

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



State Water Resources Control Board
Division of Clean Water Programs
UST Local Oversight Program

December 2, 1991
STID# 3565

DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Program
80 Swan Way, Rm. 200
Oakland, CA 94612-4320
(415)

Chevron U.S.A. Inc.
ATTN: Nancy Vukelich
2410 Camino Ramon
San Ramon, CA 94583-0804

Responsible Party
Tank Operator

Former Chevron #9-1153
3126 Fernside Blvd.
Alameda CA, 94501

SITE

Date First Reported 09/15/86
Substance: gasoline
Petroleum (X) Yes

Dear Ms. Vukelich:

This office has reviewed soil vapor reports of June, 1989, the work plan of April 1990, and the Quarterly Ground Water Sampling reports of May, 1990, July 1990, and October 1991. The following are comments concerning your proposed remediation of the above site:

1. Well C-2 was apparently destroyed during construction of the residence. According to the isoconcentration contours for benzene which were done by EA Engineering, Science and Technology at least two additional wells should be installed in the down gradient direction. The vertical and lateral extent of contamination is not adequately defined in that area in question. These additional wells will be located off site if necessary.

2. Although the installation of a recovery trench may have merit for the on-site contamination, it would not be effective for off-site contamination, which, to date, has not been adequately defined. The one additional proposed well would assist in providing information which is absent due to the destruction of well C-2. However, it is not located in the down gradient direction of the currently defined plume.

3. The current work plan was formulated over a year and 8 months ago. As mentioned, it does not consider vital characteristics of the extent of contamination. Therefore, further investigation should be done prior to formulation of a new work plan. **This office expects a new plan for adequately defining the lateral and vertical extent of contamination within 30 days.** This should be shortly followed by a schedule and a timetable for developing and implementing a site investigation plan and a remediation plan to clean up the contaminated soil and groundwater.

4. The last Ground Water Sampling Report shows benzene to be present at a level of 10,000 ppb. This is several orders of magnitude above any level that may be considered acceptable. Although it was reported that only well C-1 contained benzene, it must be noted that well C-1 is near the down gradient edge of the site and there are no other wells down gradient to determine

Former Chevron Station #9-1153

December 2, 1991

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where the rest of the benzene is. This well sample is only a small indicator of what still may remain from the former Chevron Service Station #9-1153. Further investigation is required.

If you have any questions concerning this matter please contact this office at 271-4320.

Sincerely,

Thomas F. Peacock, Supervising HMS
Hazardous Material Division

cc: Mark Thompson, Alameda County District Attorney's Office
J.L. & Jane L. Bolton

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P 367 604 586

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse) 3565

U.S.G.P.O. 1989-234-555

Sent to J & J Bolton	
Street and No. 3135 Gibbons Dr	
P.O., State and ZIP Code Alameda, CA 94501	
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	\$ 2.29
Postmark or Date JAN 22, 1991 430-4530	

PS Form 3800, June 1985

P 367 604 587

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse) 3565

U.S.G.P.O. 1989-234-555

Sent to Chevron USA Inc	
Street and No. 2410 Camion Ramon	
P.O., State and ZIP Code San Ramon, CA 94583-0804	
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

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



State Water Resources Control Board
Division of Clean Water Programs
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certified mailer #P 367 604 586

November 20, 1991
STID# 3565

DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Program
80 Swan Way, Rm. 200
Oakland, CA 94621
(415) XXX(510) 271-4320

Notice of Requirement to Reimburse

J.L. & Jane L. Bolton
3135 Gibbons Dr.
Alameda, CA 94501

Responsible Party
Contact Person
Property Owner

Chevron U.S.A. Inc.
ATTN: Nancy Vukelich
2410 Camino Ramon
San Ramon, CA 94583-0804

Responsible Party
Tank Operator

Former Chevron #9-1153
3126 Fernside Blvd.
Alameda CA, 94501

SITE

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The federal Petroleum Leaking Underground Storage Tank Trust Fund (Federal Trust Fund) provides funding to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The legislature has authorized funds to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The direct and indirect costs of overseeing removal or remedial action at the above site are funded, in whole or in part, from the Federal Trust Fund. The above individual(s) or entity(ies) have been identified as the party or parties responsible for investigation and cleanup of the above site. **YOU ARE HEREBY NOTIFIED** that pursuant to Title 42 of the United States Code, Section 6991b(h)(6) and Sections 25297.1 and 25360 of the California Health and Safety Code, the above Responsible Party or Parties must reimburse the State Water Resources Control Board not more than 150 percent of the total amount of site specific oversight costs actually incurred while overseeing the cleanup of the above underground storage tank site, and the above Responsible Party or Parties must make full payment of such costs within 30 days of receipt of a detailed invoice from the State Water Resources Control Board.

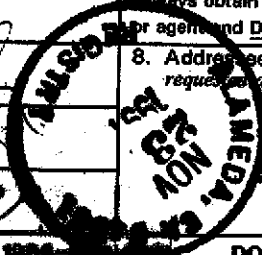
If you have any questions concerning this matter please contact Thomas Peacock, Supervising Hazardous Material Specialist, at this office.

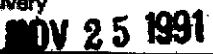
Edgar B. Howell, III, Chief
Contract Project Director

Notice of Requirement to Reimburse
 Former Chevron Station # 9-1153
 November 20, 1991
 Page 2 of 2

cc: Sandra Malos, SWRCB

SWRCB Use : add: X Reason: New case

Items 1 and 2 when additional services are desired and complete	
"RETURN TO" Space on the reverse side. Failure to return receipt fee will provide you the following services as requested, and addressee's address.	
1. <input type="checkbox"/> Registered Delivery (Extra charge) 2. <input type="checkbox"/> Return Receipt for Merchandise	3. Article Addressed to: JL & Jane Bolton 3135 Gibbons DR Alameda, CA 94501
4. Article Number 3565 P367604586	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
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Address X <i>Jane Bolton</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X <i>[Signature]</i>	
7. Date of Delivery 11/23/91	
PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT	

Items 1 and 2 when additional services are desired and complete	
"RETURN TO" Space on the reverse side. Failure to return receipt fee will provide you the following services as requested, and addressee's address.	
1. <input type="checkbox"/> Registered Delivery (extra charge) 2. <input type="checkbox"/> Return Receipt for Merchandise	3. Article Addressed to: Chevron USA Inc attn: Nancy Vukelich 2410 Camion Ramon San Ramon, CA 94583-0804
4. Article Number 3565 P367604587	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
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Address X <i>[Signature]</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X <i>[Signature]</i>	
7. Date of Delivery NOV 25 1991	
PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT	