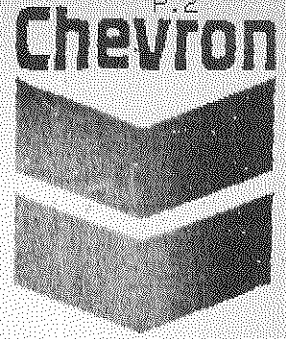


FACSIMILE COVER SHEET



CUSA MARKETING

WEST CENTRAL REGION
SR-2410 CAMINO RAMON

MAIL ADDRESS: CHEVRON U.S.A. INC.

P.O. Box 5004
San Ramon, Ca. 94583-0904
(Street: 2410 CAMINO RAMON)

DATE:

4/28/89

TO: Name of Person, Company, Address, Facsimile Number (If Available)

Gil Wistar
Alameda Co. Dept of environmental Health
Hazardous Materials Div.

FAX NUMBER 568-3706

FROM:

Bob Foss

PHONE NO.

RM. NO./BLDG.

842-4594

SUBJECT:

workplan for 9-2582

REMARKS:

NUMBER OF PAGES INCLUDING COVER SHEET 7

If transmission is interrupted or received incomplete, please contact our Facsimile

Reply by Facsimile - Dial

(415) 842-9591

Operation (415) 842-9530

OPERATOR

TIME

CONFIRMED BY:

TIME

DATE:

Groundwater Remediation

- 1) Determine if wells onsite are sufficient to determine the extent of hydrocarbons;
- 2) Install blank casing(s) in new tankpit to allow future drilling;
- 3) Perform additional investigation as necessary;
- 4) Perform 1 complete round of groundwater sampling to determine whether monitoring or remediation are necessary;
- 5) If monitoring is required then perform quarterly for 1 year and review and reassess the site at the end of that time;
- 6) If remediation is required then review all field and laboratory data;
- 7) Determine if wells are capable for use as extraction wells to remove dissolved hydrocarbons from the groundwater;
- 8) Install extraction well(s) if existing wells cannot handle load;
- 9) Design recovery system to remove groundwater from subsurface and to remove dissolved hydrocarbons from extracted groundwater (the system will also deal with free-product if any is encountered);
- 10) Determine the discharge alternatives available for the treated groundwater (Either re-injection or direct discharge to stormwater or sanitary sewer systems are likely);
- 11) Choose the best discharge alternative (if re-injection must show hydraulic control, if discharge to sewer systems need NPDES permit for Stormwater system or POTW permit for sanitary system);
- 12) Obtain permits to operate recovery system and begin operation, and
- 13) Operate and monitor system as specified in permits and prepare reports as required.

1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2

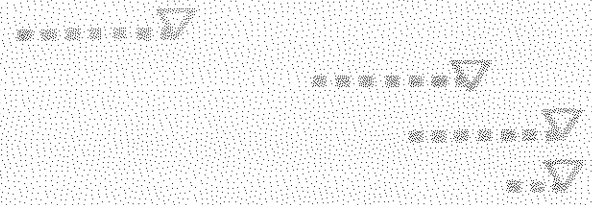
Soil Remediation in Pump Island Area

Soil boring/soil sampling analysis

Excavation if > 100ppm

Disposal at appropriate landfill

Back fill of excavation



EXPLANATION

***** Work to be Done

▽ Milestone to be Reached

Remediation Timeline
April 28, 1989

Chevron SS 892582
Dublin, California

CHAR

1

9, 7, 7, 7, 7, 7, 7, 7, 7, 7,

Groundwater Remediation

Determine if wells define U line	▽	(When tanks installed)
Install blank casing in tank pit		(After tanks installed)
Perform additional investigation		(One week after new wells installed)
1 Round Groundwater Sampling		(Every 3 months after 1st sampling)
Inventory monitoring (if required)		(Assess 1 week after groundwater sampling)
Remediation (if required)		(2 weeks after remediation assessment)
Install recovery wells (if needed)		(30-45 days after extraction well tests)
Design recovery system		(2 weeks after extraction well tests)
Discharge alternative assessment		(60 days after extraction well tests)
Apply for permit		(For 1 to 2 years then reassess)
Operate system/reporting		

