

# LCI

LIQUID CONSTRUCTION, INC.

October 20, 1986

Arco  
P.O. Box 5811  
San Mateo, California 94402

Attention: Carl Seward

Re: Arco #601  
712 Lewelling Blvd., San Leandro, Calif

Dear Mr. Seward:

On October 15, 1986, a Petro Tite System Test was performed at the above-referenced location. The test was performed by Abel Hernandez, LCI Technician. The NFPA Code 329.02 criteria for a tight system is a maximum loss of .05 gallons per hour. Because of the almost infinite variables involved, this is not intended to be a mathematical tolerance and is not the permission of actual leakage.

During the stand-pipe test procedure, the internal liquid hydrostatic pressure applied to the underground tank system is generally two to three times greater than normal liquid storage pressures. This increase in hydrostatic pressure will amplify the indicated rate of leak accordingly.

#### SYSTEM TEST

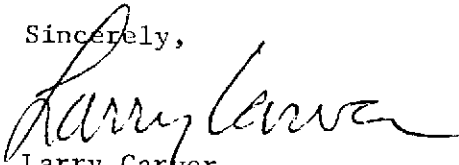
Tank No. 1 - East  
Size - 300 Gallons  
Product - Waste Oil  
The test showed a plus .008 gallons per hour.  
Based on the above criteria, we find the tank tested mathematically tight.

This concludes our test and findings on October 15, 1986. If you have any questions regarding the results, please contact me. It is your responsibility to notify your local County Health Department, Environmental Health, within thirty (30) days of the results of this test. This notification is required by the California Administrative Code, Title 23 Waters, Chapter 3 Water Resources Control Board, Sub-chapter 16 Underground Tank Regulations, Article 4.30.

Arco  
Carl Seward  
October 20, 1986  
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We have enjoyed working with you on this project. If you need any further information, please feel free to contact our office.

Sincerely,

A handwritten signature in cursive script, appearing to read "Larry Carver".

