

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



ENVIRONMENTAL HEALTH SERVICES
ENVIRONMENTAL PROTECTION (LOP)
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
FAX (510) 337-9335

StID 674

April 21, 1998

Mr. Jim Scullin
US Bureau of Reclamation
Environmental Affairs Division
2800 Cottage Way, Room E-2604
Sacramento, CA 95825

RE: Well Decommission at 16800 Kelso Road, Byron, CA

Dear Mr. Scullin:

This office and the Central Valley RWQCB have reviewed the case closure summary for the above referenced site and concur that no further action related to the underground tank release is required at this time. Before a remedial action completion letter is sent, the onsite monitoring wells (MW-6 and MW-7) should be decommissioned, if they will no longer be monitored. Please notify this office upon completion of well destruction so a closure letter can be issued.

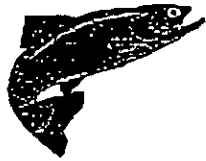
Well destruction permits may be obtained from Alameda County Flood Control and Water Conservation, Zone 7. They can be reached at (510) 484-2600.

Well destruction permits may be obtained from Alameda County Public Works. They can be reached at (510) 670-5575.

If you have any questions, I can be reached at (510) 567-6762.

Sincerely,

eva chu
Hazardous Materials Specialist



(916) 978-5020




(916) 978-5055



Sent to: ENVIRONMENTAL HEALTH SERVICES
ALAMEDA COUNTY


Receiver EVA CHU Agency _____ Office _____

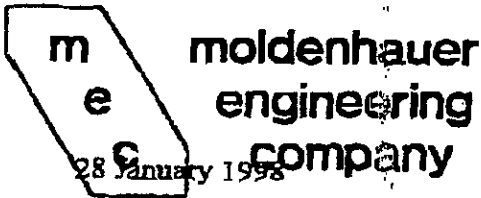
Sent from: Date 3/4/98

Sender JIM SCULLIN  978-5038 Time 9:40 AM

Type of document sent MOLDENHAVER ENGINEERING LETTER

TRACY MONITORING WELLS #'S 6 AND 7

 Message to receiver _____



L. ALEX MOLDENHAUER, L.S., P.E.
PRINCIPAL

Bruce Thomas
Western Area Power Administration
114 Park Shore Drive
Folsom, CA 95630

SUBJECT: MW #5, WAPA PROPERTY, TRACY PUMPING PLANT, TRACY,
CALIFORNIA.

GREETINGS:

During the fall of 1997, the Bureau of Reclamation (James Scullin, Environmental Section) hired Moldenhauer Engineering Company, 1107 Kennedy Place, Suite No. 7, Davis, California, to sample the contents of MW #6 and MW #7; then if clean of contaminants, to decommission those two wells.

MW #6 and MW #7 were found to be clean of petroleum contamination (contamination of six components were found to be at undetectable levels). Requests have been made to the Alameda County Health Services for a letter allowing MW #6 and #7 to be decommissioned. A favorable reply is expected in about 30 days; at which time the two wells will be decommissioned and abandoned as per Alameda County Health Services requirements.

During the initial discussions James Scullin, Bureau of Reclamation, told me to expect a phone call from Bruce Thomas, WAPA, regarding the decommissioning of MW #5 located on the WAPA property. Bruce Thomas called Moldenhauer Engineering Company during the fall of 1997, stating that WAPA was interested in having MW #5 decommissioned at the same time that the Bureau work was scheduled. Thomas was told that Moldenhauer Engineering Company would require a contract or letter of authorization from WAPA and a statement as to who would pay for the cost of the work--\$3,000 the estimated cost of the work, if MW #5 proved to be non-contaminated. Thomas stated he would talk to James Scullin regarding authorization and payment details.

In December 1997 Moldenhauer Engineering Company called Thomas stating that they had not heard from him regarding the above work, and that Moldenhauer Engineering Company could not proceed with the work of decommissioning of MW #5 until WAPA made it's intentions clear in writing. Moldenhauer Engineering Company has had no further contact from WAPA since. He suggested calling James Scullin regarding authorization and payment. Once the Bureau work is restarted the cost for MW #5 work will be \$4,000.00 due to extra engineering and driller work (travel time etc.).

Sincerely yours, L. A. Moldenhauer P. E. & L. S. / Principal
cc: James Scullin, Environmental Specialist, Bureau of Reclamation

1107 KENNEDY PLACE, SUITE 7, DAVIS, CA • (916) 926-3449
FAX (916) 756-5318

530-756-6249

ENGINEERING CONSULTANTS • PROJECT PLANNERS

LOP - RECORD CHANGE REQUEST FORM

printed:
02/17/98

Mark Out What Needs Changing and Hand to LOP Data Entry
(Name/Address changes go to Annual Programs Data Entry)

Insp: EC

AGENCY # : 10000 SOURCE OF FUNDS: F SUBSTANCE: 8006619
 StID : 674 LOC:
 SITE NAME: U S Bureau of Reclamation DATE REPORTED : 02/28/94
 ADDRESS : 16800 Kelso Rd DATE CONFIRMED: 02/11/92
 CITY/ZIP : Byron 94514 MULTIPLE RPs : N

SITE STATUS

 CASE TYPE: S CONTRACT STATUS: 4 PRIOR CODE:3A1 EMERGENCY RESP:
 RP SEARCH: S DATE COMPLETED: 02/28/94
 PRELIMINARY ASMNT: U DATE UNDERWAY: 03/02/94 DATE COMPLETED:
 REM INVESTIGATION: DATE UNDERWAY: DATE COMPLETED:
 REMEDIAL ACTION: DATE UNDERWAY: DATE COMPLETED:
 POST REMED ACT MON: DATE UNDERWAY: DATE COMPLETED:
 ENFORCEMENT ACTION TYPE: 1 DATE ENFORCEMENT ACTION TAKEN: 02/28/94
 LUFT FIELD MANUAL CONSID: 2HSCAW
 CASE CLOSED: DATE CASE CLOSED:
 DATE EXCAVATION STARTED : REMEDIAL ACTIONS TAKEN:

RESPONSIBLE PARTY INFORMATION

 RP#1-CONTACT NAME: Attn. Herb Ng
 COMPANY NAME: U.S. Bureau of Reclamation
 ADDRESS: R R - 1, Box 35
 CITY/STATE: Byron, C A 94514-9614

INSPECTOR VERIFICATION:

NAME _____ SIGNATURE _____ DATE _____

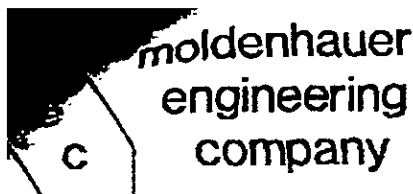
DATA ENTRY INPUT:

Name/Address Changes Only

Case Progress Changes

ANNPGMS _____ LOP _____ DATE _____

LOP _____ DATE _____



L. ALEX MOLDENHAUER, U.S., P.E.
PRINCIPAL

ATTACHMENT A

WORK SCHEDULE
10 October, 1997

THIS SUMMARY WORK SCHEDULE DESCRIBES CONTRACTED TASKS REQUESTED BY THE BUREAU OF RECLAMATION FROM THE MOLDENHAUER ENGINEERING COMPANY (HEREAFTER REFERRED TO AS THE CONTRACTOR), LOCATED AT 1107 KENNEDY PLACE, SUITE NO. 7, DAVIS, CALIFORNIA 95616, PH 916-756-6249 UNDER PURCHASE ORDER NO. 1425-97-PG-20-000215 DATED 10 OCTOBER 1997.

The following Task descriptions identify the two (2) tasks required by this Purchase Order and identifies the limits of the Contractors work under this order.

The work is limited to Monitoring Wells No. 6 and No. 7 located at the Bureau's Tracy Pumping Plant in Alameda County, California; that are to be sampled for certain contaminants in the groundwater. Laboratory work will be performed by a California Certified Laboratory using Laboratory procedures acceptable to the Alameda County Environmental Health Services.

TASK I

Sample the groundwater in existing Monitoring Wells No. 6 and No. 7; and performing laboratory analysis for the four (4) constituents listed below:

TPHD TPHG BTEX MTBE

Report the laboratory results to James Scullin, Bureau of Reclamation, Regional Office-Sacramento, California and to the Alameda County Environmental Health Services. Request approval to decommission Monitoring Wells No. 6 and No. 7.

Task II

Decommission the two (2) Monitoring Wells No. 6 and No. 7 to meet Alameda County approval.

SHOULD THE GROUNDWATER SAMPLE CONTAIN CONTAMINATION BY ANY OF THE ABOVE FOUR CONSTITUENTS, THE CONTRACTOR'S WORK AUTHORIZED BY THIS PURCHASE ORDER WILL BE TERMINATED. THE CONTRACTOR IS NOT RESPONSIBLE FOR ANY CONTAMINATION FOUND IN EITHER MONITORING WELL.

L. A. Moldenhauer P. E., Contractor

#



CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

13-21-97

PRODUCER

MARSH & MCLENNAN INCORPORATED
1166 AVENUE OF THE AMERICAS
NEW YORK, NY 10036

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	RELIANCE NATIONAL INDEMNITY COMPANY
COMPANY LETTER	B	
COMPANY LETTER	C	
COMPANY LETTER	D	
COMPANY LETTER	E	

INSURED

WOODWARD-CLYDE FEDERAL SERVICES
4582 SOUTH ULSTER STREET
DENVER, CO 80237

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIABILITY LIMITS IN THOUSANDS		
					EACH OCCURRENCE	AGGREGATE	
A	GENERAL LIABILITY	NGB1720628 CONTRACTUAL LIAB. INCLUDED AS RESPECTS THOSE ACTS COVERED BY GENERAL LIAB. INS. \$100,000 SIR	01-01-97	01-01-98	BODILY INJURY	\$	\$
	<input checked="" type="checkbox"/> COMPREHENSIVE FORM				PROPERTY DAMAGE	\$	\$
	<input checked="" type="checkbox"/> PREMISES/OPERATIONS UNDERGROUND EXPLOSION & COLLAPSE HAZARD				BI & PD COMBINED	\$ 1000	\$
	<input checked="" type="checkbox"/> PRODUCTS/COMPLETED OPERATIONS				PERSONAL INJURY		\$
	<input checked="" type="checkbox"/> CONTRACTUAL						
	<input checked="" type="checkbox"/> INDEPENDENT CONTRACTORS						
	<input checked="" type="checkbox"/> BROAD FORM PROPERTY DAMAGE						
	<input checked="" type="checkbox"/> PERSONAL INJURY						
	AUTOMOBILE LIABILITY				BODILY INJURY (PER PERSON)	\$	
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (PER ACCIDENT)	\$	
	<input type="checkbox"/> ALL OWNED AUTOS (PRIV. PASS.)				PROPERTY DAMAGE	\$	
	<input type="checkbox"/> ALL OWNED AUTOS (OTHER THAN PRIV. PASS.)				BI & PD COMBINED	\$	
	<input type="checkbox"/> HIRED AUTOS						
	<input type="checkbox"/> NON-OWNED AUTOS						
	<input type="checkbox"/> GARAGE LIABILITY						
	EXCESS LIABILITY				BI & PD COMBINED	\$	\$
	<input type="checkbox"/> UMBRELLA FORM						
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM						
	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY		
					\$	(EACH ACCIDENT)	
					\$	(DISEASE-POLICY LIMIT)	
					\$	(DISEASE-EACH EMPLOYEE)	
	OTHER						

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
596203; U.S. BUREAU OF RECLAMATION, TRACY PUMPING PLANT GARAGE.

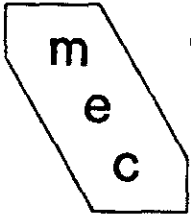
CERTIFICATE HOLDER

ALAMEDA COUNTY HEALTH CARE
SERVICES AGENCY DEPARTMENT OF
ENVIRONMENTAL PROTECTION DIVISION
1131 HARBOR BAY PARKWAY, ROOM 250
ALAMEDA, CA 94502

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



**moldenhauer
engineering
company**

L. ALEX MOLDENHAUER, L.S., P.E.
PRINCIPAL

29 December 1997

Eva Chu, Hazardous Materials Specialist
Alameda County
Health Care Services Agency
Environmental Health Services
Environmental Protection (LOP)
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6762
FAX (510) 337-9335

SUBJECT; Bureau of Reclamation, Tracy Pumping Plant, Monitoring Wells No. 6
and No. 7 Closure Request.

Greetings:


Attached are the Laboratory results for the above two wells; the test results indicate that all of the samples resulted in UNDETECTABLE concentrations of the six constituents sampled.

With your approval for closure of the above wells; the Bureau will proceed with having the closures performed by a Licensed Well Driller under the supervision of a California Licsened Civil Engineer Your office will be notified of the date the work will be done.

Once the work is complete, your office will be supplied with the necessary paper work that describes the two completed closures. If you have any questions regarding the above please call, L. A. Moldenhauer R. E. 17381, Moldenhauer Engineering Co. 1107 Kennedy Place, Suite No. 7, Davis, CA 95616. (916) 756-6249.

Thank you for your services; your approval will be awaited.

Sincerely yours,


L. A. Moldenhauer P. E.
Principal

cc: James Scullin, Bureau of Reclamation, Sacramento Office.

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY
DAVID J. KEARS, Agency Director

ENVIRONMENTAL HEALTH SERVICES
ENVIRONMENTAL PROTECTION (LOP)
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
FAX (510) 337-9335

StID 674

August 28, 1997

Mr. Jim Scullin
US Dep of Interior
Bureau of Reclamation
2800 Cottage Way
Sacramento, CA 95825

RE: Additional Groundwater Sampling at the Tracy Vehicle
Maintenance Garage, 16800 Kelso Rd, Tracy, CA

Dear Mr. Scullin:

I have completed review of Woodward-Clyde's July 1997 Final Tank Closure Report for the above referenced site. This report documents the removal of two underground storage tanks in May 1997. In addition it describes overexcavation and sampling activities. It appears that hydrocarbon-impacted soil was removed to the extent possible. About 20 cubic yards of contaminated soil remains in place below the northwest corner of the Vehicle Maintenance Garage Building at approximately 7' to 14.5' bgs. Your consultant recommended that the USBR request closure for this site.

Before closure can be granted for this site, please conduct one additional groundwater sampling of wells MW-6 and MW-7 for TPHd, TPHg, BTEX, and MTBE. If these analytes are absent or found in insignificant concentrations, I will start the case closure process. Eventually the groundwater monitoring wells will need to be decommissioned if they will no longer be monitored.

If you have any questions, I can be reached at (510) 567-6762.

eva chu
Hazardous Materials Specialist

ALAMEDA COUNTY HAZARDOUS MATERIALS DIVISION

05/20/97

UNDERGROUND STORAGE TANK CLEANUP SITE

AGENCY#: 10000	SOURCE OF FUNDS: -	INSPECTOR: EC	
StID: 6089	SUBSTANCE: -		
SITE NAME: U S Bureau Of Reclamation		DATE REPORTED :	
ADDRESS : 16650 Kelso Rd		DATE CONFIRMED:	
CITY/ZIP : Tracy, CA 95376		MULTIPLE RP's :	
CASE TYPE:	CONTRACT STATUS:	PRIOR:	EMERGENCY RESPONSE:
RP SEARCH :		DATE END:	
PRELIM ASSESSMENT :	DATE BEGIN:	DATE END:	
REMEDIAL INVESTIG :	DATE BEGIN:	DATE END:	
REMEDIAL ACTION :	DATE BEGIN:	DATE END:	
POST REMED MONITOR:	DATE BEGIN:	DATE END:	
TYPE ENFORCEMENT ACTION TAKEN:		DATE OF ENFORC. ACTION:	

UNDERGROUND STORAGE TANK CLEANUP SITE - SCREEN #2

LUFT FIELD MANUAL CONSIDERATION:	CASE CLOSED: on:
DT EXC START:	REMEDIAL ACTIONS TAKEN:

RP #1: CONTACT:	RP COST:	\$0.00
RP COMPANY NAME:	Ph:	
ADDRESS:		
CITY/STATE:		

white -env.health
yellow -facility
pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Inspection Form

1131 Harbor Bay Pkwy
Alameda CA 94502
510/567-6700

II, III

Site ID # 6089 Site Name US Bureau of Reclamation Today's Date 5/13/97

Site Address 16800
16650 Kelso Rd

City Tracy Zip 95396 Phone _____

MAX AMT stored > 500 lbs, 55 gal., 200 cft.?

Inspection Categories:

____ I. Haz. Mat/Waste GENERATOR/TRANSPORTER Diesel 0%LEL 0%O₂

____ II. Hazardous Materials Business Plan, Acutely Hazardous Materials Gasol. ~ 0%LEL 0%O₂

III. Under ground Storage Tanks Removal

* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

Comments:

- 1- 2K gasoline and 1- 2K diesel in separate pits
- Both tanks w/ minor pitting/corrosion - no through-holes
- ① SS collected at ~10.6' bgs green stain clay (w/ some silt) w/ mod degraded odor. from ^{south} ~~north~~ end of pit
- ② SS collected at ~ 11' bgs from north end of pit - silty clay, with mod odor
- ③ SS collected at ~10.6' bgs from east end of diesel pit. stained clay, silt & odor.
- ④ SS collected at ~ 10.0' bgs from west end of diesel pit. " clay silt w/ sl. odor

Analyze gas pit samples for TPH_d, MTBE, BTEX and total lead
" diesel " " " TPH_d, BTEX.
" trench soil samples for TPH_d, TPH_l, MTBE, BTEX

Contact Bill Loskutoff
Title _____
Signature Bill Loskutoff

Inspector eva dw
Signature [Signature]

II, III

ENVIRONMENTAL
PROTECTION
97 APR 15 AM 8:13

April 11, 1997

Mr. Nick Chimento
Alameda County Fire Department
Fire Prevention Bureau
22341 Redwood Road
Castro Valley, CA 94546

Subject: Tank Removal Permit Application
Transmittal of Approved UST Closure Plan and Site Health and Safety Plan
U. S. Bureau of Reclamation, Tracy Pumping Plant Substation Garage
16650 Kelso Road, Tracy, California

Dear Mr. Chimento:

Enclosed is a completed Alameda County Fire Department, Fire Prevention Bureau Application for an underground storage tank (UST) removal permit to conduct UST removal activities at the U. S. Bureau of Reclamation's Tracy Pumping Plant Garage, 16650 Kelso Road in Tracy, California. Also enclosed is a letter work plan and an Alameda County Department of Environmental Health (ACDEH) UST Closure Plan prepared and submitted by Woodward-Clyde on April 4, 1997. The UST Closure Plan was approved by ACDEH on April 9, 1997. Removal of the two 2000-gallon USTs is planned for 11:00 AM on Tuesday, May 13, 1997. The tank removal activities will be conducted by Valenzuela Engineering, Inc., of Santa Maria, California. Ms. Eva Chu (ACDEH) has requested your presence during the tank removal on May 13, 1997. Woodward-Clyde's Site Health and Safety Plan for UST removal operations is also enclosed with the approved UST Closure Plan.

A check in the amount of \$120.00 to cover the permit application fees is attached. Please provide a receipt for all fees paid to Alameda County Fire Department. If you have any questions regarding this tank removal permit application, please call me at (916) 368-0988. **+222**

Very truly yours,

WOODWARD-CLYDE



William Loskutoff
Project Geologist

Attachments: ACDEH UST Closure Plan, ACFD Permit Application, Check for \$120.00

cc: Jim Scullin, Bureau of Reclamation-Sacramento
Eva Chu, Alameda County Department of Environmental Health

**Alameda County Fire Department
Fire Prevention Bureau**

22341 Redwood Road • Castro Valley, CA 94546 • (510) 670-5853 • Fax (510) 582-4347

Application

Fire Permit Plan Review Inspection Request Tank Removal

DATE _____ APPLICATION NO. _____

✓ **PROJECT INFORMATION**

PROJECT ADDRESS 16650 Kelso Road MILE MARKER OR CROSS STREET Mountain House
CITY Tracy ZIP 95376 JOB PHONE (209) 836-6261 PAGER NO. _____
DESCRIPTION OF WORK/ACTIVITY Tank Removal

PARCEL/TRACT MAP # _____ PLANNING DEPT # _____ BID # _____ APN # _____

✓ **BUSINESS/PROPERTY OWNER INFORMATION**

NAME U.S. Bureau of Reclamation PHONE # (H) (209) 487-5112 (Pager) _____
ADDRESS 2666 N. Grove Industrial Dr CITY Fresno STATE CA ZIP 93727

✓ **CONTRACTOR INFORMATION**

NAME Valenzuela Engineering, Inc. PHONE # (805) 349-2811 (Pager) _____
ADDRESS P.O. Box 2549 CITY Santa Maria STATE CA ZIP 93457
CONTRACTOR LICENSE TYPE A, B, C-10 LICENSE # 617994

✓ **APPLICANT**

NAME Bill Loskutoff / Woodward-Clyde PHONE # (916) 368-0988 (Pager) _____
ADDRESS 10370 Old Placerville Rd, CITY Sacramento STATE CA ZIP 95827

FEES

Fees are due and payable by check or money order, made out to Alameda County Fire Department. Plans and permits shall not be approved until fees are paid. Additional fees may occur from missed inspections and required re-inspections. All fees must be paid prior to release of utilities, permit finals, or fire clearances.

**WOODWARD-CLYDE FEDERAL SERVICES INC.
SACRAMENTO REVOLVING FUND**

10370 OLD PLACERVILLE RD. SUITE 104
SACRAMENTO, CA 95827


409

23-2
1020 215

DATE 4-1-97

PAY
TO THE
ORDER OF

Alameda County Jail Dept \$ 120.00

One Hundred twenty DOLLARS 



Colorado National Bank

PO Box 5168
Denver, CO 80217
FastLine 24-Hour Banking 303/585-8585

P.O.# 409160
FOR UST Removal Permit (596203)

⑈000409⑈ ⑆10200002⑆ ⑆204⑆ ⑆32⑆ ⑆2776⑈

Woodward-Clyde
10370 Old Placerville Rd., Suite 104
Sacramento, California 95827
(916) 368-0988
(916) 368-0967 FAX

Fax Cover Sheet

DATE:	April 11, 1997	TIME:	3:02 PM
TO:	Natanya Lee Bay Area AQMD	PHONE:	(415) 749-4950
		FAX:	(415) 928-0338
FROM:	Bill Loskutoff Woodward-Clyde	PHONE:	(916) 368-0988
		FAX:	(916) 368-0967
RE:	Notification of UST Removal/ U. S. Bureau of Reclamation, Tracy, California		

Number of pages including cover sheet: 2

As I mentioned in my phone message today (April 11, 1997) we will begin the tank removal activities on May 12, 1997. Any questions, please call.


**BAY AREA AIR QUALITY
MANAGEMENT DISTRICT**

 939 ELLIS STREET
 SAN FRANCISCO, CALIFORNIA 94109
 (415) 771-6000

**REGULATION 8, RULE 40
NOTIFICATION FORM**

 Check Removal or Replacement of Tanks
 Excavation of Contaminated Soil

SITE INFORMATION

 Site Address 16650 Kelso Road
 City, State Tracy, CA. Zip 95376
 Owner Name U.S. Department of Interior, Bureau of Reclamation
 Specific location of project West and NW of Vehicle Maintenance Garage, Tracy Pumping Plant Substation
Tank Removal

 Scheduled startup date May 12, 1997

Vapors removed by:

-
- Water wash
-
-
- Vapor freeing (CO
- ²
-)
-
-
- Ventilation

Indicate below if an A/C was obtained for tank replacement:

 Yes _____ No X If yes, A/C or P/O # _____

Contaminated Soil Excavation

 Scheduled Startup Date May 12, 1997

 Stockpiles will be covered? Yes X No _____

 Indicate below the method used to comply with
 Regulation 8, Rule 40, Section 402.4:

 Check () 8-40-301 8-40-302 (permit required)

A/C or P/O # _____

A/C = Authority to Construct P/O = Permit to Operate

What other public agency have you notified (e.g., Fire District, Hazardous Materials Department, City or County)?

 Agency Alameda County DEH Contact Eva Chu Phone # 510 567-6762
Alameda County Fire Dept. Contact Nick Chimento Phone # (510) 670-5853
BAAQMD # _____ CONTRACTOR INFORMATION

 Name Valenzuela Engineering, Inc. Contact Rick Brown
 Address P.O. Box 2549 Phone (805) 349-2811
 City, State, Zip Santa Maria, CA 93457
CONSULTANT INFORMATION (if applicable)

 Name Woodward-Clyde Contact Bill Loskutoff
 Address 10370 Old Placerville Rd., #104 Phone (916) 368-0988
 City, State, Zip Sacramento, CA 95827
FOR OFFICE USE ONLY

Date Received Fax:	Date Postmarked:
Inspector No.:	Date: _____ By: _____
Update: Contact Name	Date: _____ By: _____
Update: Contact Name	Date: _____ By: _____

See reverse for instructions

TRANSACTION REPORT

Transmission
Transaction(s) completed

NO.	TX	DATE/TIME	DESTINATION	DURATION	PGS.	RESULT	MODE
562	APR. 11	14:10	415 771 6000	0° 00' 38"	002	OK	N ECM

Woodward-Clyde
10370 Old Placerville Rd., Suite 104
Sacramento, California 95827
(916) 368-0988
(916) 368-0967 FAX

Fax Cover Sheet

DATE: April 11, 1997 TIME: 3:02 PM
TO: Natanya Lee PHONE: (415) 749-4950
Bay Area AQMD FAX: (415) 928-0338
FROM: Bill Loskutoff PHONE: (916) 368-0988
Woodward-Clyde FAX: (916) 368-0967
RE: Notification of UST Removal/ U. S. Bureau of Reclamation, Tracy, California

Number of pages including cover sheet: 2

As I mentioned in my phone message today (April 11, 1997) we will begin the tank removal activities on May 12, 1997. Any questions, please call.

April 11, 1997

Mr. Rick Brown
Valenzuela Engineering, Inc.
P. O. Box 2549
Santa Maria, California

Subject: Transmittal of Approved UST Closure Plan and Site Health and Safety Plan
U. S. Bureau of Reclamation, Tracy Pumping Plant Substation Garage
16650 Kelso Road, Tracy, California

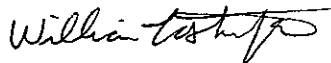
Dear Mr. Brown:

Enclosed is copy of the approved Underground Storage Tank (UST) Closure Plan for the planned tank removal activities at the U. S. Bureau of Reclamation, Tracy Pumping Plant Substation Garage, 16650 Kelso Road in Tracy, California. As I mentioned in my phone message on Friday April 11, 1997, Woodward-Clyde Federal Services plans to begin the UST removal activities at the Tracy Pumping Plant on Monday May 12, 1997. The tank removal is scheduled for 11:00 AM on Tuesday May 13, 1997. Ms. Eva Chu of Alameda County Department of Environmental Health (ACDEH) will be on-site to oversee the tank removal and sampling activities. The Bay Area Air Quality Management District UST Removal Notification form and Woodward-Clyde's letter work plan and Site Health and Safety Plan for UST removal operations is also enclosed with the approved UST Closure Plan.

In addition, Valenzuela Engineering will be responsible for providing a calibrated combustible gas indicator on site to measure percent lower explosive limit (LEL) inside the tanks following tank inerting. Mr. Nick Chimento, Alameda County Fire Department will be on-site to witness the LEL measurements. If there are any questions regarding this transmittal, please call me at (916) 368-0988.

Very truly yours,

WOODWARD-CLYDE



William Loskutoff
Project Geologist

Attachments: ACDEH UST Closure Plan, Bay Area AQMD UST Removal Notification,
ACFD Permit Letter

cc: Jim Scullen, Bureau of Reclamation, Sacramento
Eva Chu, Alameda County Department of Environmental Health

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY *Office Copy*
 DEPARTMENT OF ENVIRONMENTAL HEALTH
 ENVIRONMENTAL PROTECTION DIVISION
 1131 HARBOR BAY PARKWAY, RM 250
 ALAMEDA, CA 94502-6577
 PHONE # 510/567-6700
 FAX # 510/337-9335

Project Specialist

Isabel Hagan
Note changes/additions in lead

ACCEPTED

Underground Storage Tank Closure Permit Application
 Alameda County Division of Hazardous Materials
 1131 Harbor Bay Parkway, Suite 250
 Alameda, CA 94502-6577

These closure/removal plans have been received and found to be acceptable and essentially meet the requirements of State and Local Health Laws. Changes to your closure plans indicated by this Department are to ensure compliance with State and local laws. The project proposed herein is new released for issuance of any required building permits for construction/demolition.
 One copy of the accepted plans must be on the job and available to all contractors and craftsmen involved with the removal.
 Any changes or alterations of these plans and specifications must be submitted to this Department and to the Fire and Building Inspections Department to determine if such changes meet the requirements of State and local laws. Notify this Department at least 72 hours prior to the following required inspections:

- Removal of tank(s) and Piping
- Sampling
- Final Inspection

Issuance of a permit to operate, a permanent site closure, is dependent on compliance with accepted plans and all applicable laws and regulations.

***THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS:**

Contact Specialist

UNDERGROUND TANK CLOSURE PLAN

* * * Complete according to attached instructions * * *

1. Name of Business U.S. Bureau of Reclamation, Tracy, California
 Business Owner or Contact Person (PRINT) Jim Scullin, Bureau of Reclamation Sacramento, CA
2. Site Address 16650 Kelso Road
 City Tracy, CA Zip 95376 Phone (916) 979-2475
3. Mailing Address Route 1, Box 35
 City Byron, CA Zip 94514-9614 Phone _____
4. Property Owner U.S. Bureau of Reclamation
 Business Name (if applicable) _____
 Address 2666 North Grove Industrial Drive, Suite 106
 City, state Fresno, CA Zip 93727-1551
5. Generator name under which tank will be manifested
U.S. Bureau of Reclamation

EPA ID# under which tank will be manifested CA C 0 0 1 0 6 5 3 0 4

6. Contractor Valenzuela Engineering, Inc.
Address P.O. Box 2549
City Santa Maria, CA 93457 Phone (805)349-2811
License Type* A, B, & C-10 ID# 617994

*Effective January 1, 1992, Business and Professional Code Section 7058.7 requires prime contractors to also hold Hazardous Waste Certification issued by the State Contractors License Board.

7. Consultant (if applicable) Woodward-Clyde Federal Services
Address 10370 Old Placerville Rd., Suite 104
City, State Sacramento, CA 95827 Phone (916)368-0988

8. Main Contact Person for Investigation (if applicable)
Name Jay Kamine Title Senior Project Engineer
Company Woodward-Clyde
Phone (916)368-0988

9. Number of underground tanks being closed with this plan 2
Length of piping being removed under this plan _____
Total number of underground tanks at this facility (**confirmed with owner or operator) _____

10. State Registered Hazardous Waste Transporters/Facilities (see instructions).

** Underground storage tanks must be handled as hazardous waste **

a) Product/Residual Sludge/Rinsate Transporter

Name Clearwater Environmental EPA I.D. No. CAR000007013
Hauler License No. 03515 License Exp. Date 1/97
Address P.O. Box 7420
City Fremont State CA Zip 94537-7420

b) Product/Residual Sludge/Rinsate Disposal Site

Name Alviso Independent Oil EPA ID# CAL000048571
Address 5002 Archer St.
City Alviso State CA Zip 95002

c) Tank and Piping Transporter

Name Manley Environmental Serv. EPA I.D. No. CAL 0000 27769
Hauler License No. 2843 License Exp. Date 3/98
Address 8896 Elder Creek Rd.
city Sacramento State CA zip 95828

d) Tank and Piping Disposal Site

Name Triangle Inc. EPA I.D. No. CAD981446362
Address 3525 52nd Ave
City Sacramento State CA Zip 95823

11. Sample Collector

Name Bill Loskutoff
Company Woodward-Clyde
Address 10370 Old Placerville Rd., Suite 104
City Sacramento, State CA Zip 95827 Phone (916)368-0988

12. Laboratory

Name Inchcape Testing Services
Address 9852-H Business Park Dr.
City Sacramento State CA Zip 95827
State Certification No. 1234

13. Have tanks or pipes leaked in the past? Yes[.] No[] Unknown[X]

If yes, describe. _____

916-324-1781
1800 61 TOXIC
815-445

14. Describe methods to be used for rendering tank(s) inert:

Removal of any explosive vapors will be done by means of introducing dry ice pellets in the amount of 30 pounds per 1000 gallons of tank capacity. Lower explosive limits (LEL) will be lowered to <10% LEL

Before tanks are pumped out and inerted, all associated piping must be flushed out into the tanks. All accessible associated piping must then be removed. Inaccessible piping must be permanently plugged.

The Bay Area Air Quality Management District, 415/771-6000, along with local Fire and Building Departments, must also be contacted for tank removal permits. Fire departments typically require the use of a combustible gas indicator to verify tank inertness. It is the contractor's responsibility to bring a working combustible gas indicator on-site to verify that the tank is inert.

15. Tank History and Sampling Information *** (see instructions) ***

Tank		Material to be sampled (tank contents, soil, groundwater)	Location and Depth of Samples	
Capacity	Use History include date last used (estimated)			
2000-gal. (unleaded-gas)	~ 1994	Soil and Groundwater	if no GW below both tank ends, one in center	if GW center of each excav. wall above GW
2000-gal (diesel)	~ 1994	Soil and Groundwater	"	"

One soil sample must be collected for every 20 linear feet of piping that is removed. A ground water sample must be collected if any ground water is present in the excavation.

Excavated/Stockpiled Soil

Stockpiled Soil Volume (estimated) <p align="center">100 yd³</p>	Sampling Plan Collect 8 samples equally distributed in piles and composite into two analytical samples (i.e. 4 tubes / 50yd ³) for disposal or sample 1/20 cy for re-use.
--	--

Stockpiled soil must be placed on bermed plastic and must be completely covered by plastic sheeting.

Will the excavated soil be returned to the excavation immediately after tank removal? [] yes [X] no [] unknown

If yes, explain reasoning 24 hr turnaround of soil samples, will re-excavate if necessary or will request for excavation to be backfilled-pending analysis

If unknown at this point in time, please be aware that excavated soil may not be returned to the excavation without prior approval from Alameda County. This means that the contractor, consultant, or responsible party must communicate with the Specialist IN ADVANCE of backfilling operations.

16. Chemical methods and associated detection limits to be used for analyzing samples:

The Tri-Regional Board recommended minimum verification analyses and practical quantitation reporting limits should be followed. See attached Table 2.

17. Submit Site Health and Safety Plan (See Instructions)

Contaminant Sought	EPA or Other Sample Preparation Method Number	EPA or Other Analysis Method Number	Method Detection Limit
Unleaded gas	8015M - gasoline, diesel 8020 - BTEX w/MTBE total lead		1.0 mg/Kg
Diesel fuel	8015M - gasoline, diesel 8020 - BTEX w/MTBE		1.0 mg/Kg

18. Submit Worker's Compensation Certificate copy

Name of Insurer Reliance National Indemnity Company

19. Submit Plot Plan ***** (See Instructions) *****

20. Enclose Deposit (See Instructions)

21. Report any leaks or contamination to this office within 5 days of discovery.

The written report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report (ULR) form.

22. Submit a closure report to this office within 60 days of the tank removal. The report must contain all information listed in item 22 of the instructions.

23. Submit State (Underground Storage Tank Permit Application) Forms A and B (one B form for each UST to be removed) (mark box 8 for "tank removed" in the upper right hand corner)

I declare that to the best of my knowledge and belief that 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 approval from the Environmental Protection Division 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 health and safety. 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.

Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Specialist at least three working days in advance of site work to schedule the required inspections.

CONTRACTOR INFORMATION

Name of Business Woodward-Clyde

Name of Individual Bill Loskutoff

Signature Bill Loskutoff Date 3/21/97

PROPERTY OWNER OR MOST RECENT TANK OPERATOR (Circle one)

Name of Business U.S. Bureau of Reclamation

Name of Individual Jim Scullin

Signature James C Scullin Date 3/26/97

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



ARNOLD PERKINS, DIRECTOR
RAFAT A. SHAHID, DEPUTY DIRECTOR

Alameda County
Environmental Protection Division
1131 Harbor Bay Parkway, Room 250
Alameda CA 94502-6577

CC4580

StID 674

December 18, 1995

Mr. Chuck Bryant
C.L. Bryant, Inc
201 Hospital Road
Sonora, CA 95370

RE: Diesel Overfill Spill at San Luis Delta Mendota Water
Authority Pumping Station, Mountain House and Kelso Rds,
Tracy, CA 95376

Dear Mr. Bryant:

I have completed review of Clearwater Group, Inc's November 1995 Diesel Overfill report for the above referenced site. That report summarized the remedial actions implemented following the accidental release of approximately 25 gallons of diesel during the filling of an underground storage tank.

Based upon the available information and with the provision that the information provided to this agency was accurate and representative of site conditions, no further action related to the surface contamination by the diesel spill is required.

If you have any questions, I can be reached at (510) 567-6762.

eva chu
Hazardous Materials Specialist

cc: Juniper Neill, Clearwater, 1125 Atlantic Ave, Suite 102,
Alameda 94501
Herbert Ng, Bureau of Reclamation, Rte 1, Box 35, Byron
94514-9614
files

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		FOR LOCAL AGENCY USE ONLY I HEREBY CERTIFY THAT I HAVE DISTRIBUTED THIS INFORMATION ACCORDING TO THE DISTRIBUTION SHOWN ON THE INSTRUCTION SHEET ON THE BACK PAGE OF THIS FORM.		
REPORT DATE 12/13/95		CASE # _____		SIGNED: <i>[Signature]</i> DATE: 12/18/95		
REPORTED BY	NAME OF INDIVIDUAL FILING REPORT JUNIPER NEILL		PHONE (510) 337-8730		SIGNATURE Juniper Neill	
	REPRESENTING <input type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> LOCAL AGENCY <input checked="" type="checkbox"/> OTHER <u>Distributor</u>		COMPANY OR AGENCY NAME Clearwater Group, Inc.			
	ADDRESS 1125 Atlantic Ave, Suite 102, Alameda, CA 94501					
RESPONSIBLE PARTY	NAME CL Bryant		<input type="checkbox"/> UNKNOWN		CONTACT PERSON Chuck Bryant	
	ADDRESS 201 Hospital Road		CITY Sonoma		STATE CA	
SITE LOCATION	FACILITY NAME (IF APPLICABLE) San Luis Delta Mendota Water Authority		OPERATOR JAMEL		PHONE 709 1833-1050	
	ADDRESS Route One Box 35-F		CITY Byron		STATE CA	
	CROSS STREET Mountain House		COUNTY Alameda		ZIP 94514	
IMPLEMENTING AGENCIES	LOCAL AGENCY Alameda Co. Health DEH		AGENCY NAME DEH		CONTACT PERSON Eva Chu	
	REGIONAL BOARD N/A				PHONE ()	
SUBSTANCES INVOLVED	(1) NAME Diesel		QUANTITY LOST (GALLONS) 25 gal.		<input type="checkbox"/> UNKNOWN	
	(2) _____				<input type="checkbox"/> UNKNOWN	
DISCOVERY/ABATEMENT	DATE DISCOVERED 1/0/02/9/5		HOW DISCOVERED <input type="checkbox"/> TANK TEST <input type="checkbox"/> TANK REMOVAL <input checked="" type="checkbox"/> OTHER			
	DATE DISCHARGE BEGAN 1/0/02/9/5		<input type="checkbox"/> UNKNOWN			
	HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE 1/0/02/9/5		METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input type="checkbox"/> REMOVE CONTENTS <input type="checkbox"/> CLOSE TANK & REMOVE <input type="checkbox"/> REPAIR PIPING <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> CLOSE TANK & FILL IN PLACE <input checked="" type="checkbox"/> CHANGE PROCEDURE <input type="checkbox"/> REPLACE TANK <input type="checkbox"/> OTHER			
SOURCE/ CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> TANK LEAK <input type="checkbox"/> PIPING LEAK <input type="checkbox"/> UNKNOWN <input checked="" type="checkbox"/> OTHER		CAUSE(S) <input checked="" type="checkbox"/> OVERFILL <input type="checkbox"/> CORROSION <input type="checkbox"/> RUPTURE/FAILURE <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"/> NO ACTION TAKEN <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED <input type="checkbox"/> POLLUTION CHARACTERIZATION <input type="checkbox"/> LEAK BEING CONFIRMED <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT UNDERWAY <input type="checkbox"/> POST CLEANUP MONITORING IN PROGRESS <input type="checkbox"/> REMEDIATION PLAN <input checked="" type="checkbox"/> CASE CLOSED (CLEANUP COMPLETED OR UNNECESSARY) <input type="checkbox"/> CLEANUP UNDERWAY					
	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"/> VACUUM EXTRACT (VE) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input type="checkbox"/> TREATMENT AT HOOKUP (HU) <input type="checkbox"/> VENT SOIL (VS) <input type="checkbox"/> OTHER (OT) _____					
COMMENTS	~25 gal overflow from UST at time of filling. surface spill was cleaned using sorbent pads. Affected soil excavated and disposed (~16 cy)					

CLEARWATER
G R O U P, I N C.

ENVIRONMENTAL
PROTECTION
95 DEC 15 PM 1:40

December 13, 1995

Ms. Eva Chu
Alameda County Health Agency
Department of Environmental Health
1131 Harbor Bay Parkway, 2nd Floor
Alameda, CA 94502

Re: Diesel overflow spill at the San Luis Delta Mendota Water Authority

Dear Eva,

Enclosed is the information that you requested, which includes the Unauthorized Release Report and the stockpiled soil disposal information. Originally, 10 to 12 yards of stockpiled soil was estimated to be on site. However, during disposal of the stockpile, the actual volume was calculated to be 16 cubic yards. All of this soil was transported under a non-hazardous waste manifest and disposed of at Forward Landfill.

As we discussed, I need to receive a letter from your agency which states that no further action is required specifically regarding the diesel overflow spill. This letter is necessary for closure between C.L. Bryant's insurance company and the Bureau of Reclamation. Please address the letter to C.L. Bryant. Also, I would greatly appreciate being carbon copied on the letter.

Thank you very much for your cooperation. Please let me know if you need anything else pertaining to closure of the overflow cleanup.

Sincerely,
Clearwater Group, Inc.



Juniper Neill
Project Manager

Enclosures

cc. Herbert Ng, Bureau of Reclamation
Chuck Bryant, C.L. Bryant, Inc.



NON-HAZARDOUS WASTE MANIFEST WASTE TREATMENT AND DISPOSAL FACILITY

JOB ACCEPTANCE NO. 4679

TO BE COMPLETED BY THE GENERATOR

GENERATOR:
C.L. Bryant Inc.

MAILING ADDRESS:
P.O. Box 3343

CITY/STATE/ZIP:
Modesto, CA 95353

PHONE:
(209) 537-7600

CONTACT PERSON:
Mr. Chuck Bryant

SIGNATURE OF AUTHORIZED AGENT/TITLE: ** Chuck Bryant Sec. Treas* **DATE:** 11/1/95

REQUIRED PERSONAL PROTECTIVE EQUIPMENT:

GLOVES GOGGLES RESPIRATOR HARD HAT
 TY-VEK OTHER

SPECIAL HANDLING PROCEDURES:

As required

WASTE TYPE:

TREATMENT SOIL SLUDGE
 DISPOSAL SOIL NON-FRIABLE ASBESTOS
 CONSTRUCTION SOIL WOOD
 ASH
 OTHER

RECEIVING FACILITY:

FORWARD INC. LANDFILL
9999 SOUTH AUSTIN ROAD
MANTECA, CALIFORNIA 95336
(209) 982-4298 PHONE
(209) 982-1009 FAX

GENERATING FACILITY:

San Louis & Delta Mendota
Water Authority
Byron, California

TRANSPORTER
HAULER MUST COMPLETE

NAME: ~~Robinson Trucking~~ Robinson Trucking

ADDRESS: ~~801 Roth Rd~~ 801 Roth Rd

CITY/STATE/ZIP: French Camp CA

PHONE:

SIGNATURE OF AUTHORIZED AGENT OR DRIVER: ** Ronnie Liberman* **DATE:** 11.20.95

NOTES: 9A04161
1UB2029

TRUCK NUMBER: R107

END DUMP: **BOTTOM DUMP:** **TRANSFER:**

ROLL-OFF(S): **FLAT-BED:** **VAN:** **DRUMS:**

FACILITY REQUIREMENTS

FORWARD INC. LANDFILL

Forward shall have no obligation to accept the waste if weather or other conditions impair the safe and effective disposal of the waste or if the waste impairs the safe and effective operation of the Landfill. Forward shall use reasonable efforts to promptly notify Disposer of its inability to accept the waste for any reason. If Forward's refusal to accept the waste is based on weather or other site conditions, Forward shall notify the Disposer when site conditions are expected to change such that Forward will be able to accept the waste.

REMARKS:

FACILITY TICKET NUMBER:

SIGNATURE OF AUTHORIZED AGENT: *[Signature]* **DATE:** 11.20.95

DISPOSAL METHOD	TO BE COMPLETED BY FORWARD				
	DISPOSE	BIO	AERATE	STOCKPILE	OTHER
<input checked="" type="checkbox"/> SOIL					
<input type="checkbox"/> SLUDGE					
<input type="checkbox"/> NON-FRIABLE ASBESTOS					
<input type="checkbox"/> WOOD					
<input type="checkbox"/> ASH					
<input type="checkbox"/> OTHER					

CUBIC YARDS: 10-15 18

SCHEDULING MUST BE MADE PRIOR TO 4:00 P.M. THE DAY PRIOR TO EXPECTED ARRIVAL • ANY UNSCHEDULED LOADS ARE SUBJECT TO REFUSAL UPON ARRIVAL. ONGOING DAILY DELIVERIES MUST BE SCHEDULED WITH THE LANDFILL THE DAY BEFORE. TO SCHEDULE CALL (209) 982-4298



State of California
CONTRACTORS STATE LICENSE BOARD
ACTIVE LICENSE



License Number

617994

Entity

CORP

Business Name

VALENZUELA ENGINEERING INC

Classification(s)

A B C10

Expiration Date

04/30/97



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		FOR LOCAL AGENCY USE ONLY I HEREBY CERTIFY THAT I HAVE DISTRIBUTED THIS INFORMATION ACCORDING TO THE DISTRIBUTION SHOWN ON THE INSTRUCTION SHEET ON THE BACK PAGE OF THIS FORM.	
REPORT DATE 01/06/1994		CASE #		SIGNED: <i>[Signature]</i> DATE: 1/7/95	
REPORTED BY	NAME OF INDIVIDUAL FILING REPORT Brian Shinmoto		PHONE (209) 836-6261		SIGNATURE <i>[Signature]</i>
	REPRESENTING <input type="checkbox"/> LOCAL AGENCY <input checked="" type="checkbox"/> OTHER USBR		COMPANY OR AGENCY NAME U.S. Bureau of Reclamation		
	ADDRESS Mountain House & Kelso Road RR 1 Box 35 Byron, CA 94514-9614				
RESPONSIBLE PARTY	NAME U S BUREAU OF RECLAMATION <input type="checkbox"/> UNKNOWN		CONTACT PERSON Brian Shinmoto		PHONE (209) 836-6261
	ADDRESS Same				
SITE LOCATION	FACILITY NAME (IF APPLICABLE) U.S. Bureau of Reclamation		OPERATOR		PHONE ()
	ADDRESS				
	CROSS STREET				
IMPLEMENTING AGENCIES	LOCAL AGENCY Alameda County Dept. of Environmental Health		CONTACT PERSON Eva Chu		PHONE (510) 271-4530
	REGIONAL BOARD				
SUBSTANCES INVOLVED	(1) NAME unleaded gasoline		QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN		
	(2)		<input type="checkbox"/> UNKNOWN		
DISCOVERY/ABATEMENT	DATE DISCOVERED 01/02/1994		HOW DISCOVERED <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS <input type="checkbox"/> TANK TEST <input checked="" type="checkbox"/> TANK REMOVAL <input type="checkbox"/> OTHER		
	DATE DISCHARGE BEGAN <input checked="" type="checkbox"/> UNKNOWN		METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input type="checkbox"/> REMOVE CONTENTS <input checked="" type="checkbox"/> CLOSE TANK & REMOVE <input checked="" type="checkbox"/> REPAIR PIPING <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> CLOSE TANK & FILL IN PLACE <input type="checkbox"/> CHANGE PROCEDURE <input type="checkbox"/> REPLACE TANK <input type="checkbox"/> OTHER		
	HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE 01/02/1994				
SOURCE/ CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> TANK LEAK <input type="checkbox"/> UNKNOWN <input checked="" type="checkbox"/> PIPING LEAK <input type="checkbox"/> OTHER		CAUSE(S) <input type="checkbox"/> OVERFILL <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> SPILL <input type="checkbox"/> CORROSION <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> OTHER		
	CASE TYPE CHECK ONE ONLY <input checked="" type="checkbox"/> UNDETERMINED <input 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"/> NO ACTION TAKEN <input checked="" type="checkbox"/> PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED <input type="checkbox"/> POLLUTION CHARACTERIZATION <input type="checkbox"/> LEAK BEING CONFIRMED <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT UNDERWAY <input type="checkbox"/> POST CLEANUP MONITORING IN PROGRESS <input type="checkbox"/> REMEDIATION PLAN <input type="checkbox"/> CASE CLOSED (CLEANUP COMPLETED OR UNNECESSARY) <input type="checkbox"/> CLEANUP UNDERWAY				
	REMEDIAL ACTION CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS) <input type="checkbox"/> CAP SITE (CD) <input checked="" type="checkbox"/> EXCAVATE & TREAT (ET) <input type="checkbox"/> PUMP & TREAT GROUNDWATER (GT) <input type="checkbox"/> REPLACE SUPPLY (RS) <input type="checkbox"/> CONTAINMENT BARRIER (CB) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input type="checkbox"/> TREATMENT AT HOOKUP (HU) <input type="checkbox"/> VENT SOIL (VS) <input type="checkbox"/> VACUUM EXTRACT (VE) <input type="checkbox"/> OTHER (OT)				
COMMENTS	COMMENTS				



FORWARD INCORPORATED

P.O. BOX 6336 • STOCKTON, CA 95206
(209) 466-4482 • FAX (209) 465-0631

004679

BONADONNA'S ASPHALT
DAVID BONADONNA
3929 HUBBARD AVE.
STOCKTON, CA 95205

VEHICLE	ROLL OFF
ROBIN RT01	

SITE	TICKET	GRID
01	014783	D94
WEIGHMASTER		
C. CARBAJAL		
DATE IN	TIME IN	
11/20/95	13:39	
DATE OUT	TIME OUT	
11/20/95	13:58	

REFERENCE	ORIGIN
4679	C L BRYANT

Manual Gross Weight 81000 LB Inbound - Change ticket
 Manual Tare Weight 33020 LB
 Net Weight 47980 LB

QTY	DESCRIPTION	AMOUNT
23.99	Class II Soil by Ton per TONS. This is 623.74	
Received check 2867 for 520.00 (cc)		

MANIFEST # 41839
 TRUCK # 9A04161
 P.O. # NONE
 TRAILER # 1VB2029

Schedule 24 hours in advance directly with the landbill.
 Call (209)982-4298 to schedule.
 Drive Safely!!

SIGNATURE X

NET AMOUNT
TENDERED
CHANGE



ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY
DAVID J. KEARS, Agency Director

RAFAT A. SHAHID, Assistant Agency Director

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

StID 674

September 29, 1994

Mr. Brian Shinmoto
Bureau of Reclamation
Route 1 Box 35
Byron, CA 94514-9614

RE: QMR for Mountain House and Kelso Rd, Tracy, CA 95376

Dear Mr. Shinmoto:

I have completed review of Mr. Herbert Ng's summary letter documenting recent events at the above referenced site. At this time, both gasoline and waste oil tank pits have been backfilled with clean soil. Investigations to delineate the extent of soil contamination at the gasoline pit will continue when the remaining USTs are removed, which is anticipated within six months.

Monitoring well MW7, located downgradient from the former gasoline pit, was completed in June 1994. A technical well installation report should be submitted to this office for review. This report should be submitted under the seal of a registered professional engineer or geologist. Also, a quarterly monitoring schedule should be established for this well. Groundwater should be analyzed for TPH-G, TPH-D, BTEX, and soluble lead. The next sampling event should be in September or October 1994. Quarterly reports are due 60 days upon completion of field work.

If you have any questions, I can be reached at (510) 567-6762.

eva chu
Hazardous Materials Specialist

cc: files

11:20-205-245

248-201 x2

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200
Oakland, CA 94621
(415) 271-4320

Hazardous Materials Division Inspection Form

Site ID# _____ Site Name Bureau of Reclamation Today's Date 8/24/94

Site Address Kelso Rd + Mountain House Rd EPA ID# _____

City _____ Zip 94 Phone _____

MAX Amt. Stored > 500lbs/55g/200cf? Y N
Hazardous Waste generated per month? _____

Inspection Categories:

- I. Haz. Mat/Waste GENERATOR/TRANSPORTER
- II. Business Plans, Acute Hazardous Materials
- III. Underground Tanks overexcavation

The marked items represent violations of the Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

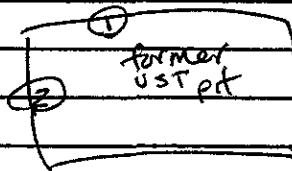
I.A. GENERATOR (Title 22)

- | | | | |
|-------------------|----------------|-----------------------------|---------|
| ___ | 1. Waste ID | * 66471 | |
| ___ | 2. EPA ID | 66472 | |
| ___ | 3. > 90 days | 66508 | |
| ___ | 4. Label dates | 66508 | |
| ___ | 5. Biennial | 66493 | |
| <hr/> | | | |
| Manifest | ___ | 6. Records | 66492 |
| | ___ | 7. Correct | 66484 |
| | ___ | 8. Copy sent | 66492 |
| | ___ | 9. Exception | 66484 |
| | ___ | 10. Copies Rec'd | 66492 |
| <hr/> | | | |
| Misc. | ___ | 11. Treatment | 66371 |
| | ___ | 12. On-site Disp. (H.S.&C.) | 26189.5 |
| | ___ | 13. Ex Haz. Waste | 66570 |
| <hr/> | | | |
| Prevention | ___ | 14. Communications | 67121 |
| | ___ | 15. Aisle Space | 67124 |
| | ___ | 16. Local Authority | 67126 |
| | ___ | 17. Maintenance | 67120 |
| | ___ | 18. Training | 67105 |
| <hr/> | | | |
| Contingency | ___ | 19. Prepared | 67140 |
| | ___ | 20. Name List | 67141 |
| | ___ | 21. Copies | 67141 |
| | ___ | 22. Emg. Coord. Trng. | 67144 |
| <hr/> | | | |
| Containers, Tanks | ___ | 23. Condition | 67241 |
| | ___ | 24. Compatibility | 67242 |
| | ___ | 25. Maintenance | 67243 |
| | ___ | 26. Inspection | 67244 |
| | ___ | 27. Buffer Zone | 67246 |
| | ___ | 28. Tank Inspection | 67259 |
| | ___ | 29. Containment | 67245 |
| | ___ | 30. Safe Storage | 67261 |
| | ___ | 31. Freeboard | 67257 |

Comments:

Groundwater sample collected at 4' bgs
Analyze for TPH-G and BTEX

Soil samples collected at ① 12' depth - stained
w/ mod HC odor in clayey sand (aged odor)
② at 13' clay sand, strong
HC odor - newer release
may be due to gasoline tank
still in place



GAS UST LEASE Building Analyze for TPH-G + BTEX

I.B. TRANSPORTER (Title 22)

- | | | | |
|----------|---------------------------|------------------|-------|
| ___ | 32. Applic./Insurance | 66428 | |
| ___ | 33. Comp. Cert./CHP Insp. | 66448 | |
| ___ | 34. Containers | 66465 | |
| <hr/> | | | |
| Manifest | ___ | 35. Vehicles | 66465 |
| | ___ | 36. EPA ID #s | 66531 |
| | ___ | 37. Correct | 66541 |
| | ___ | 38. HW Delivery | 66543 |
| | ___ | 39. Records | 66544 |
| <hr/> | | | |
| Cont's | ___ | 40. Name/ Covers | 66545 |
| | ___ | 41. Recyclables | 66800 |

And initiate quarterly sampling of monitoring well.
1st sampling, analyze for TPH-G, TPH-D, BTEX and
total soluble lead

Rev 6/88

Contact: Cattle Engineering
Title: Engineer
Signature: [Signature]

Inspector: _____
Signature: [Signature]



United States Department of the Interior

BUREAU OF RECLAMATION

Mid-Pacific Region

Tracy Office (CVP)

Route 1 Box 35

Byron, California 94514-9614

IN REPLY
REFER TO:

DAO-435

ENV-5.00

JUN 13 1994



94 JUN 14 PM 2:22

ALCO
HAZMAT

Ms. Eva Chu
Hazardous Material Specialist
Alameda County Health Agency
80 Swan Way Room 200
Oakland, California 94621

Subject: Underground Storage Tank Leak/Contamination Site Report -- Tracy
Office Gasoline and Oil Tank Removal -- Delta Division -- Central
Valley Project (CVP)

Dear Ms. Chu:

Enclosed is the subject report.

If there are any questions, please contact Brian Shinmoto of my staff at (209)
836-6261.

Sincerely

Robert H. Edwards
Acting Area Manager

Enclosure

cc: DAO-435 Brian Shinmoto

StID 674

May 31, 1994

Mr. Brian Shinmoto
Bureau of Reclamation
Route 1 Box 35
Bryon, CA 94514-9614

**Subject: Workplan Approval for Mountain House and Kelso Roads,
Tracy, CA 95376**

Dear Mr. Shinmoto:

I have completed review of Cottle Engineering's April 1994 Preliminary Site Assessment and Workplan for Installation of Monitoring Well for the above referenced site. The proposal to overexcavate the former gasoline tank pit and to install one downgradient monitoring well is acceptable. Please adhere to the following recommendations:

1. The Bay Area Air Quality Management District must be notified if you plan to aerate gasoline contaminated soil. A permit may be required for aeration.
2. Field work will be conducted by experienced personnel from the Bureau of Reclamation. Therefore, all soil and groundwater samples collected for analysis must be picked up onsite, on the same day, by a staff of the state certified laboratory you intend to use.

Field work should commence within 45 days of the date of this letter, or **by July 18, 1994.**

In addition, I would like to receive copies of all environmental assessment reports of work performed to date for this site. This should include investigations of solvent, waste oil, and pesticide use, among others, which may have impacted soil and/or groundwater.

Enclosed is an Underground Leak Report which must be completed and returned to this office **by June 15, 1994.**

eva chu
Hazardous Materials Specialist

enclosure

cc: files (reclamat.3)

MEMORANDUM

DATE: March 25, 1993

TO: Jim Trolan

From: Tom Peacock

SUBJ: Funds owed to our District Attorney's Office

The question has been posed by Melody Foreman of our District Attorney's Office of when she will get any funds transferred to her for the Local Oversight Program. The correct amount to transfer for work done through 30 June 1992, which has already been collected, is:

\$11,699.35 for work done by CC, MT, and GJ.

The total which has been billed to the State Water Resources Control Board through 31 Dec 92 is

\$16,381.92

The checks for this amount have not been received from the SWRCB yet and are expected some time this month.

CC: Ed Howell
Gil Jensen
Melody Foreman
Rafat Shahid

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT			1. CONTRACT ID CODE	PAGE OF PAGES 1 1
2. AMENDMENT/MODIFICATION NO. 001	3. EFFECTIVE DATE 09/21/94	4. REQUISITION/PURCHASE REQ. NO. HAZMAT	5. PROJECT NO. (If applicable) 220	
6. ISSUED BY U.S. BUREAU OF RECLAMATION RR 1 BOX 35 BYRON CA 94514-9614		7. ADMINISTERED BY (If other than Item 8) 94 SEP 27 11:15	CODE	

8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) STATE WATER RESOURCES CONTROL BOARD DIVISION OF CLEAN WATER PROGRAMS 80 SWAN WAY, ROOM 200 OAKLAND, CA 94621	(v)	9A. AMENDMENT OF SOLICITATION NO.
		9B. DATED (SEE ITEM 11)
	x	10A. MODIFICATION OF CONTRACT/ORDER NO. 1425-4-PG-22-01210
		10B. DATED (SEE ITEM 13) 03/29/94
CODE	FACILITY CODE	

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers is extended, is not extended.

Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods:
 (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)
 3X0 0214 8846 322 00 0 0 2200000 255Z -500.00


13. THIS ITEM APPLIES ONLY TO MODIFICATIONS OF CONTRACTS/ORDERS, IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

(v)	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
x	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
	D. OTHER (Specify type of modification and authority)

E. IMPORTANT: Contractor is not, is required to sign this document and return _____ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)
 MODIFICATION NO. 1 TO PURCHASE ORDER NUMBER 1425-4-PG-22-01210
 1. Above purchase order is hereby cancelled in its entirety.

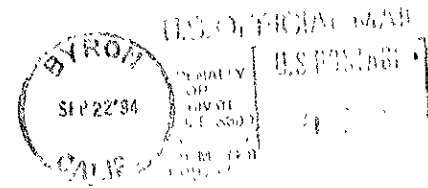
Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) DORIS ECKHARDT CONTRACTING OFFICER	
15B. CONTRACTOR/OFFEROR (Signature of person authorized to sign)	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA BY  (Signature of Contracting Officer)	16C. DATE SIGNED 9-21-94

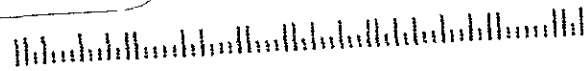
**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF RECLAMATION**

DELTA AREA OFFICE (CVP)
RR 1, Box 35, Byron, CA 94514-9614
OFFICIAL BUSINESS

Paul Smith



94621-1439 06





United States Department of the Interior

BUREAU OF RECLAMATION

Mid-Pacific Region
Tracy Office (CVP)
Route 1 Box 35
Byron, California 94514-9614



IN REPLY
REFER TO

DAO-435
ENV-5.00

MAY 19 1994

HAZMAT
MAY 20 AM 11:56

Ms. Eva Chu
Hazardous Material Specialist
Alameda County Health Agency
80 Swan Way, Room 200
Oakland, California 94621

Subject: Preliminary Site Assessment -- Tracy Gas and Oil Tank Removal --
Delta Division -- Central Valley Project (CVP) CA

Enclosed is the Preliminary Site Assessment which you requested by your letter of March 2, 1994. Please approve so that field work may begin.

If there are any questions, please contact Mr. Brian Shinmoto of my staff at (209) 836-6261.

Sincerely

for Robert H. Edwards
Acting Area Manager

Enclosures

cc: Brian Shinmoto

- ① Was VCR filed?
- ② Check location w/ respect to US To
- ③ Bring copies of other reports
- ④ Maybe no excavation now, just install MW with of pit. If excavation is required (if Gas is impacted), can be done when dead tank is removed.

ALAMEDA COUNTY
HEALTH CARE SERVICES
AGENCY

DAVID J. KEARS, Agency Director



11-20-
248-

RAFAT A. SHAHID, ASST. AGENCY DIRECTOR

DEPARTMENT OF ENVIRONMENTAL HEALTH
State Water Resources Control Board
Division of Clean Water Programs
UST Local Oversight Program
80 Swan Way, Rm 200
Oakland, CA 94621
(510) 271-4530

StID 674

May 4, 1994

Mr. Brian Shinmoto
Bureau of Reclamation
Route 1 Box 35
Byron, CA 94514-9614

**Subject: Time Extension for PSA for Mountain House and Kelso Rd,
Tracy, CA 95376**

Dear Mr. Shinmoto:

I received a letter from Mr. Robert Edwards again requesting a two week extension for the submittal of a Preliminary Site Assessment for the above referenced site. The extension is granted and the required PSA is due by **May 22, 1994**.

If you have any questions, I can be reached at (510) 271-4530.

Sincerely,

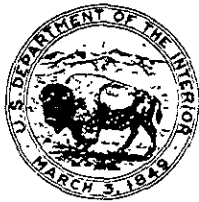
A handwritten signature in cursive script, appearing to read 'Eva Chu'.

eva chu
Hazardous Materials Specialist

cc: files

reclamat.3

CONFIRMATION - Previously Sent by Electronic Mail



United States Department of the Interior



BUREAU OF RECLAMATION
MID-PACIFIC REGION
TRACY OFFICE (CVP)
ROUTE 1 BOX 35
BYRON CALIFORNIA 94514-9614

IN REPLY
REFER TO:

DAO-435
ENV-5.00

MAY - 3 1994

Ms. Eva Chu
Hazardous Material Specialist
Alameda County Health Agency
80 Swan Way Room 200
Oakland CA 94621

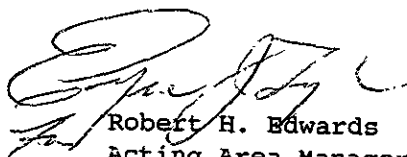
Subject: Preliminary Site Assessment (PSA) - Time Extension -- Tracy Gasoline
and Oil Tank Removal -- Delta Division -- Central Valley Project
(CVP)

Due to contractual circumstances beyond our control, we must request a second
time extension for the completion of the PSA. We ask that the deadline be
extended two weeks to Thursday May 19, 1994.

As per your earlier correspondence, we request a letter indicating that this
extension has indeed been granted. If it has not, please contact us
immediately.

If there are any questions, please contact Brian Shinmoto of my staff at
(209) 836-6261.

Sincerely,



Robert H. Edwards
Acting Area Manager



United States Department of the Interior

BUREAU OF RECLAMATION
MID-PACIFIC REGION
TRACY OFFICE (CVP)
ROUTE 1 BOX 35
BYRON CALIFORNIA 94514-9614

IN REPLY
REFER TO:
DAO-435
ENV-5.00

APR 11 1994

TAKE
PRIDE IN
AMERICA
94 APR 11 3:07

Ms. Eva Chu
Hazardous Material Specialist
Alameda County Health Agency
80 Swan Way Room 200
Oakland CA 94621

Subject: Preliminary Site Assessment (PSA) - Time Extension -- Tracy Gasoline
and Oil Tank Removal -- Delta Division -- Central Valley Project
(CVP)

On April 5, 1994, our office was contacted by Mr. Jack Forsyth of Cottle
Industries regarding the PSA he is in the process of writing for the Bureau of
Reclamation. He indicated he would be requesting a two week extension from
your office. This would extend the deadline to Monday, May 2, 1994.

As per your earlier correspondence, we request a letter indicating that this
extension has indeed been granted. If it has not, please contact us
immediately. If there are any questions, please contact Mr. Brian Shinmoto of
my staff at (209) 836-6261.

Sincerely,

Robert H. Edwards
Project Superintendent

PURCHASE ORDER TERMS AND CONDITIONS

52.252.2 CLAUSES INCORPORATED BY REFERENCE (Apr 84).—This contract incorporates the following clauses by reference with the same force and effect as if they were given in full text. Upon request, the Contracting Officer will make their full text available.

FEDERAL ACQUISITION REGULATION (48 CFR CHAPTER 1) CLAUSES

- 52.203-1 Officials Not to Benefit (Apr 84)
- 52.203-3 Gratuities (Apr 84)
- 52.203-5 Covenant Against Contingent Fees (Apr 84)
- 52.212-9 Variation in Quantity (Apr 84)
(In the preceding clause, the permissible variations are stated in the schedule)
- 52.222-3 Convict Labor (Apr 84)

- 52.222-4 Contract Work Hours and Safety Standards Act—Overtime Compensation—General (Apr 84)
- 52.222-26 Equal Opportunity (Apr 84)
- 52.222-36 Affirmative Action for Handicapped Workers (Apr 84)
- 52.225-3 Buy American Act — Supplies (Apr 84)
- 52.232-1 Payments (Apr 84)
- 52.232-8 Discounts for Prompt Payment (Apr 84)
- 52.233-1 Disputes (Apr 84)
(With Alternate 1)
- 52.243-1 Changes — Fixed Price (Apr 84)
- 52.249-1 Termination for Convenience of the Government (Fixed Price) (Short Form) (Apr 84)

RECLAMATION CLAUSES

INSPECTION AND ACCEPTANCE-PURCHASE ORDERS -- RECLAMATION (APR 1984)

- (a) Inspection and acceptance shall be at destination, unless otherwise prescribed. Risk of loss shall be on the Contractor until delivery and acceptance, unless loss results from Government negligence.
- (b) When nonconforming supplies are rejected at destination, they shall be removed by the Contractor at its expense promptly after notice of rejection.
- (c) When nonconforming supplies or services are accepted, the Contractor is liable to the Government for an equitable adjustment in the contract price.

PRICE WARRANTY-PURCHASE ORDERS -- RECLAMATION (APR 1984)

The Contractor warrants that the prices set forth herein are not in excess of its sales prices to its most favored customer for comparable quantities and under comparable conditions, including all discounts, rebates and similar reductions. For breach of this warranty, the Contractor is liable to the Government for an equitable adjustment in the contract price.

WARRANTIES OF WORK-PURCHASE ORDERS -- RECLAMATION (APR 1984)

The Contractor agrees that, for all supplies or services furnished under this contract, it shall provide the Government with a copy of (a) the commercial warranties thereon against defects that the Contractor receives from its suppliers or subcontractors, and (b) the most favorable warranties thereon against defects that the Contractor gives to any customer therefor.

INTEREST ON OVERDUE PAYMENTS -- RECLAMATION (APR 1984)

- (a) The Prompt Payment Act, Public Law 97-177 (96 Stat. 85, 31 USC 1801) is applicable to payments under this order and requires the payment to contractors of interest on overdue payments and improperly taken discounts.
- (b) Determinations of interest due will be made in accordance with the provisions of the Prompt Payment Act and Office of Management and Budget Circular A-125.

PAYMENT DUE DATE -- RECLAMATION (APR 1984)

- (a) Payments under this order will be due on the 30th calendar day after the later of:
 - (1) The date of actual receipt of a proper invoice in the office designated to receive the invoice, or
 - (2) The date the supplies or services are accepted by the Government.
- (b) For the purpose of determining the due date for payment and for no other purpose, acceptance will be deemed to occur on the 10th calendar day after the date of delivery of the supplies or services in accordance with the terms of the order.
- (c) If the supplies or services are rejected for failure to conform to the technical requirements of the order, or for damage in transit or otherwise, the provisions in paragraph (b) of this clause will apply to the new delivery of replacement supplies or services.
- (d) The date of the check issued in payment shall be considered to be the date payment is made.

INVOICE REQUIREMENTS -- RECLAMATION (APR 1984)

Invoices shall be submitted in an original only, unless otherwise specified, to the Government office designated in this order to receive invoices. To constitute a proper invoice, the invoice must include the following information and/or attached documentation:

- (a) Name of the business concern and invoice date.
 - (b) Order number, or other authorization for delivery of supplies or services.
 - (c) Item number(s), description, price, quantity, and extended totals of supplies and services actually delivered or rendered.
 - (d) Shipment number and date of shipment.
 - (e) If prepaid parcel post charges are billed, the gross weight and shipping point.
 - (f) Bill of lading number and weight of shipment for shipments on Government bills of lading.
 - (g) Any special shipment or payment terms.
 - (h) Name and address to which payment is to be sent.
 - (i) Name (where practicable), title, phone number, and complete mailing address of responsible official to be notified in event of defective invoice.
- Also, accompanying documentation or information as required by the order.

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF RECLAMATION

ORDER FOR SUPPLIES OF SERVICES
SCHEDULE - CONTINUATION

PAGE NO.

2

IMPORTANT: Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER 03/29/94	CONTRACT NO. (If any)	1425	ORDER NO. 4 PG 22 01210
---------------------------	-----------------------	------	----------------------------------

ITEM NO. (A)	SUPPLIES OR SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
(Cont'd).	<p>of the supplies or services listed in this order so that a receiving report can be prepared.</p> <p>INVOICES The contractor's invoices must be submitted before payment can be made. The contractor will be paid on the basis of the invoice, which must show parts supplied, unit prices thereof, hours for labor, and the hourly rate.</p> <p>ATTENTION VENDOR Contractor is advised that payments will be much more easily processed if the purchase order is clearly indicated on invoices. Any invoice that does not contain the purchase order number may be returned to the contractor without payment. If there is a question regarding payment of your invoice, the toll free number is 1-800-347-2623.</p>					

TOTAL CARRIED FORWARD TO FIRST PAGE (ITEM 17(H))

0.00

LOP - RECORD CHANGE REQUEST FORM

printed:
03/01/94

Mark Out What Needs Changing and Hand to LOP Data Entry
(Name/Address changes go to Annual Programs Data Entry)

AGENCY # : 10000 SOURCE OF FUNDS: f SUBSTANCE: 8006619
 StID : 674
 SITE NAME: U S Bureau of Reclamation DATE REPORTED : 02/28/94
 ADDRESS : Mt. House & Kelso DATE CONFIRMED: 02/11/92
 CITY/ZIP : Tracy 95376 MULTIPLE RPs : n

SITE STATUS

CASE TYPE: s CONTRACT STATUS: 4 PRIOR CODE:2 EMERGENCY RESP:
 RP SEARCH: s DATE COMPLETED: 02/28/94
 PRELIMINARY ASMNT: DATE UNDERWAY: DATE COMPLETED:
 REM INVESTIGATION: DATE UNDERWAY: DATE COMPLETED:
 REMEDIAL ACTION: DATE UNDERWAY: DATE COMPLETED:
 POST REMED ACT MON: DATE UNDERWAY: DATE COMPLETED:
 ENFORCEMENT ACTION TYPE: 1 DATE ENFORCEMENT ACTION TAKEN: 02/28/94
 LUFT FIELD MANUAL CONSID: 2
 CASE CLOSED: DATE CASE CLOSED:
 DATE EXCAVATION STARTED : REMEDIAL ACTIONS TAKEN:

RESPONSIBLE PARTY INFORMATION

RP#1-CONTACT NAME: Attn. Herb Ng
 COMPANY NAME: U. S. Bureau Of Reclamation
 ADDRESS: R R - 1, Box 35
 CITY/STATE: Byron, C A 94514-9614

INSPECTOR VERIFICATION:

NAME _____ SIGNATURE _____ DATE _____

DATA ENTRY INPUT:

Name/Address Changes Only			Case Progress Changes	
ANNPMS _____	LOP _____	DATE _____	LOP _____	DATE _____

ALAMEDA COUNTY - ENVIRONMENTAL HEALTH - HAZARDOUS MATERIALS DIVISION

MEMORANDUM

DATE: March 1, 1994
TO: LOP staff
FROM: Scott Seery
SUBJ: Meeting to follow-up on status of EXXON-lead investigations

At 10:00 AM on Tuesday, March 8, 1994, I will be meeting with Ms. Marla Guensler of EXXON Corporation to discuss the status of EXXON-lead sites in Alameda County. This meeting is in follow-up to those held during March and September 1993. Following is a minimum list of sites to be discussed. Each were previously covered during both prior meetings.

Please become aware of the status of each site within your districts and either: 1) plan on attending the meeting; or, 2) provide a brief summary regarding the status of the site(s), any concerns you may have, additional work needed, etc., etc. I apologize for the short notice on this.

<u>STID</u>	<u>SITE ADDRESS</u>	<u>SPECIALIST</u>
3601	1725 Park Street, Alameda	JMS
4103	7840 Amador Valley Blvd., Dublin	EC
2692	1175 Catalina Drive, Livermore	EC
515	3450 35th Ave., Oakland	SH
1039	2225 Telegraph Ave., Oakland	JE
1068	6630 E. 12th Street, Oakland	TP
136	720 High Street, Oakland	BC
1127	8008 Mountain Blvd., Oakland	JMS

Attached is a copy of the memo documenting the results of September's meeting. Please review your cases in context with the summaries presented herein.

I need your input prior to next Tuesday's meeting. Thanks.

ALAMEDA COUNTY
HEALTH CARE SERVICES
AGENCY

DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, ASST. AGENCY DIRECTOR

StID 674

March 2, 1994

Mr. Herb Ng
U.S. Bureau of Reclamation
RR 1, Box 35
Byron, CA 94514-9614

DEPARTMENT OF ENVIRONMENTAL HEALTH
State Water Resources Control Board
Division of Clean Water Programs
UST Local Oversight Program
80 Swan Way, Rm 200
Oakland, CA 94621
(510) 271-4530

Subject: Groundwater Investigation at Mountainhouse & Kelso Rds.

Dear Mr. Ng:

I have completed review of laboratory analysis reports of soil samples collected from beneath the two underground storage tanks (USTs) removed from the above referenced site on February 18, 1994. The gasoline tank pit exhibited up to 130 ppm TPH-G. The waste oil pit did not exhibit levels TPH-G, TPH-D, BTEX, chlorinated hydrocarbons or semi-volatile compounds.

At this time the waste oil pit may be backfilled with clean fill. The overburden removed from this pit exhibited up to 124 ppm TOG. This soil should be disposed at an approved facility, or must be bioremediated to acceptable levels before it can be re-used onsite. Provide copies of bills of lading if taken offsite for disposal.

The gasoline pit may be over-excavated to remove the remaining contaminated soil to the extent possible, or it may be backfilled with clean fill. The overburden should be treated as above.

At this time additional investigations are required to determine the extent of soil and groundwater contamination resulting from the use of the gasoline UST. Such an investigation shall be in the form of a **Preliminary Site Assessment**, or PSA. The information gathered by the PSA will be used to determine an appropriate course of action to remediate the site, if deemed necessary. The PSA must be conducted in accordance with the RWQCB Staff Recommendations for the Initial Evaluation and Investigation of Underground Tanks, and Article 11 of Title 23, California Code of Regulations. The major elements of such an investigation are summarized in the attached Appendix A.

The PSA proposal is due **within 45 days** of the date of this letter. Once the proposal is approved, field work should commence within 60 days. A report must be submitted within 45 days after the completion of this phase of work at the site. Subsequent reports are to be submitted quarterly until this site qualifies for RWQCB "sign off." All reports and proposals must be submitted under seal of a California Registered Geologist, Certified Engineering Geologist, or Registered Civil Engineer.

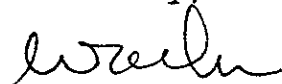
Herb Ng
re: PSA for Mountain House and Kelso Rds.
March 1, 1994

Page 2

Please be advised that this is a formal request for technical reports pursuant to Title 23, CCR, Section 2722(c). Any extensions of the stated deadlines, or modifications of the required tasks, must be confirmed in writing by this agency.

Should you have any questions about the content of this letter, please contact me at (510) 271-4530.

Sincerely,



eva chu
Hazardous Materials Specialist

enclosure

cc: files

reclamat.1

white -env.health
yellow -facility
pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200
Oakland, CA 94621
(415) 271-4320

Hazardous Materials Inspection Form

II, III

Site ID # _____ Site Name Bureau of Reclamation Today's Date 2/8/94
16800 Kelso Road

Site Address Kelso and Mountain House Rds

City Tracy, Ca Zip 94 Phone _____

MAX AMT stored > 500 lbs, 55 gal., 200 cft.?

Inspection Categories:

- I. Haz. Mat/Waste GENERATOR/TRANSPORTER
- II. Business Plans, Acute Hazardous Materials
- III. Underground Tanks

* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

II.A BUSINESS PLANS (Title 19)

- 1. Immediate Reporting 2703
- 2. Bus. Plan Stas 25503(b)
- 3. RR Cars > 30 days 25503.7
- 4. Inventory Information 25504(a)
- 5. Inventory Complete 2730
- 6. Emergency Response 25504(b)
- 7. Training 25504(c)
- 8. Deficiency 25505(a)
- 9. Modification 25505(b)

II.B ACUTELY HAZ. MATLS

- 10. Registration Form Filed 25533(a)
- 11. Form Complete 25533(b)
- 12. RMPP Contents 25534(c)
- 13. Implement Sch. Req'd? (Y/N)
- 14. Offsite Conseq. Assess. 25524(c)
- 15. Probable Risk Assessment 25534(d)
- 16. Persons Responsible 25534(a)
- 17. Certification 25534(f)
- 18. Exemption Request? (Y/N) 25536(b)
- 19. Trade Secret Requested? 25538

III. UNDERGROUND TANKS (Title 23)

- | | |
|-------------------------------|---|
| General | <input type="checkbox"/> 1. Permit Application 25284 (H&S) |
| | <input type="checkbox"/> 2. Pipeline Leak Detection 25292 (H&S) |
| | <input type="checkbox"/> 3. Records Maintenance 2712 |
| | <input type="checkbox"/> 4. Release Report 2651 |
| | <input type="checkbox"/> 5. Closure Plans 2670 |
| Monitoring for Existing Tanks | 6. Method |
| | 1) Monthly Test |
| | 2) Daily Vadose
Semi-annual groundwater
One time soils |
| | 3) Daily Vadose
One time soils
Annual tank test |
| | 4) Monthly Gndwater
One time soils |
| | 5) Daily Inventory
Annual tank testing
Cont pipe leak det
Vadose/gndwater mon. |
| | 6) Daily Inventory
Annual tank testing
Cont pipe leak det |
| | 7) Weekly Tank Gauge
Annual tank testing |
| | 8) Annual Tank Testing
Daily Inventory |
| | 9) Other _____ |
| New Tanks | <input type="checkbox"/> 7. Precs Tank Test 2643
Date: _____ |
| | <input type="checkbox"/> 8. Inventory Rec. 2644 |
| | <input type="checkbox"/> 9. Soil Testing . 2646 |
| | <input type="checkbox"/> 10. Ground Water. 2647 |
| | <input type="checkbox"/> 11. Monitor Plan 2632 |
| | <input type="checkbox"/> 12. Access. Secure 2634 |
| | <input type="checkbox"/> 13. Plans Submit 2711
Date: _____ |
| | <input type="checkbox"/> 14. As Built 2635
Date: _____ |

Comments:

dispenser → Green stained clayey sand w/
moderate odor collected at 12' depth

← sandy clay - brown yr odor; soil
collected at 11' depth

Gas. # → soil very moist - could be rain water
which was in pit.

lots of sand backfill in pit.

Sample stockpiled soil for proper disposal

Fill line should be removed when remaining tanks
are removed.

Analyze soil samples for TPH-6, BTEX and
total lead.


Rev 6/88

Contact: _____

Title: Supervisor

Signature: 

Inspector: Evachy

Signature: 

II, III

white -env.health
 yellow -facility
 pink -files

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 Oakland, CA 94621
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Hazardous Materials Inspection Form

II, III

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- ___ 8. Deficiency 25505(a)
- ___ 9. Modification 25505(b)

Site Address Kelso Rd + Mountain House
 City Tracy ⁹⁵³⁷⁶ Zip 94 Phone _____

II.B ACUTELY HAZ. MATLS

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Inspection Categories:

- ___ I. Haz. Mat/Waste GENERATOR/TRANSPORTER
- ___ II. Business Plans, Acute Hazardous Materials
- III. Underground Tanks Removal

___ MAX AMT stored > 500 lbs, 55 gal., 200 cft.?

* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

Comments:

O₂ 8% - LEL 2.2%

Ericsson - handler

III. UNDERGROUND TANKS (Title 23)

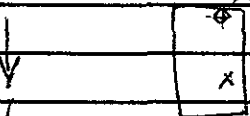
- General**
- ___ 1. Permit Application 25284 (H&S)
 - ___ 2. Pipeline Leak Detection 25292 (H&S)
 - ___ 3. Records Maintenance 2712
 - ___ 4. Release Report 2651
 - ___ 5. Closure Plans 2670

2K gasoline, UST - Tar wrapped - intact -
No obvious holes
Pit had some water - probably rain water.

- Monitoring for Existing Tanks**
- ___ 6. Method
 - 1) Monthly Test
 - 2) Daily Vadose Semi-annual groundwater One time soils
 - 3) Daily Vadose One time soils Annual tank test
 - 4) Monthly Groundwater One time soils
 - 5) Daily Inventory Annual tank testing Cont pipe leak det Vadose/groundwater man.
 - 6) Daily Inventory Annual tank testing Cont pipe leak det
 - 7) Weekly Tank Gauge Annual tank testing
 - 8) Annual Tank Testing Daily Inventory
 - 9) Other _____

O₂ 6% LEL 0%
1K Fiberglass W.O. tank - pea gravel fill
No cracks or holes - tie down to concrete pad

- ___ 7. Precip Tank Test 2643
 Date: _____
- ___ 8. Inventory Rec. 2644
- ___ 9. Soil Testing 2646
- ___ 10. Ground Water 2647

MW soil sample:


- New Tanks**
- ___ 11. Monitor Plan 2632
 - ___ 12. Access, Secure 2634
 - ___ 13. Plans Submit 2711
 Date: _____
 - ___ 14. As Built 2635
 Date: _____

Unable to collect 2nd soil sample
Original excavation was too large, lots of pea gravel fill which would undermine road and building -
Collect water sample from MW. Analyze for TPH-G, TPH-D, BTEX, TOG, Cl-HC and semi-volatiles, and 5 metals (Cd, Cr, Pb, Ni, Zn)
only 2" water in well - maybe condensation

Rev 6/88

Contact: _____

Title: Supervisor
 Signature: [Signature]

Inspector: [Signature]
 Signature: [Signature]

white -env.health
 yellow -facility
 pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

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* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

Comments:

O₂ 5.0% - LEL 2.2%

Erickson - handle


III. UNDERGROUND TANKS (Title 23)

- General**
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2K gasoline UST - Tar wrapped - intact -
No obvious holes
Pit had some water - probably rain water.

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- ___ 6. Method
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 - 3) Daily Vadose One time soils Annual tank test
 - 4) Monthly Groundwater One time soils
 - 5) Daily inventory Annual tank testing Cont pipe leak det Vadose/groundwater mon.
 - 6) Daily inventory Annual tank testing Cont pipe leak det
 - 7) Weekly Tank Gauge Annual tank testing
 - 8) Annual Tank Testing Daily inventory
 - 9) Other

O₂ 6% LEL 0%
1K Fiberglass W.O. tank - per gravel fill.
No cracks or holes - tie down to concrete pad

MW soil sample:

dry clay sand - NO odor collected at 11'

- ___ 7. Precis Tank Test Date: 2643
- ___ 8. Inventory Rec. 2644
- ___ 9. Soil Testing . 2646
- ___ 10. Ground Water. 2647

Unable to collect 2nd soil sample.
Original excavation was too large, lots of pea gravel fill which would undermine road and building.
Water sample from MW. Analyze for TPH-G, TPH-D, BTEX, TOG, Cl-HC and semi volatiles, and 5 metals (Cd, Cr, Pb, Ni, Zn)

- New Tanks**
- ___ 11. Monitor Plan 2632
 - ___ 12. Access. Secure 2634
 - ___ 13. Plans Submit Date: 2711
 - ___ 14. As Built Date: 2635

only 2" water in well - maybe condensation II, III

Rev 6/88

Contact: _____

Title: Supervisor
 Signature: [Signature]

Inspector: Erickson
 Signature: [Signature]

PRODUCER

M.A. Hays Company
3700 Nevin Avenue
Richmond, CA 94805

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

INSURED

Cottle Engineering
P.O. Box 163
Antioch, CA 94509

COMPANY LETTER	A
COMPANY LETTER	B
COMPANY LETTER	C Republic Indemnity Insurance
COMPANY LETTER	D
COMPANY LETTER	E

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS														
	GENERAL LIABILITY				<table border="1"> <tr><td>BODILY INJURY OCC.</td><td>\$</td></tr> <tr><td>BODILY INJURY AGG</td><td>\$</td></tr> <tr><td>PROPERTY DAMAGE OCC</td><td>\$</td></tr> <tr><td>PROPERTY DAMAGE AGG</td><td>\$</td></tr> <tr><td>BI & PD COMBINED OCC.</td><td>\$</td></tr> <tr><td>BI & PD COMBINED AGG</td><td>\$</td></tr> <tr><td>PERSONAL INJURY AGG.</td><td>\$</td></tr> </table>	BODILY INJURY OCC.	\$	BODILY INJURY AGG	\$	PROPERTY DAMAGE OCC	\$	PROPERTY DAMAGE AGG	\$	BI & PD COMBINED OCC.	\$	BI & PD COMBINED AGG	\$	PERSONAL INJURY AGG.	\$
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BI & PD COMBINED AGG	\$																		
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	<input type="checkbox"/> COMPREHENSIVE FORM <input type="checkbox"/> PREMISES/OPERATIONS <input type="checkbox"/> UNDERGROUND EXPLOSION & COLLAPSE HAZARD <input type="checkbox"/> PRODUCTS/COMPLETED OPER <input type="checkbox"/> CONTRACTUAL <input type="checkbox"/> INDEPENDENT CONTRACTORS <input type="checkbox"/> BROAD FORM PROPERTY DAMAGE <input type="checkbox"/> PERSONAL INJURY																		
	AUTOMOBILE LIABILITY				<table border="1"> <tr><td>BODILY INJURY (Per person)</td><td>\$</td></tr> <tr><td>BODILY INJURY (Per accident)</td><td>\$</td></tr> <tr><td>PROPERTY DAMAGE</td><td>\$</td></tr> <tr><td>BODILY INJURY & PROPERTY DAMAGE COMBINED</td><td>\$</td></tr> </table>	BODILY INJURY (Per person)	\$	BODILY INJURY (Per accident)	\$	PROPERTY DAMAGE	\$	BODILY INJURY & PROPERTY DAMAGE COMBINED	\$						
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PROPERTY DAMAGE	\$																		
BODILY INJURY & PROPERTY DAMAGE COMBINED	\$																		
	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS (Priv Pass) <input type="checkbox"/> ALL OWNED AUTOS (Other Than Priv Pass.) <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY																		
	EXCESS LIABILITY				<table border="1"> <tr><td>EACH OCCURRENCE</td><td>\$</td></tr> <tr><td>AGGREGATE</td><td>\$</td></tr> </table>	EACH OCCURRENCE	\$	AGGREGATE	\$										
EACH OCCURRENCE	\$																		
AGGREGATE	\$																		
	<input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM																		
C	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY	PC 948686	04/20/93	04/20/94	<table border="1"> <tr><td>STATUTORY LIMITS</td><td></td></tr> <tr><td>EACH ACCIDENT</td><td>\$ 1,000,000</td></tr> <tr><td>DISEASE—POLICY LIMIT</td><td>\$ 1,000,000</td></tr> <tr><td>DISEASE—EACH EMPLOYEE</td><td>\$ 1,000,000</td></tr> </table>	STATUTORY LIMITS		EACH ACCIDENT	\$ 1,000,000	DISEASE—POLICY LIMIT	\$ 1,000,000	DISEASE—EACH EMPLOYEE	\$ 1,000,000						
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DISEASE—POLICY LIMIT	\$ 1,000,000																		
DISEASE—EACH EMPLOYEE	\$ 1,000,000																		
	OTHER																		

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

All California Operations

CERTIFICATE HOLDER

U.S. Bureau of Reclamation
Route 1, Box 35
Byron, CA 94514-9614

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 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

Noemia Vera

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
 DEPARTMENT OF ENVIRONMENTAL HEALTH
 HAZARDOUS MATERIALS DIVISION
 80 SWAN WAY, ROOM 200
 OAKLAND, CA 94621
 PHONE NO. 510/271-4320

office copy

Boehm 1/15/54

note changes/additions in RED

ACCEPTED

DEPARTMENT OF ENVIRONMENTAL HEALTH
 4707 SHAW BLVD. 4TH FLOOR
 OAKLAND, CA 94612

Telephone: 510/271-4320

These plans have been reviewed and found acceptable and are hereby approved by the local health officer, Department of Environmental Health. The provisions of any applicable laws. One copy of these plans shall be available to all persons who request the removal. Any other person who wishes to inspect the plans must be given access to the plans. Booking for removal of hazardous materials shall be made by the generator. Notify the Department of Environmental Health of tank and piping following removal.

Insurance coverage is dependent on compliance with all applicable laws and regulations. THE HAZARDOUS MATERIALS DIVISION, DEPARTMENT OF ENVIRONMENTAL HEALTH, OAKLAND, CALIFORNIA.

UNDERGROUND TANK CLOSURE PLAN

*** Complete according to attached instructions ***

- Brian Shimoto - Civil Engineer
- Business Name U.S. Bureau of Reclamation - Tracy, California
 Business Owner U.S. Bureau of Reclamation
 - Site Address Mountain House and Kelso Roads
 City Tracy CA Zip 95316 Phone 209-836-6220
 - Mailing Address RR-1, Box 35
 City Byron Zip CA Phone 94514-9614
 - Land Owner U.S.A. Bureau of Reclamation
 Address Rt. 1, Box 35 City, state Byron, CA Zip 94514-9614
 - Generator name under which tank will be manifested U.S. BUREAU OF RECLAMATION
- EPA I.D. No. under which tank will be manifested - CAC 000983448

Attn: Doris Eckhardt
 Certified Mail

6. Contractor Cottle Engineering
Address P.O. BOX 7
City Antioch CA 94509 Phone 510-754-9935
License Type* A ID# 481444

*Effective January 1, 1992, Business and Professional Code Section 7058.7 requires prime contractors to also hold Hazardous Waste Certification issued by the State Contractors License Board. Indicate that the certificate has been received, in addition, to holding the appropriate contractors license type.

7. Consultant N/A
Address _____
City _____ Phone _____

8. Contact Person for Investigation
Name Roy Pantle Title Project Manager
Phone 510-754-9935

9. Number of tanks being closed under this plan 2
Length of piping being removed under this plan 20'
Total number of tanks at facility 4

10. State Registered Hazardous Waste Transporters/Facilities (see instructions).

** Underground tanks are hazardous waste and must be handled **
as hazardous waste

a) Product/Residual Sludge/Rinsate Transporter
Name Sea View Industries EPA I.D. No. CAD 983669052
Hauler License No. _____ License Exp. Date _____
Address 98 Hegenberger Loop
City Oakland State CA Zip 94621

b) Product/Residual Sludge/Rinsate Disposal Site
Name REFINERIES SERVICE EPA I.D. No. _____
Address _____
City Patterson State CA Zip _____

c) Tank and Piping Transporter

Name Erickson EPA I.D. No. CAD009466392
Hauler License No. _____ License Exp. Date _____
Address 259 Parr Blvd.
City Richmond State CA Zip 94803

d) Tank and Piping Disposal Site

Name Erickson EPA I.D. No. CAD009466392
Address 259 Parr Blvd.
City Richmond State CA Zip 94803

11. Experienced Sample Collector

Name Roy Pantle
Company Cottle Engineering
Address P.O. Box 7
City Antioch State CA Zip 94509 Phone 510-754-9935

12. Laboratory

Name Mc Campbell Analytical
Address 110 2nd Avenue South
City Pacheco State CA Zip 94553
State Certification No. 1644

13. Have tanks or pipes leaked in the past? Yes [] No [] Unknown

If yes, describe. _____

14. Describe methods to be used for rendering tank inert

Introduction of dry ice at a ratio of
2.5 lbs. per 100 gallons of tank volume.

Before tanks are pumped out and inerted, all associated piping must be flushed out into the tanks. All accessible associated piping must then be removed. Inaccessible piping must be plugged.

The Bay Area Air Quality Management District (771-6000), along with local Fire and Building Departments, must also be contacted for tank removal permits. Fire departments typically require the use of explosion proof combustible gas meters to verify tank inertness. It is the contractor's responsibility to bring a working combustible gas meter on site to verify tank inertness.

15. Tank History and Sampling Information

Tank		Material to be sampled (tank contents, soil, ground-water, etc.)	Location and Depth of Samples
Capacity	Use History (see instructions)		
2000 gal	Gasoline	Soil *If ground water is present in excavation, one groundwater sample and two soil samples to be collected from walls next to tank ends.	One Foot ^{into native soil} below bottoms of tanks at each end.
1,000 gal	Waste Oil Tanks Used until mid 1993		

One soil sample must be collected for every 20 feet of piping that is removed. A ground water sample must be collected should any ground water be present in the excavation.

Excavated/Stockpiled Soil	
Stockpiled Soil Volume (Estimated) 35 Yards	Sampling Plan Two Composite Soil Samples from the stock-piled excavated soil with analyses as listed below.

Stockpiled soil must be placed on bermed plastic and must be completely covered by plastic sheeting.

16. Chemical methods and associated detection limits to be used for analyzing samples

The Tri-Regional Board recommended minimum verification analyses and practical quantitation reporting limits should be followed. See attached Table 2.

Contaminant Sought	EPA, DHS, or Other Sample Preparation Method Number	EPA, DHS, or Other Analysis Method Number	Method Detection Limit
TPHC, BTXE TPH 0 Oil & Grease Chlorinated Halocarbons Total lead Metals Cd, Cr, Pb, Ni, Zn semi volatiles		8020, 8015 8015 5520E#F/5520B#F 8240 8270	Soil: 1ppm Water: 60ppb Soil: .5ppm Water: .55ppb

17. Submit Site Health and Safety Plan (See Instructions)

18. Submit Worker's Compensation Certificate copy

Name of Insurer Republic Indemnity

19. Submit Plot Plan (See Instructions)

20. Enclose Deposit (See Instructions)

21. Report any leaks or contamination to this office within 5 days of discovery. The report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report form. (see Instructions)

22. Submit a closure report to this office within 60 days of the tank removal. This report must contain all the information listed in item 22 of the instructions.

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 health and safety. 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.

Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Specialist at least three working days in advance of site work to schedule the required inspections.

Signature of Contractor

Name (please type) DAVID E. COTTLE, JR.

Signature David E. Cottle, Jr.

Date 12-8-93

Signature of Site Owner or Operator

Name (please type) DARLENE BONIFAKE

Signature Darlene Bonifake

Date 12-9-93

HEALTH & SAFETY PLAN

FOR

Tank Removal

U.S. Bureau of Reclamation

Tracy, California

HEALTH AND SAFETY PLAN

INTRODUCTION:

Cottle Engineering Health & Safety Plan is designed to meet the requirements of 29 CFR 1910.120.

The objective of this Health & Safety Plan is to establish health and safety guidelines for the removal of two underground fuel storage tanks at the U.S. Bureau of Reclamation, Tracy Pumping Plant, Mountain House and Kelso Roads, Tracy, California.

The project will consist of the removal of the storage tanks, collection of soil and / or water samples for analyses as necessary, backfilling and compaction of clean imported backfill, and general site cleanup and grade restoration following the completion of site operations. General information pertaining to the site is provided in Table 1.

TABLE 1

General Information
Health and Safety Plan

Site: Water Pumping Plant

Location: Mountain House & Kelso Roads, Tracy, California 95376

Background Review: Preliminary and Incomplete

SITE/HAZARD OVERVIEW

Apparent Hazard: Low

Type of Facility: Water Pumping Plant

Status of Facility: Active

Waste Types: Liquid, Solid

Waste Characteristics: Toxic, Ignitable, Volatile

Hazard Type: Liquids, Vapors

CHARACTERIZATION OF WASTE PRODUCTS

The chemicals of concern on site are petroleum hydrocarbons. A summary of the health effects is given in Appendix I.

SITE SAFETY WORK PLAN

GENERAL:

Operations that will be conducted on the site include excavation and removal of underground fuel tank, the collection of soil samples and appropriate groundwater samples, backfilling and compaction of clean soil, and general site cleanup and surface restoration. The procedures for collection of soil and groundwater samples are describe in Appendix II. The Site Safety Officer (Table 3), will assess the hazard of inhalation of vapors or particulate matter according to meteorological conditions and the phase of site operations, and will determine when and in what areas of the site personnel will be required to wear respirators.

Onsite personnel are trained to be aware of the potential for temperature stress during site operations. The combination of overexertion, protective clothing and ambient temperature extremes could cause stress which can lead to dehydration if body liquids and minerals are not replaced, heat exhaustion in warm climate, and hypothermia in cold climates, etc. Rest periods and replacement of body fluids by potable drinking water and electrolyte containing beverages are required to prevent heat stress during site operations.

HEALTH AND SAFETY RESPONSIBILITIES FOR KEY PERSONNEL:

The Project Manager and the Site Safety Officer will be responsible for planning and coordinating all activities onsite and will ensure that a Tailgate Safety Meeting form is obtained before work begins. They will also ensure the Tailgate Safety Meeting form is signed daily by each employee onsite and that the Health and Safety Plan is reviewed before work begins by all site operations personnel.

The Site Safety Officer will be responsible for implementing all facets of the Health and Safety Plan during site operations, including briefing all participants in the Health and Safety Plan requirements, ensuring that all necessary permits are onsite, enforcing the use of hearing protection where required, establishing the exclusion zone or other safe zones as appropriate, and determining actions to be taken in case of an emergency onsite. The Site Safety Officer will bring all real of potential health and safety problems to the attention of the Project Manager.