EXPLANATION

- * * * * * Work to be Done
- ▽ Milestone to be Reached

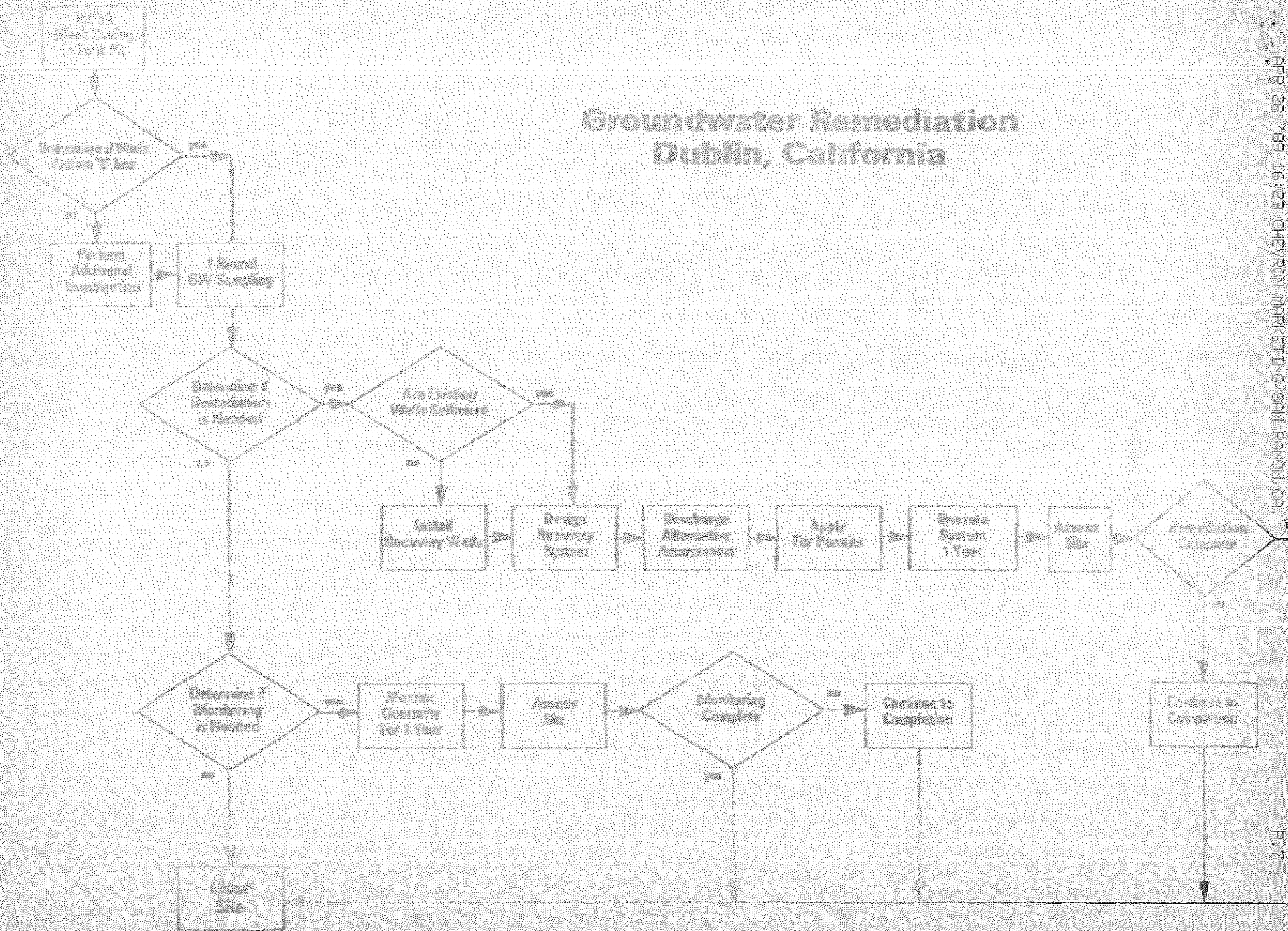
Remediation Timeline
April 28, 1989

Chevron 25-192582
Dublin, California

CHARI

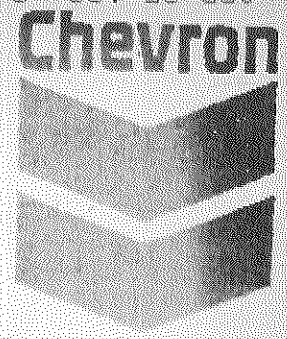
1
2

Groundwater Remediation Dublin, California



FACSIMILE COVER SHEET

APR 25 09 00



CUSA MARKETING
WEST CENTRAL REGION
SR-2410 CAMINO RAMON

MAIL ADDRESS: CHEVRON U.S.A. INC.

P.O. Box 5004
San Ramon, Ca. 94583-0804
(Street: 2410 CAMINO RAMON)

DATE: 4/24/99

TO: Name of Person, Company, Address, Facsimile Number (if Available)

Gil Wistar
Alameda County Health Dept.
Hazardous Materials Division

FAX NUMBER (415) 568-5706

FROM:

Bob Foss

PHONE NO.

842-9594

RX. NO./BLDG.

SUBJECT:

SS# 9-2582 Dublin
Soil Sampling analytical results (fuel island area)

REMARKS:

NUMBER OF PAGES INCLUDING COVER SHEET 11

If transmission is interrupted or received incomplete, please contact our Facsimile

Reply by Facsimile - Dial
(415) 842-9591

Operator: (415) 842-9530

OPERATOR: Sue C TIME: 7:40 DATE: 4-25-99

CONTINUED BY: TIME: DATE: