

431 West Hatch Road
Modesto, California 95350
(209) 524-9653
FAX (209) 524-0503

80 NOV -7 AM 10:51

1741 Leslie Street
San Mateo, California 94402
(415) 572-8033
FAX (415) 572-9734

SEMCO
James C. Bateman Petroleum Services Inc.
General Engineering and Environmental Contractor
License NO. 449864 A, B, C-61, D-40
(800) 533-9293

Date: November 2, 1990

To: Pires Market
20008 Meekland Ave
Hayward, CA 94541

REGARDING:

Job Name: Same as Above

Job Location: _____

WE ARE SENDING YOU THE FOLLOWING ITEMS:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Laboratory Analysis | <input checked="" type="checkbox"/> Chain of Custody |
| <input checked="" type="checkbox"/> Hazardous Waste Manifest | <input type="checkbox"/> Tank Disposition Record |

Remarks: _____

Copy: Alameda County

Signed: *Melissa Hamelt*

SUPERIOR ANALYTICAL LABORATORY, INC.

1555 BURKE, UNIT I • SAN FRANCISCO, CA 94124 • PHONE (415) 647-2081

C E R T I F I C A T E O F A N A L Y S I S

LABORATORY NO.: 52632
CLIENT: SEMCO
CLIENT JOB NO.: DON FONG

DATE RECEIVED: 10/17/90
DATE REPORTED: 10/24/90

ANALYSIS FOR BENZENE, TOLUENE, ETHYL BENZENE & XYLENES
by EPA SW-846 Methods 5030 and 8020

LAB #	Sample Identification	Concentration(ug/kg)			
		Benzene	Toluene	Ethyl Benzene	Xylenes
1	#1-300	ND<3	ND<3	ND<3	3
3	#3-5KG	ND<3	ND<3	ND<3	4
4	#4-5KG	5	ND<3	ND<3	ND<3
5	#5-8KG	ND<3	5	ND<3	6
6	#6-8KG	4	5	ND<3	6

ug/kg - parts per billion (ppb)

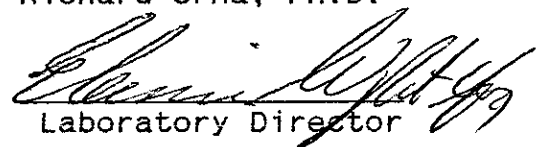
Minimum Detection Limit in Soil: 3.0ug/kg

QAQC Summary:

Daily Standard run at 20ug/L: RPD = <15%

MS/MSD Average Recovery = 104% : Duplicate RPD = <9%

Richard Srna, Ph.D.


Laboratory Director

OUTSTANDING QUALITY AND SERVICE

SUPERIOR ANALYTICAL LABORATORY, INC.

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C E R T I F I C A T E O F A N A L Y S I S

LABORATORY NO.: 52632
CLIENT: SEMCO
CLIENT JOB NO.: DON FONG

DATE RECEIVED: 10/17/90
DATE REPORTED: 10/24/90

ANALYSIS FOR TOTAL PETROLEUM HYDROCARBONS
by Modified EPA SW-846 Method 5030 and 8015

LAB #	Sample Identification	Concentration (mg/kg) Gasoline Range
1	#1-300	ND<1
3	#3-5KG	ND<1
4	#4-5KG	ND<1
5	#5-8KG	ND<1
6	#6-8KG	ND<1

mg/kg - parts per million (ppm)

Minimum Detection Limit for Gasoline in Soil: 1mg/kg

QAQC Summary:

Daily Standard run at 2mg/L: RPD Gasoline = <15%
MS/MSD Average Recovery = 94%: Duplicate RPD = 9%

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CERTIFICATE OF ANALYSIS

LABORATORY NO.: 52632
CLIENT: SEMCO
CLIENT JOB NO.: DON FONG

DATE RECEIVED: 10/17/90
DATE REPORTED: 10/24/90

ANALYSIS FOR TOTAL PETROLEUM HYDROCARBONS
by Modified EPA SW-846 Method 8015

LAB #	Sample Identification	Concentration (mg/kg) Diesel Range
1	#1-300	ND<10

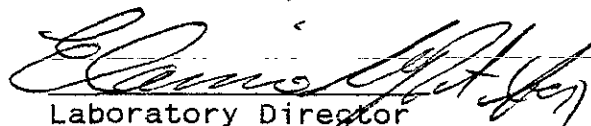
mg/kg - parts per million (ppm)

Minimum Detection Limit for Diesel in Soil: 10mg/kg

QAQC Summary:

Daily Standard run at 200mg/L: RPD Diesel = <15%
MS/MSD Average Recovery = 127%: Duplicate RPD = 2%

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C E R T I F I C A T E O F A N A L Y S I S

LABORATORY NO.: 52632
CLIENT: SEMCO
CLIENT JOB NO.: DON FONG

DATE RECEIVED: 10/17/90
DATE REPORTED: 10/24/90

ANALYSIS FOR TOTAL PETROLEUM OIL AND GREASE by EPA Method 503E

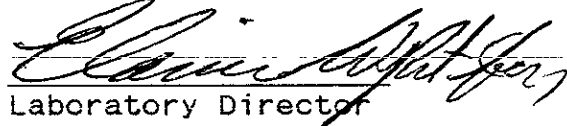
LAB #	Sample Identification	Concentration (mg/kg) Total oil & grease
1	#1-300	ND<50

mg/kg - parts per million (ppm)

Minimum Detection Limit for oil & grease in Soil: 50mg/kg

QAQC Summary:
MS/MSD average recovery = 68%
Duplicate RPD = 4%

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C E R T I F I C A T E O F A N A L Y S I S

LABORATORY NO.: 52632
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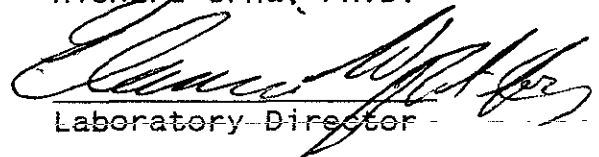
ANALYSIS FOR TOTAL ORGANIC LEAD
by DHS Method MAY 1988 LUFT Manual

LAB NO.	Sample Identification	Concentration (mg/kg)
3	#3-5KG	ND<0.05
4	#4-5KG	ND<0.05
5	#5-8KG	ND<0.05
6	#6-8KG	ND<0.05

mg/kg - parts per million (ppm)

Minimum Detection limit for Organic Lead in Soil: 0.05mg/kg

Richard Srna, Ph.D.



Laboratory Director

SA #52632

CHAIN OF CUSTODY RECORD

PROJECT NAME: <i>DONFONG Meekland</i>						Number of Con- tainers	Analysis Required					REMARKS
SAMPLERS (signature): <i>Chuck Ripin</i>							TPH	TPH-B+D	BTEX	ZOC	ORGANIC LEAD	
Station Number	Date	Time	Comp.	Grab	Station Location							
#1-300	10/14/90	10:35		✓	#1-300 W/0 - 7'10"	1	✓	✓	✓		WASTE OIL	
#2-300	10/14/90	10:43		✓	#2-300 W/0 - 9'	1	✓	✓	✓		Hold till ¹¹ is RAN * <i>Call after #1 is run</i>	
#3-5KG	10/14/90	10:50		✓	#3-5KG NE-13'6"	1	✓	✓	✓		GASOLINE	
#4-5KG	10/14/90	10:56		✓	#4-5KG SE-13'6"	1	✓	✓	✓		GASOLINE	
#5-8KG	10/14/90	11:05		✓	#5-8KG SE-13'	1	✓	✓	✓		GASOLINE	
#6-8KG	10/14/90	11:10		✓	#6-8KG NE-13'	1	✓	✓	✓		GASOLINE	
Relinquished by (signature): <i>Chuck Ripin</i>			Date / Time: 10/17/90 8:15	Received by (signature):			Relinquished by (signature):			Date / Time:	Received by (signature):	
Company or Agency: <i>Seve</i>				Company or Agency:			Company or Agency:				Company or Agency:	
Relinquished by (signature):			Date / Time:	Received by (signature):			Relinquished by:			Date / Time:	Received by (signature):	
Company or Agency:				Company or Agency:			Company or Agency:				Company or Agency:	
Relinquished by (signature):			Date / Time:	Received for Laboratory by: (signature) <i>Oniji + Nwozu</i>			Date / Time: 10/17/90 8:20am	Remarks/Shipping Information: <i>Normal Turn</i>				
Company or Agency:												

90005008

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

GENERATOR

TRANSPORTER

FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST

Generator's US EPA ID No. **CAC00050518** Manifest Document No. _____

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

3. Generator's Name and Mailing Address
Don Fong 2009 Meekland Hayward CA

4. Generator's Phone **415-582-7921** 5. State **CA**

6. State Manifest Document Number **90005008**

7. Transporter 1 Company Name **ALLIED PETROLEUM** 8. US EPA ID Number **CAD980675128** 9. State Transporter's ID **106189**

10. Transporter 2 Company Name _____ 11. US EPA ID Number _____ 12. State Transporter's ID _____

13. Designated Facility Name and Site Address
**RAMOS ENVIRONMENTAL SERVICES
1515 SOUTH RIVER ROAD, WEST SACRAMENTO, CA 95691**

14. US EPA ID Number **CAD044003556** 15. State Facility's ID **CA1D044003556**

16. Facility's Phone **916-371-2570**

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13. Total Quantity	14. Unit (Wt/Vol)	1. Waste No.
	No.	Type			
a. Waste Fuel Combustible Liquid NCS NA1993	0	TIT	340	GAL	State 223 EPA/Other
b. _____	_____	_____	_____	_____	State _____ EPA/Other _____
c. _____	_____	_____	_____	_____	State _____ EPA/Other _____
d. _____	_____	_____	_____	_____	State _____ EPA/Other _____

J. Additional Descriptions for Materials Listed Above
**45% Water + Rinse
5% Fuel**

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

15. Special Handling Instructions and Additional Information
WEAR GLOVES & PROTECTIVE CLOTHING

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

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name **TRINH HOANG** Signature *Trinh Quang Hoang* Month Day Year **1/01/87**

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name **COLIN KELLEY** Signature *Colin Kelly* Month Day Year **1/01/87**

19. Discrepancy Indication Space

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