO = Larry Seto  
Alameda County  
Env. Health

DATE 4-26-90 BPO11  
SUBJECT 5425 Martin Luther King  
3201 35th Ave

**MESSAGE**

I have been in contact with Susan Hugo Re: these two projects. So far I haven't gotten an answer as to what I need to do. Please contact me at 916)966-9011. If I am not available, please speak with Stan Iverson.

Thank-you  
Annette Smith

SIGNED

Please Reply By

No Reply Necessary

Am  
8/21

# UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input type="checkbox"/> YES <input type="checkbox"/> NO	FOR LOCAL AGENCY USE ONLY I HEREBY CERTIFY THAT I AM A DESIGNATED GOVERNMENT EMPLOYEE AND THAT I HAVE REPORTED THIS INFORMATION TO LOCAL OFFICIALS PURSUANT TO SECTION 25100.7 OF THE HEALTH AND SAFETY CODE. <i>Katherine Chesick</i> 8/21/89 SIGNED DATE
REPORT DATE 08/21/89	CASE #	

REPORTED BY	NAME OF INDIVIDUAL FILING REPORT <i>Katherine Chesick</i>	PHONE <i>(415) 271-4320</i>	SIGNATURE <i>Katherine Chesick</i>
	REPRESENTING <input checked="" type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> OTHER	COMPANY OR AGENCY NAME <i>Alameda County Haz. Mat. Div.</i>	
	ADDRESS <i>80 Swan Way Rm 200 Oakland CA 94621</i>		

RESPONSIBLE PARTY	NAME <i>Mobil Oil Corporation</i> <input type="checkbox"/> UNKNOWN	CONTACT PERSON <i>David Noe</i>	PHONE <i>(818) 953-2519</i>
	ADDRESS <i>3800 W. Alameda Ave. Ste 700 Burbank CA 91505-4331</i>		

SITE LOCATION	FACILITY NAME (IF APPLICABLE) <i>Mobil Service Station #10-LYW</i>	OPERATOR <i>(British Petroleum)</i>	PHONE <i>( )</i>
	ADDRESS <i>5425 Grove St. (Martin Luther King Jr. Way) Oakland Alameda 94609</i>		
	CROSS STREET	TYPE OF AREA <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> RURAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> OTHER	TYPE OF BUSINESS <input checked="" type="checkbox"/> RETAIL FUEL STATION <input type="checkbox"/> FARM <input type="checkbox"/> OTHER

IMPLEMENTING AGENCIES	LOCAL AGENCY <i>Alameda County Haz. Mat. Div.</i>	AGENCY NAME	CONTACT PERSON <i>Katherine Chesick</i>	PHONE <i>(415) 271-4320</i>
	REGIONAL BOARD <i>San Francisco Bay R.W.Q.C.B.</i>		<i>Lester Feldman</i>	PHONE <i>(415) 464-1255</i>

SUBSTANCES INVOLVED	(1) NAME <i>Gasoline (total volatile hydrocarbons)</i>	QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN
	(2)	<input type="checkbox"/> UNKNOWN

DISCOVERY/ABATEMENT	DATE DISCOVERED <i>10/13/87</i>	HOW DISCOVERED <input type="checkbox"/> TANK TEST <input checked="" type="checkbox"/> TANK REMOVAL <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS <input type="checkbox"/> OTHER
	DATE DISCHARGE BEGAN <input checked="" type="checkbox"/> UNKNOWN	METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input checked="" type="checkbox"/> REMOVE CONTENTS <input type="checkbox"/> REPLACE TANK <input checked="" type="checkbox"/> CLOSE TANK <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> REPAIR PIPING <input type="checkbox"/> CHANGE PROCEDURE <input type="checkbox"/> OTHER
	HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE <i>10/13/87</i>	

SOURCE/CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> TANK LEAK <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> PIPING LEAK <input type="checkbox"/> OTHER	TANKS ONLY/CAPACITY <i>3 tanks 8,000/10,000/6,000 GAL</i>	MATERIAL <input type="checkbox"/> FIBERGLASS <input checked="" type="checkbox"/> STEEL <input type="checkbox"/> OTHER	CAUSE(S) <input checked="" type="checkbox"/> OVERFILL <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> CORROSION <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> SPILL <input type="checkbox"/> OTHER
		AGE <input checked="" type="checkbox"/> UNKNOWN		

CASE TYPE	CHECK ONE ONLY <input type="checkbox"/> UNDETERMINED <input checked="" type="checkbox"/> SOIL ONLY <input type="checkbox"/> GROUNDWATER <input type="checkbox"/> DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)
-----------	--

CURRENT STATUS	CHECK ONE ONLY <input type="checkbox"/> SITE INVESTIGATION IN PROGRESS (DEFINING EXTENT OF PROBLEM) <input type="checkbox"/> CLEANUP IN PROGRESS <input type="checkbox"/> SIGNED OFF (CLEANUP COMPLETED OR UNNECESSARY) <input type="checkbox"/> NO ACTION TAKEN <input type="checkbox"/> POST CLEANUP MONITORING IN PROGRESS <input type="checkbox"/> NO FUNDS AVAILABLE TO PROCEED <input type="checkbox"/> EVALUATING CLEANUP ALTERNATIVES
----------------	--

REMEDIAL ACTION	CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS) <input type="checkbox"/> CAP SITE (CD) <input checked="" type="checkbox"/> EXCAVATE & DISPOSE (ED) <input type="checkbox"/> REMOVE FREE PRODUCT (FP) <input type="checkbox"/> ENHANCED BIO DEGRADATION (IT) <input type="checkbox"/> CONTAINMENT BARRIER (CB) <input type="checkbox"/> EXCAVATE & TREAT (ET) <input type="checkbox"/> PUMP & TREAT GROUNDWATER (GT) <input type="checkbox"/> REPLACE SUPPLY (RS) <input type="checkbox"/> TREATMENT AT HOOKUP (HU) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input checked="" type="checkbox"/> OTHER (OT) <i>soil stockpiled during tank removal</i>
-----------------	---

COMMENTS	<i>Soil samples collected 12-15 feet below ground surface contained up to 1.1 ppm total volatile hydrocarbons. Soil excavated as part of the tank removals was stockpiled + sampled. Stockpiled soil had up to 120 ppm TVH prior to aeration and disposal. (was aerated + disposed of)</i>
----------	--



## INSTRUCTIONS

### EMERGENCY

Indicate whether emergency response personnel and equipment were involved at any time. If so, a Hazardous Material Incident Report should be filed with the State Office of Emergency Services (OES) at 2800 Meadowview Road, Sacramento, CA 95832. Copies of the OES report form may be obtained at your local underground storage tank permitting agency. Indicate whether the OES report has been filed as of the date of this report.

### LOCAL AGENCY ONLY

To avoid duplicate notification pursuant to Health and Safety Code Section 25180.7, a designated government employee should sign and date the form in this block. A signature here does not mean that the leak has been determined to pose a significant threat to human health or safety, only that notification procedures have been followed if required.

### REPORTED BY

Enter your name, telephone number, and address. Indicate which party you represent and provide company or agency name.

### RESPONSIBLE PARTY

Enter name, telephone number, contact person, and address of the party responsible for the leak. The responsible party would normally be the tank owner.

### SITE LOCATION

Enter information regarding the tank facility and surrounding area. At a minimum, you must provide the facility name and full address.

### IMPLEMENTING AGENCIES

Enter names of the Local agency and Regional Water Quality Control Board involved.

### SUBSTANCES INVOLVED

Enter the name and quantity lost of the hazardous substance involved. Room is provided for information on two substances if appropriate. If more than two substances leaked, list the two of most concern for cleanup.

### DISCOVERY/ABATEMENT

Provide information regarding the discovery and abatement of the leak.

### SOURCE/CAUSE

Indicate source(s) of leak. Provide details on tank age; capacity and material if known. Check box(es) indicating cause of leak.

### CASE TYPE

Indicate the case type category for this leak. Check one box only. Case type is based on the most sensitive resource affected. For example, if both soil and ground water have been affected, case type will be "Ground Water". Indicate "Drinking Water" only if one or more municipal or domestic water wells have actually been affected. A "Ground Water" designation does not imply that the affected water cannot be, or is not, used for drinking water, but only that water wells have not yet been affected. It is understood that case type may change upon further investigation.

### CURRENT STATUS

Indicate the category which best describes the current status of the case. Check one box only. The response should be relative to the case type. For example, if case type is "Ground Water", then "Current Status" should refer to the status of the ground water investigation or cleanup, as opposed to that of soil.

IMPORTANT: THE INFORMATION PROVIDED ON THIS FORM IS INTENDED FOR GENERAL STATISTICAL PURPOSES ONLY AND IS NOT TO BE CONSTRUED AS REPRESENTING THE OFFICIAL POSITION OF ANY GOVERNMENTAL AGENCY

### REMEDIAL ACTION

Indicate which actions have been used to cleanup or remediate the leak. Descriptions of options follow:

Cap Site - install horizontal impermeable layer to reduce rainfall infiltration.

Containment Barrier - install vertical dike to block horizontal movement of contaminant.

Excavate and Dispose - remove contaminated soil and dispose in approved site.

Excavate and Treat - remove contaminated soil and treat (includes spreading or land farming).

Remove Free Product - remove floating product from water table.

Pump and Treat Groundwater - generally employed to remove dissolved contaminants.

Enhanced Biodegradation - use of any available technology to promote bacterial decomposition of contaminants.

Replace Supply - provide alternative water supply to affected parties.

Treatment at Hookup - install water treatment devices at each dwelling or other place of use.

No Action Required - incident is minor, requiring no remedial action.

COMMENTS - Use this space to elaborate on any aspects of the incident.

SIGNATURE - Sign the form in the space provided.

### DISTRIBUTION

If the form is completed by the tank owner or his agent, retain the last copy and forward the remaining copies in tact to your local tank permitting agency for distribution.

1. Original - Local Tank Permitting Agency
2. State Water Resources Control Board, Division of Water Quality, Underground Tank Program, P. O. Box 100, Sacramento, CA 95801
3. Regional Water Quality Control Board
4. County Board of Supervisors or designee to receive Proposition 65 notifications.
5. Owner/responsible party.



Consulting Engineers

Project # U568822  
Fees Paid \$375  
Date 3/30/90

March 7, 1989

ALAMEDA COUNTY ENVIRONMENTAL HEALTH  
80 Swan Way  
Oakland, CA 94621

Attn: Dennis Byrne

Re: BP Oil Facility  
5425 Martin Luther King  
Oakland, California

Dear Mr. Byrne,

BP Oil is proposing to install (4) Multiple Product Dispensers with islands and connect 2" fiber glass product piping from new dispenser locations to existing piping.

I have enclosed 3 sets of plans for the above referenced project. If you have any questions or comments, please do not hesitate to contact me at (916) 966-9011.

Sincerely,

TAIT & ASSOCIATES

  
Annette Smith

103:as



Annette Smith

7803 Madison Avenue  
Suite 700  
Citrus Heights, CA 95610  
(916) 966-9011

ALAMEDA COUNTY  
HEALTH CARE SERVICES

AGENCY  
DAVID J. KEARS, Director



Department of Environmental Health  
Hazardous Materials Division  
80 Swan Way, Room 200  
Oakland, CA 94621

Telephone Number: (415) 271-4320

Certified Mailer: P 833 981 121

10 August 1988

Mr. R. J. Edwards  
Mobil Oil Corporation  
3800 W. Alameda Avenue, Ste. 700  
Burbank, California 91505-4331

Subject: Mobil Service Station 5425 Grove Street, Oakland, CA 94609

Dear Mr. Edwards:

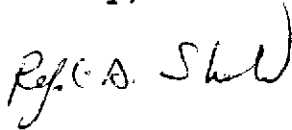
We have received and reviewed your consultant's report of the removal of three underground storage tanks at the Mobil Service Station 10-LVW located at 5425 Grove Street in Oakland. To continue our review, we require the following information be submitted to our office within 30 days:

- 1) Tank history (for each tank) - include the tank age, results of any tank or piping precision tests performed, a complete list of historic tank contents, and information on any past tank or piping leaks;
- 2) Name, address and EPA ID number of the tank hauler and, if applicable, of the tank contents transporter;
- ✓ 3) TSD to generator manifest copies for each tank and for any tank contents transported;
- 4) Description of the soils sampled and encountered in the excavation;
- 5) Depth to groundwater at the site (was any groundwater encountered in the excavation?);
- 6) Depth of native soil/backfill interface (were samples collected at this interface or several feet below it?); and
- 7) Number and type of underground storage tanks currently installed at this facility.

Page 2 of 2  
Mobil Service Station  
5425 Grove Street, Oakland

Please contact Katherine Chesick, Hazardous Materials Specialist,  
at 271-4320, if you have any questions.

Sincerely,



Rafat A. Shahid, Chief,  
Hazardous Materials Division

RAS:kac

cc: Lisa McCann/Greg Zentner, Regional Water Quality Control Board,  
San Francisco Bay Region  
Gil Jensen, Alameda County District Attorney, Consumer and  
Environmental Protection Agency  
Katherine Chesick, Hazardous Materials Specialist  
Files

P 833 981 121

RECEIPT FOR CERTIFIED MAIL

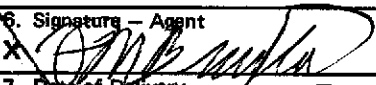
NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL  
(See Reverse)

PS Form 3800, June 1985

Sent to Mr. R. J. Edwards Mobil Oil Corp.	
Street and No.	
P.O., State and ZIP Code	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.  
Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1.  Show to whom delivered, date, and addressee's address.  Restricted Delivery  
†(Extra charge)† †(Extra charge)†

3. Article Addressed to: Mr. R. J. Edwards Mobil Oil Corp. 3800 W. Alameda Ave. Ste. 760 Burbank, CA 91505-4331	4. Article Number P 833 981 121
RE: Mobil 5425 Grove St. 94609	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail
5. Signature - Addressee X	Always obtain signature of addressee or agent and <b>DATE DELIVERED.</b>
6. Signature - Agent X 	8. Addressee's Address (ONLY if requested and fee paid)
7. Date of Delivery 8-15-88	

ALAMEDA COUNTY  
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



DEPARTMENT OF ENVIRONMENTAL HEALTH  
470 - 27th Street, Third Floor  
Oakland, California 94612  
(415) 271-4320

Certified Mailer #P 759 896 724

May 2, 1988

Mobil Oil Corporation  
3800 W. Alameda Ave., Ste. 700  
Burbank, CA 91505-4331  
Attn: Mr. R. J. Edwards

SUBJECT: MOBIL SERVICE STATION, 5425 GROVE ST., OAKLAND 94609

\*\*\*\*\* FINAL NOTICE OF VIOLATION \*\*\*\*\*

Dear Mr. Edwards:

This is the Final Notice. Failure to reasonably comply with the request within thirty (30) days of the date of this letter will result in a formal referral to the District Attorney.

We are in receipt of your letter to Ariel Bryant of the City of Oakland Fire Department concerning underground tank removal at subject site dated January 4, 1988. Our Agency, not the City of Oakland is responsible for enforcing Underground Tank regulations.

In order to complete the review of this site, a deposit of \$600.00 must be submitted to this office. After receipt of the deposit, review activities will commence. Until reviewed, this case is not closed.

Should you have any questions concerning this matter, please contact Storm Goranson, Hazardous Materials Specialist at 271-4320.

Sincerely,

Rafat A. Shahid, Chief  
Hazardous Materials Division

RAS:SG:mam

cc: Greg Zentner, RWQCB

P 755 896 724

**RECEIPT FOR CERTIFIED MAIL**

NO INSURANCE COVERAGE PROVIDED

NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to		Mobil Oil Corp.
Street and No.		3800 W. Alameda, Ste. 700
P.O., State and ZIP Code		Burbank 91505-4331
Postage		\$
Certified Fee		
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt showing to whom and Date Delivered		
Return Receipt showing to whom, Date, and Address of Delivery		
TOTAL Postage and Fees		\$
Postmark or Date		

PS Form 3800, June 1985

# Mobil Oil Corporation

3800 WEST ALAMEDA AVENUE, SUITE 700  
BURBANK, CALIFORNIA 91505-4331

June 2, 1988

Rafat A. Shahid  
Alameda County  
Health Care Services  
470 - 27th St., 3rd Floor  
Oakland, CA 94612

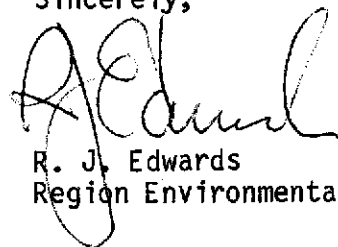
RE: SERVICE STATION 10-LVW  
5425 GROVE STREET  
OAKLAND, CALIFORNIA

Dear Mr. Shahid:

Attached is a deposit check for \$600 in order to complete the review of the above site. A copy of the consultant's report is also attached.

Should you have any questions, please contact me at (818) 953-2517.

Sincerely,



R. J. Edwards  
Region Environmental Manager

JMK:ram  
Attachments  
(0612E)

c.c.: Greg Zetner  
Regional Water Quality  
Control Board  
1111 Jackson St., Room 6040  
Oakland, California 94607

Project # 4505694  
Fee Paid \$600.00  
Date 6/7/88



ALAMEDA COUNTY  
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



DEPARTMENT OF ENVIRONMENTAL HEALTH  
470 - 27th Street, Third Floor  
Oakland, California 94612  
(415) 271-4320

Certified Mailer #P 759 896 724

May 20, 1988

Mobil Oil Corporation  
3800 W. Alameda Ave., Ste. 700  
Burbank, CA 91505-4331  
Attn: Mr. R. J. Edwards

SUBJECT: MOBIL SERVICE STATION, 5425 GROVE ST., OAKLAND 94609

\*\*\*\*\* FINAL NOTICE OF VIOLATION \*\*\*\*\*

Dear Mr. Edwards:

This is the Final Notice. Failure to reasonably comply with the request within thirty (30) days of the date of this letter will result in a formal referral to the District Attorney.

We are in receipt of your letter to Ariel Bryant of the City of Oakland Fire Department concerning underground tank removal at subject site dated January 4, 1988. Our Agency, not the City of Oakland, is responsible for enforcing Underground Tank regulations.

In order to complete the review of this site, a deposit of \$600.00 must be submitted to this office. After receipt of the deposit, review activities will commence. Until reviewed, this case is not closed.

Should you have any questions concerning this matter, please contact Storm Goranson, Hazardous Materials Specialist at 271-4320.

Sincerely,

*Rafat A. Shahid*  
Rafat A. Shahid, Chief  
Hazardous Materials Division

RAS:SG:mam

cc: Greg Zentner, RWQCB

ALAMEDA COUNTY  
HEALTH CARE SERVICES

DAVID J. KEARS, AGENCY  
DIRECTOR  
XXXXXXXXXXXXXXXXXXXX



470-27th Street, Third Floor  
Oakland, California 94612  
(415) 874-7237

January 28, 1988

Mobil Oil Corporation  
3800 West Alameda Ave., Ste. 700  
Burbank, CA 91505-4331  
Attn: Mr. R J Edwards

RE: Service Station #10-LVN at 5425 Grove St., Oakland CA

Dear Mr. Edwards:

We are in receipt of your letter to Ariel Bryant of the City of Oakland Fire Department concerning underground tank removal at subject site dated January 4, 1988. Our Agency, not the City of Oakland is responsible for enforcing Underground Tank regulations.

In order to complete the review of this site, a deposit of \$600.00 must be submitted to this office. After receipt of the deposit, review activities will commence.

If you have any questions concerning this matter, please contact Storm Goranson, Hazardous Materials Specialist at 874-7237.

Sincerely,

Rafat A. Shahid, Chief  
Hazardous Materials Division

RAS:SG:mam

cc: File

# Mobil Oil Corporation

3800 WEST ALAMEDA AVENUE, SUITE 700  
BURBANK, CALIFORNIA 91505-4331

February 25, 1987

RECEIVED  
MAR 2 1987

ENVIRONMENTAL HEALTH  
ADMINISTRATION

3/2  
Feb  
UG/TANKS

Mr. T. M. Gerow  
Division of Environmental Health  
Alameda County  
470 27th Street, Room 324  
Oakland, California 94612

**Mobil Oil Corporation**  
**645 410 - 144**  
**3800 - 3806 STREET**  
**OAKLAND, CALIFORNIA**

Dear Mr. Gerow:

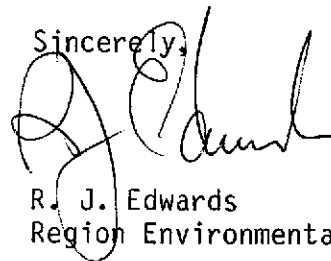
The following report is submitted to your office as required under California State law for underground storage tanks.

As part of Mobil Oil's tank testing program, the above location had all product systems tested on February 11, 1987. A failure occurred in the Super Unleaded system. Further investigation revealed the source as the product line. The tank has been isolated to prevent further usage. An audit is being completed on the operator's records.

Our Engineering Department will be contacting your office shortly for required permits to complete repairs/replacement of the product systems. Further investigation will be completed at that time.

If you have any questions, please call my office at (818) 953-2519 or 2517.

Sincerely,



R. J. Edwards  
Region Environmental Manager

CEG:ars  
enclosure  
83920

# UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK)/CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		STATE TANK ID # <u>NA</u>	
REPORT DATE <u>02/23/87</u>		LOCAL CASE #		REGIONAL BOARD CASE #	
US EPA ID #		NAME OF INDIVIDUAL FILING REPORT <u>G. G. ALLOWAY</u>		PHONE <u>(818) 953-2519</u>	
SIGNATURE <i>G. G. Alloway</i>		REPRESENTING <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD		COMPANY OR AGENCY NAME <u>MOBIL OIL CORPORATION</u>	
ADDRESS <u>3800 W. ALAMEDA</u>		<u>SUITE 700</u>		<u>BURBANK CA 91505-4331</u>	
NAME <u>MOBIL OIL CORPORATION</u>		CONTACT PERSON <u>R. J. EDWARDS</u>		PHONE <u>(818) 953-2517</u>	
ADDRESS <u>3800 W. ALAMEDA</u>		<u>BURBANK</u>		<u>CA 91505-4331</u>	
FACILITY NAME (IF APPLICABLE) <u>MOBIL SERVICE STATION #10-LVW</u>		OPERATOR <u>G. Y. PARK</u>		PHONE <u>(415) 655-0803</u>	
ADDRESS <u>5425 GROVE STREET</u>		<u>OAKLAND</u>		<u>ALAMEDA 94609</u>	
CROSS STREET <u>55TH</u>		TYPE OF AREA <input type="checkbox"/> RESIDENTIAL <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> RURAL <input type="checkbox"/> OTHER		TYPE OF BUSINESS <input type="checkbox"/> UNKNOWN <input checked="" type="checkbox"/> RETAIL FUEL STATION <input type="checkbox"/> OTHER	
LOCAL AGENCY <u>ALAMEDA COUNTY HEALTH</u>		AGENCY NAME		CONTACT PERSON <u>MR. T. M. GERLOW</u>	
REGIONAL BOARD <u>BAY AREA BOARD</u>		TSCD		PHONE <u>(415) 874-6434</u>	
TSCD				PHONE <u>(415) 464-0838</u>	
SUBSTANCES INVOLVED (1) <u>SUPER UNLEADED</u>		CAS # (ATTACH EXTRA SHEET IF NEEDED)		NAME	
QUANTITY LOST (GALLONS) <u>UNKNOWN</u>					
SUBSTANCES INVOLVED (2)					
DATE DISCOVERED <u>02/11/87</u>		HOW DISCOVERED <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> ROUTINE MONITORING <input type="checkbox"/> TANK REMOVAL <input type="checkbox"/> NUISANCE CONDITIONS <input checked="" type="checkbox"/> OTHER: <u>SYSTEM TEST</u>			
DATE DISCHARGE BEGAN <u>UNKNOWN</u>		METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input type="checkbox"/> REMOVE CONTENTS <input type="checkbox"/> REPLACE TANK <input type="checkbox"/> CLOSE TANK <input type="checkbox"/> REPAIR TANK <input checked="" type="checkbox"/> REPAIR PIPING <input type="checkbox"/> CHANGE PROCEDURES <input checked="" type="checkbox"/> OTHER			
HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE <u>02/11/87</u>					
SOURCE(S) OF DISCHARGE <input type="checkbox"/> TANK LEAK <input type="checkbox"/> UNKNOWN <input checked="" type="checkbox"/> PIPING LEAK <input type="checkbox"/> OTHER (SPECIFY)		TANKS ONLY/CAPACITY AGE <u>NA</u> YRS. <input type="checkbox"/> UNKNOWN MATERIAL <input type="checkbox"/> STEEL <input type="checkbox"/> FIBERGLASS <input checked="" type="checkbox"/> OTHER <u>NA</u>		CAUSE(S) <input type="checkbox"/> OVERFILL <input type="checkbox"/> CORROSION <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> SPILL <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> OTHER	
RESOURCES AFFECTED/AT RISK		YES NO THREATENED UNKNOWN		WATER SUPPLIES AFFECTED YES NO THREATENED UNKNOWN # OF WELLS	
AIR (VAPOR)		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> THREATENED <input type="checkbox"/> UNKNOWN		PUBLIC DRINKING WATER <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> THREATENED <input checked="" type="checkbox"/> UNKNOWN <u>---</u>	
SOIL (VADOSE ZONE)		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> THREATENED <input checked="" type="checkbox"/> UNKNOWN		PRIVATE DRINKING WATER <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> THREATENED <input checked="" type="checkbox"/> UNKNOWN <u>---</u>	
GROUNDWATER		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> THREATENED <input checked="" type="checkbox"/> UNKNOWN		INDUSTRIAL WATER <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> THREATENED <input checked="" type="checkbox"/> UNKNOWN <u>---</u>	
SURFACE WATER OR STORM DRAIN		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> THREATENED <input checked="" type="checkbox"/> UNKNOWN		AGRICULTURAL <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> THREATENED <input checked="" type="checkbox"/> UNKNOWN <u>---</u>	
BUILDING OR UTILITY VAULT		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> THREATENED <input checked="" type="checkbox"/> UNKNOWN		OTHER (SPECIFY) <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> THREATENED <input type="checkbox"/> UNKNOWN <u>---</u>	
OTHER (SPECIFY)		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> THREATENED <input type="checkbox"/> UNKNOWN			
GROUNDWATER BASIN NAME		<input checked="" type="checkbox"/> UNKNOWN			
COMMENTS:					
COMPLETE AND ATTACH A CLEANUP TRACKING REPORT IF ANY CLEANUP WORK OR PLANNING HAS STARTED					

INSTRUCTIONS

-2-

1. GENERAL

In box titled "EMERGENCY", indicate whether emergency response personnel and equipment were involved at any time. If so, a Hazardous Material Incident Report should be filed with the State Office of Emergency Services (OES) at 2800 Meadowview Road, Sacramento, CA 95832. Copies of the OES report form may be obtained at your local underground tank permitting agency. Indicate whether the OES report has been filed as of the date of this report.

In space provided, enter state tank ID number if known. State ID numbers have been assigned to all tanks that are on file with the State Water Resources Control Board. Enter today's date in the box titled "Report Date". Enter local and Regional Water Quality Control Board case numbers if known. Enter the US EPA facility number if applicable.