Larry Carver  
Tank Testing Coordinator

LC/tb

Enclosures

# DATA CHART FOR TANK SYSTEM TIGHTNESS TEST

**petroTite**  
TANK TESTER

PLEASE PRINT

|                                                          |                                   |                                                                                                                                                                                                 |                   |                        |             |             |                  |
|----------------------------------------------------------|-----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|------------------------|-------------|-------------|------------------|
| 1. OWNER                                                 | Property <input type="checkbox"/> | Arco P.O. Box 5811 San Mateo, Calif. 94402 Ron Miles 1-800-421-7457                                                                                                                             |                   |                        |             |             |                  |
|                                                          | Tank(s) <input type="checkbox"/>  | Name                                                                                                                                                                                            | Address           | Representative         | Telephone   |             |                  |
| 2. OPERATOR                                              |                                   | ARCO #601, 712 Lewelling Blvd./Washington, San Leandro, CA                                                                                                                                      |                   |                        |             |             |                  |
|                                                          |                                   | Name                                                                                                                                                                                            | Address           | Representative         | Telephone   |             |                  |
| 3. REASON FOR TEST<br>(Explain Fully)                    |                                   | To check for tightness                                                                                                                                                                          |                   |                        |             |             |                  |
|                                                          |                                   |                                                                                                                                                                                                 |                   |                        |             |             |                  |
| 4. WHO REQUESTED TEST AND WHEN                           |                                   | Ron Miles Arco                                                                                                                                                                                  |                   |                        |             |             |                  |
|                                                          |                                   | Name                                                                                                                                                                                            | Address           | Company or Affiliation | Date        |             |                  |
| 5. WHO IS PAYING FOR THIS TEST?                          |                                   | P.O. Box 5811 San Mateo, California 94402 same                                                                                                                                                  |                   |                        |             |             |                  |
|                                                          |                                   |                                                                                                                                                                                                 |                   |                        |             |             |                  |
|                                                          |                                   | Arco Ron Miles same                                                                                                                                                                             |                   |                        |             |             |                  |
|                                                          |                                   | Company, Agency or Individual                                                                                                                                                                   | Person Authorized | Title                  | Telephone   |             |                  |
| 6. TANK(S) INVOLVED                                      |                                   | P.O. Box 5811 San Mateo, California 94402                                                                                                                                                       |                   |                        |             |             |                  |
|                                                          |                                   | Billing Address                                                                                                                                                                                 | City              | State                  | Zip         |             |                  |
|                                                          |                                   | Attention of: Ron Miles Order No. Other Instructions                                                                                                                                            |                   |                        |             |             |                  |
|                                                          |                                   | Identify by Direction                                                                                                                                                                           | Capacity          | Brand/Supplier         | Grade       | Approx. Age | Steel/Fiberglass |
| 7. INSTALLATION DATA                                     |                                   | East 300 O WASTE OIL - Steel                                                                                                                                                                    |                   |                        |             |             |                  |
|                                                          |                                   |                                                                                                                                                                                                 |                   |                        |             |             |                  |
| 8. UNDERGROUND WATER                                     |                                   | Location                                                                                                                                                                                        | Cover             | Fills                  | Vents       | Siphones    | Pumps            |
|                                                          |                                   | East Side of Lot                                                                                                                                                                                | Black Top         | 2"                     | 2"          | O           | O                |
| 9. FILL-UP ARRANGEMENTS                                  |                                   | North inside driveway, Fleet of station, etc. Concrete, Black Top, Earth, etc. Size, Titefill make, Drop tubes, Remote Fills Size, Manifolds Which tanks? Suction, Remote, Make if known        |                   |                        |             |             |                  |
|                                                          |                                   |                                                                                                                                                                                                 |                   |                        |             |             |                  |
| 10. CONTRACTOR, MECHANICS, any other contractor involved |                                   | Depth to the Water table 8+ Is the water over the tank? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No                                                                     |                   |                        |             |             |                  |
|                                                          |                                   |                                                                                                                                                                                                 |                   |                        |             |             |                  |
| 11. OTHER INFORMATION OR REMARKS                         |                                   | Tanks to be filled DRAINED 8:00 hr. 10-15-86 Date Arranged by ARCO RON MILES                                                                                                                    |                   |                        |             |             |                  |
|                                                          |                                   | Extra product to "top off" and run TSTT. How and who to provide? Consider NO Lead.                                                                                                              |                   |                        |             |             |                  |
| 12. TEST RESULTS                                         |                                   | Terminal or other contact for notice or inquiry                                                                                                                                                 |                   |                        |             |             |                  |
|                                                          |                                   | Company Name Telephone                                                                                                                                                                          |                   |                        |             |             |                  |
| 13. CERTIFICATION                                        |                                   | TESTED WASTE OIL TANK with WATER, Set up Equipment, Set up 4" RISER PIPE, PLUGGED 2" DRAIN.                                                                                                     |                   |                        |             |             |                  |
|                                                          |                                   | Additional information on any items above. Officials or others to be advised when testing is in progress or completed. Visitors or observers present during test etc.                           |                   |                        |             |             |                  |
| 12. TEST RESULTS                                         |                                   | Tests were made on the above tank systems in accordance with test procedures prescribed for petroTite as detailed on attached test charts with results as follows:                              |                   |                        |             |             |                  |
|                                                          |                                   | Tank Identification                                                                                                                                                                             | Tight             | Leakage Indicated      | Date Tested |             |                  |
| 13. CERTIFICATION                                        |                                   | 1229                                                                                                                                                                                            | YES               | 1.008                  | 10-15-86    |             |                  |
|                                                          |                                   |                                                                                                                                                                                                 |                   |                        |             |             |                  |
| 13. CERTIFICATION                                        |                                   | This is to certify that these tank systems were tested on the date(s) shown. Those indicated as "Tight" meet the criteria established by the National Fire Protection Association Pamphlet 329. |                   |                        |             |             |                  |
|                                                          |                                   | 10-15-86 Date ABEL HERNANDEZ LCI Testing Contractor or Company. Signature P. O. Box 1220, Tulare, CA 93275                                                                                      |                   |                        |             |             |                  |

**Petro Tite**  
TANK TESTER

14. ARCO #601, 712 Lewelling Blvd./Washington, San Leandro, CA 10-15-86  
Name of Supplier, Owner or Dealer Address No. and Street(s) City State Date of Test

15. TANK TO TEST  
#1 East  
Identity by position  
Waste Oil  
Brand and Grade

16. CAPACITY  
Nominal Capacity 300 Gallons  
Is there doubt as to True Capacity? ☐  
See Section "DETERMINING TANK CAPACITY"

By most accurate capacity chart available 300 Gallons

From  
☐ Station Chart  
☐ Tank Manufacturer's Chart  
☐ Company Engineering Data  
☐ Charts supplied with Petro Tite  
☒ Other STICK

17. FILL-UP FOR TEST

Stick Water Bottom before Fill-up 0 to 1/4 in. 0 Gallons

| Stick Readings to 1/4 in. | Gallons | Total Gallons ea. Reading |
|---------------------------|---------|---------------------------|
| Inventory                 |         | 300                       |
| Top                       | 0.11    | 310                       |
|                           |         | 310                       |

Fill up. STICK BEFORE AND AFTER EACH COMPARTMENT DROP OR EACH METERED DELIVERY QUANTITY

Tank Diameter 28"

Product in full tank (up to fill pipe)

18. SPECIAL CONDITIONS AND PROCEDURES TO TEST THIS TANK

See manual sections applicable. Check below and record procedure in log (26).

☐ Water in tank ☐ High water table in tank excavation ☐ Line(s) being tested with LVLLT

VAPOR RECOVERY SYSTEM

☐ Stage I

☐ Stage II  
TESTED WASTE OIL TANK WITH WATER

19. TANK MEASUREMENTS FOR TSTT ASSEMBLY

Bottom of tank to Grade\* 69"  
Add 30" for 4" L       "  
Add 24" for 3" L or air seal       "  
Total tubing to assemble Approximate 132"

20. EXTENSION HOSE SETTING

Tank top to grade\* 39"  
Extend hose on suction tube 6" or more 0"  
below tank top

\* If Fill pipe extends above grade, use top of fill.

21. TEMPERATURE/VOLUME FACTOR (a) TO TEST THIS TANK

Is Today Warmer? ☐ Colder? ☐       ° F Product in Tank       ° F Fill-up Product on Truck       ° F Expected Change       ° F

22. Thermal-Sensor reading after circulation 15.232 digits 68/69° F Nearest

23. Digits per °F in range of expected change 326 digits

24. 310 total quantity in full tank (16 or 17) x 0.00 coefficient of expansion for involved product =        gallons volume change in this tank per °F

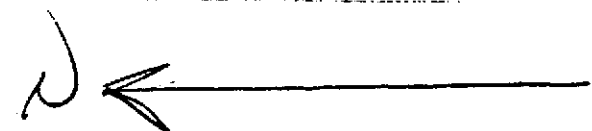
25.        volume change per °F (24) + 326 Digits per °F in test Range (23) = 0.0011683 Volume change per digit. Compute to 4 decimal places. This is test factor (a)

0.0001

OBSERVED GRAVITY         
OBSERVED TEMPERATURES 66°  
CORRECTED API GRAVITY         
C. O. E. 0.000

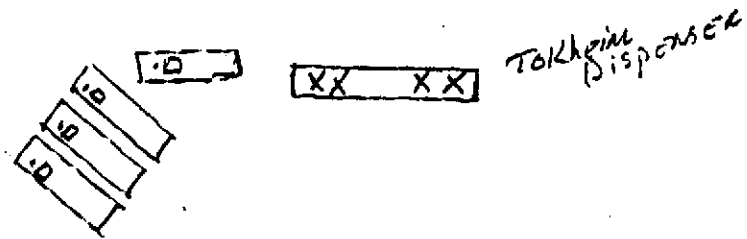
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ARCO, P. O. Box 5811, San Mateo, CA 94402 86-1027  
ARCO #601, 712 Lewelling Blvd./Washington, San Leandro, CA

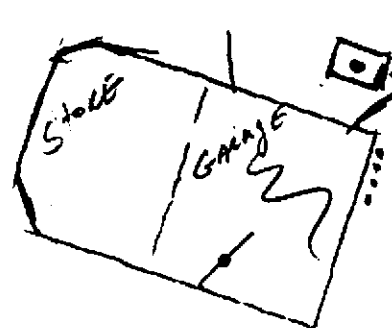


WASHINGTON

LEWELLING BLVD.



XX XX



1 East 300 WASTE OIL

- 2" FILL
- 2" VENT
- 2" DRAIN

LIQUID CONSTRUCTION, INC.  
P. O. Box 1220  
Tulare, CA 93275  
(209) 688-1980