2. REPORTED BY

Enter your name, telephone number and address. Indicate which party you represent, and provide company or agency name.

3. RESPONSIBLE PARTY

Enter the name, telephone number, contact person, and address of the party responsible for the leak, or mark unknown. For tank leaks, the responsible party would normally be the tank owner.

4. SITE LOCATION

Enter information regarding the tank facility and surrounding area. If a known tank or facility is not involved, enter general location of the contamination site as best possible; i.e., street, city, county, zip, cross street, and type of area.

5. IMPLEMENTING AGENCIES

Enter names of the local agency, Regional Board and/or Toxic Substances Control Division (TSCD) regional office involved and a contact person and telephone number for each.

6. SUBSTANCES INVOLVED

Enter the CAS number(s) (if known), name(s), and quantities lost of all hazardous substances involved. Attach an extra sheet if more than two substances are involved. Be as specific as possible.

7. DISCOVERY/ABATEMENT

Provide information regarding the discovery and abatement of the discharge. More than one box may be checked in the sections titled "How Discovered" and "Method Used To Stop Discharge" if appropriate.

B. SOURCE/CAUSE

Indicate source(s) of discharge. Provide details on tank age; capacity and material if a tank is involved. Check box(es) indicating cause of discharge. More than one box may be checked if appropriate.

9. RESOURCES AFFECTED/AT RISK

In section titled "RESOURCES AFFECTED" indicate whether any of the resources listed have been affected ("YES"), will not be affected ("NO"), or may be affected ("THREATENED") by the release. Check "UNKNOWN" if unsure of the status of a resource. Specify any unlisted resources which are, or may be, involved under "OTHER". The same instructions apply to the section titled "WATER SUPPLIES AFFECTED." Give the number of water wells affected or threatened, if known. Provide the name of the ground-water basin underlying the site, if known, in the space provided.

10. COMMENTS

Use this space to elaborate on any aspects of the incident. Comments on cleanup work or planning or related investigations should be reported on a separate Cleanup Tracking Report.

11. SIGNATURE

Sign the form in the space provided.

DISTRIBUTION

Hand deliver or mail copies of the form as follows:

- |  |  |
|--|--|
| 1) Original - Local Agency   | 3) Regional Water Quality Control Board  |
| 2) State Water Resources Control Board<br>Division of Water Quality<br>Underground Tank Program<br>P. O. Box 100<br>Sacramento, CA 95801 | 4) Toxic Substances Control Division<br>Underground Tank Program<br>714/744 P Street<br>Sacramento, CA 95814 |
|  | 5) Owner/responsible party   |

# Mobil Oil Corporation

June 11, 1986

612 SOUTH FLOWER STREET  
P.O. BOX 2122  
LOS ANGELES, CALIFORNIA 90051

*300  
Bill UG TANKS*

Mr. Dale C. Bowyer  
California Regional Water  
Quality Control Board  
1111 Jackson St., Room 6040  
Oakland, California 94607

RE: MOBIL OIL CORPORATION  
SERVICE STATION 10-LVW  
5425 GROVE STREET  
OAKLAND, CALIFORNIA

Dear Mr. Bowyer:

Please find enclosed, our consultant's report on the sampling completed during the removal of the waste oil tank at the above location. As discussed in the report, the total hydrocarbon levels were below the detection limit of 1 ppm.

Due to the results obtained on the sample and the fact that no groundwater was encountered, we believe no contamination exists at this location. Unless notified by your office, Mobil will consider this incident closed.

If you have any questions or would care to discuss, please call my office at (213) 683-5520 or 6335.

Sincerely,

*R. J. Edwards*  
R. J. Edwards  
Region Environmental Manager

CEG:ram  
Enclosure  
(64240)

c.c.: ~~██████████~~  
Alameda County  
Div. of Environmental Health  
470 - 27th Street, Room 324  
Oakland, California 94612

**RECEIVED**  
JUN 16 1986  
ENVIRONMENTAL HEALTH  
ADMINISTRATION