The Project Manager will be responsible for determining all site-specific health and safety decisions and will oversee their implementation.

WORK TRAINING REQUIREMENTS:

As required by 29 CFR 1910.120, all site operations personnel will have completed at least 40 hours of health and safety training prior to entering the site. Additionally, the Site Supervisor will have completed an additional 8 hours of specialized instruction. Evidence is generally demonstrated by a Certificate of Training. In addition, no visitors will be allowed inside the exclusion zone if compliance with the training provisions of 29 CFR 1910.120 cannot be demonstrated.

MEDICAL SURVEILLANCE REQUIREMENTS:

As required by 29 CFR 1910.120, all site operations personnel shall participate in a medical surveillance (Occupational Health) monitoring program (as appropriate for each project). Documentation will be required from all subcontractor site operations personnel to demonstrate this compliance. Cottle Industries' employee's records are maintained in Cottle Industries Health and Safety Records section.

DOCUMENTATION:

Compliance with the Health and Safety Plan review requirement will be documented on a sign-off sheet during the safety briefing attendance meetings which will be scheduled at the beginning of field operations and which will be reviewed at the beginning of each day during the conduct of site operations. A sign-off sheet is presented in Appendix III.

This meeting, also known as the Tailgate Safety Meeting, will be conducted by the Site Safety Officer or the Site Operations Supervisor (Table 2). This meeting must be attended by all Cottle Industries employees and other subcontractors working on the project that day. It is strongly recommended that all non-employees at the site also attend.

GENERAL SAFETY REQUIREMENTS:

The following general safety requirements shall be followed by all site operations personnel, or qualified visitors, working and/or entering the site during the conduct of the site operations.

- * No site operations personnel or visitors will be allowed onsite without the prior knowledge and consent of the Site Safety Officer.
- * There will be no activities conducted onsite without sufficient backup personnel. At a minimum, two persons must be present on the site during the conduct of the site operations. A trained Cottle Industries supervisor, as required by 29 CFR 1910.120, must be present onsite at all times during the conduct of site operations.

- * All site operations personnel shall immediately bring to the attention of the Site Safety Officer or Project Manager any unsafe condition or practice associated with the site operations activities that they are unable to correct themselves.
- * There will be no smoking, eating, chewing gum, drinking or tobacco consumption inside the Exclusion Zone/controlled area.
- * Good housekeeping practices will be used onsite at all times.
- * Hands shall be thoroughly cleaned prior to smoking, eating or other activities outside the Exclusion Zone/controlled area.
- * All borings will be monitored to prevent inadvertent contact.
- * Site operations personnel must avoid unnecessary contamination, including walking through known or suspected "hot spots" or contaminated puddles, kneeling or sitting on the ground, leaning against potentially contaminated barrels or equipment.
- * A fire extinguisher (minimum rating 10:B:C) will be onsite at all times.
- * Respiratory devices will not be worn with beards, long sideburns, or under any other conditions that prevent a proper seal while the respirator is being worn.
- * Contact lenses will not be worn with respirators in use.
- * Only designated personnel will be allowed to operate specialize equipment (e.g. drill rig).
- * No confined space entry is authorized by this Health and Safety Plan.

EXCLUSION ZONE/CONTROLLED AREA:

An Exclusion Zone will be established immediately around the tank excavation and excavating equipment. A map will also be posted onsite showing these areas. The following activities will be conducted in the Exclusion Zone:

- * Equipment staging
- * Excavation and removal of tank and related piping
- * Soil sampling
- * Groundwater sampling and monitoring (as appropriate)

PERSONAL PROTECTIVE EQUIPMENT:

The level of protection will be Level D (modified if appropriate) with upgrade to Level C if appropriate. Level D includes the following equipment:

- * Hard hat
- * Gloves
- * Proper work clothes
- * Proper work boots
- * Earplugs or earmuffs (while working on or around operating equipment)

Level C includes the following equipment:

- * Hard hat
- * Routine work clothes under disposable Tyvek coveralls
- * Steel-toes safety boots under disposable PVC booties
- * Protective eyewear
- * Nitrile (green) gloves (when handling soil, during testing, sampling, shovelling, etc.)
- * NIOSH approved full face respirator (or half face respirator with goggles) equipped with high efficiency combination cartridges for toxic particulates and organic vapors

The decision to upgrade to Level C protective equipment will be determined by the onsite H & S Officer.

DECONTAMINATION:

Decontamination consists of contamination - reduction phases and personal hygiene for site operations. The following decontamination / contamination reduction steps will be used:

- * Maximize the use of disposable clothing for personal protection (latex surgical gloves, Tyvek coveralls and PVC booties).
- * Remove disposable PVC booties, Tyvek coveralls, outer gloves and inner gloves and dispose of them in a clean unused garbage bag(s).

- * Remove respirator, remove cartridges and discard them. Return respirator to storeroom at the end of the job. All respirators will be properly washed, sanitized, tagged and stored.
- * The garbage bag(s) holding disposable items from the site operations will be placed in securely covered, clearly marked 55-gallon steel drums and placed in an area of the site at the direction of the Site Engineer. Final disposition will be in accordance with site remedial action.
- * Wash hands and face with soap immediately upon exiting the Exclusion Zone.
- * After departing the site, site operations personnel should shower as soon as possible.
- * After departing the site, fabric work clothes and undergarments should be washed as soon as possible using routine wash method.
- * (As appropriate) Each piece of equipment (tools and all vehicles contacting potentially contaminated materials) must be decontaminated before it leaves the operation site. This must be done in an area designated for equipment decontamination (to be determined). Large items of equipment, such as vehicles and trucks, should be subjected to decontamination by high pressure water washes or steam. A special solution, such as Liqui-Nox, a 1% to 2% TSP Solution, or Bola Degreaser, may have to be used on equipment or heavily soiled items. All wash and rinse water must be contained (on Visqueen for large equipment, in 5-gallon buckets for tools), collected, and stored in marked 55-gallon drums on site until final disposition is determined.

PHYSICAL HAZARDS:

The physical hazards associated with operating heavy equipment are as follows:

- * Moving machine parts
- * "Struck-by" or roll over injuries from the equipment
- * Noise
- * Exposure to contaminated particulate matter while boring soil
- * Possible contact with gas or power lines during excavating
- * Possible contact with underground utilities

All personnel operating heavy equipment will be experienced in the proper operating procedures and the safety precautions.

Noise levels for heavy equipment operators may be expected to exceed 85 decibels on the A-weighted scale. Therefore, heavy equipment operators will wear disposable earplugs or earmuffs with a Noise Reduction Rating (NRR) of at least 25 decibels. A hearing conservation program, in conformance with OSHA requirements, will be in effect throughout the duration of the project.

Care will be used when moving excavated soil to avoid creating a dust. An air purifying respirator may be required while performing any operation where sufficient dust may be generated. See Personal Protective Equipment section.

The Project Manager or the Site Safety Officer shall investigate the site for potential gas and power lines above and below ground before excavating. This includes contacting the Underground Service Alert organization at (800) 642-2444 at least 48 hours prior to the job start. No excavation will occur in any area where such lines are found.

OCCUPATIONAL EXPOSURE MONITORING:

In order to prevent overexposures to employees of physical and chemical agents, it may be necessary to conduct monitoring evaluations. Environmental agents of concern on this project may include airborne concentrations of petroleum hydrocarbons, noise, or temperature extremes. The Site Safety Officer may use any of the following equipment to assess employee exposure:

- * HNu (or similar) Photoionization Detector
- * Foxboro Organic Vapor Analyzer/Flame Ionization Detector
- * Draeger Colorimetric Indicator Tubes
- * Quest Noise Dosimeter
- * Gilian personal Air Sampling Pumps, with appropriate media
- * Metrosonics WBGT Heat Stress Monitor
- * Combustible gas indicator with ppm scale (Gastech 1314 or equivalent)
- * Oxygen detector

EMERGENCY INFORMATION:

A description of local resources available in case of emergency is presented on Table 2.

EMERGENCY PROCEDURES FOR INJURY:

If an injury should occur on the site and involves exposure to gross contamination, the local emergency contacts (Table 2) will be

notified of the incident and of the potential contaminants involved. Before being transported to the medical care facility, the victim will undergo a gross washdown using clear water after removal of all contaminated clothing. This will reduce the chance of spreading contaminants to the emergency vehicle and local hospital.

If an accident should occur onsite which results in a minor injury (e.g. cuts or bruises), a first aid kit and portable eye wash unit will be available for treatment.

If an accident should occur onsite which results in a major trauma (e.g. fractured bones or severe lacerations), the local emergency telephone number (911) will be used to contact emergency services. The victim will not be transported in any vehicle other than a fully-equipped emergency vehicle.

SAFETY EQUIPMENT CHECKLIST:

A Safety Equipment Checklist is presented on Table 3.

TABLE 2

EMERGENCY INFORMATION

LOCAL RESOURCES

HEALTH AND SAFETY PLAN

U.S. Bureau of Reclamation

Tracy Pumping Plant

Ambulance: Regional Ambulance Service - 911 - Dispatch - 510-373-9130

Hospital Emergency: Valley Memorial Hospital - 510-373-4018
1111 E. Stanley Blvd., Livermore

Route to Hospital: Exit site going south on Mt. House Rd., enter 580
Freeway westbound, exit on Santa Rita Rd. southbound,
turn west on W. Las Positas, enter the Hospital
grounds and proceed to the appropriate facility.

Local Police: Dial 911

Local Fire: Dial 911

Alameda County Health Agency: 510-271-4320

Cottle Project Manager: David E. Cottle, Sr.

Cottle Site Safety Officer: David E. Cottle, Sr.

Cottle Operations Supervisor: Alvin Kanckstedt

TABLE 3

SAFETY EQUIPMENT CHECKLIST

HEALTH AND SAFETY PLAN

MONITORING AND
SURVEILLANCE

PERSONAL PROTECTION

Full face respirator
Half-face respirator
High efficiency combination cartridges for
toxic particulates, organic vapors, and
acid gasses
Safety boots Industrial grade work boots
with steel toe
Tyvek coveralls
Safety glasses
Goggles
Hard hat
PVC rain gear
Nitrile (green) gloves
Latex gloves
PVC booties

MISCELLANEOUS

First aid kit
Drinking water
Eye wash kit
Fire extinguisher
Ear plugs or earmuffs

PERSONAL DECONTAMINATION EQUIPMENT

Clear water
5-gallon plastic buckets
Liqui-Nox
Hand soap
Plastic garbage bags
Paper hand towels

APPENDIX I

HEALTH EFFECTS OF WASTE PRODUCTS

PETROLEUM HYDROCARBONS:

BENZENE

Benzene is a colorless liquid with an aromatic odor. Benzene may potentially create an explosion hazard. Benzene is incompatible with strong oxidizers, chlorine, and bromine with iron. Benzene is irritating to the eyes, nose, and respiratory system. Prolonged exposure may result in giddiness, headache, nausea, staggering gait, fatigue, bone marrow depression, or abdominal pain. Routes of entry include inhalation, absorption, ingestion, and skin or eye contact. The target organs are blood, the central nervous system (CNS), skin, bone marrow, eyes, and respiratory system. Benzene is carcinogenic.

TOLUENE

Toluene is a colorless liquid with an aromatic odor like benzene. Toluene may potentially create an explosion hazard. Toluene is incompatible with strong oxidizers. Prolonged exposure may result in fatigue, confusion, euphoria, dizziness, headache, dilation of pupils, lacrimation, insomnia, dermatitis, or photophobia. Routes of entry are inhalation, absorption, ingestion, and skin or eye contact. The target organs are the CNS, liver, kidneys, and skin.

XYLENES

There are three isomers of xylenes; ortho, meta and para. Each is a colorless liquid with an aromatic odor. Xylene may potentially create an explosion hazard. Xylene is incompatible with strong oxidizers. Xylene is irritating to the eyes, nose, and throat. Prolonged exposure may result in dizziness, excitement, drowsiness, staggering gait, corneal vacuolization, vomiting, abdominal pain, and dermatitis. Routes of entry are inhalation, absorption, ingestion, skin or eye contact. The target organs are the CNS, eyes, gastrointestinal tract, blood, liver, kidneys, and skin.

ETHYLBENZENE

Ethylbenzene is a colorless liquid with an aromatic odor. Ethylbenzene may potentially create an explosion hazard. Ethylbenzene is incompatible with strong oxidizers. Ethylbenzene is irritating to the eyes and mucous membranes. Prolonged exposure may result in headache, dermatitis, narcosis, or coma. Routes of entry include inhalation, ingestion, and skin or eye contact. The target organs are the eyes, upper respiratory system, skin, and CNS.

ORGANIC LEAD

Organic lead (tetraethyl lead) is a colorless liquid with a slight musty odor. It is a gasoline anti-knock additive. It is toxic by inhalation, ingestion, and skin absorption. The target organs are the liver, CNS, kidneys and skin. Lead is concentrated largely in bone tissues, and in the soft tissues and blood in minor amounts. Children and fetuses are especially susceptible to lead poisoning. Organic lead is a suspected teratogen.

DIESEL

Diesel fuel is a petroleum-based oil and is available in various grades, one of them being synonymous with fuel oil Number 2. The greatest health concern with diesel at this site is skin contact with contaminated soil. Diesel on simple contact may defat the skin, which can lead to irritation, infection and dermatitis.

Diesel is not sufficiently volatile, and if not found in high enough concentrations in the soil at this site, will not constitute an inhalation hazard. However, air purifying respirators are available to employees for nuisance odors.

WASTE OIL

Motor lubricating oil has a very low hazard rating in its initial form. The oral toxicity of unused motor oil and its additives tend to be very low because of their low vapor pressures. Inhalation does not present a problem, except if misting occurs or a heavily oil-contaminated dust is present. Frequent and prolonged direct skin contact may produce skin irritation and dermatitis in certain hypersensitive individuals.

Used motor oil is considered to be more toxic than unused oil. In the used form, the oil may contain relatively low levels of certain metals such as sodium, iron, zinc, boron, chromium, aluminum, silicon, copper, silver and lead, and certain transformation products resulting from elevated temperature and pressure in an operating engine. These metals and transformation products would not be considered hazardous unless an oil mist was generated, a heavily oil-contaminated dust was present, the oil was ingested into the stomach, or if significant skin contact occurred. Waste oil is a mutagen and a California Proposition 65 listed carcinogen.

Although it has a low hazard rating, waste oil, as a common good personal hygiene practice, should be handled with care, avoiding skin contact and breathing vapors or contaminated dust. This is because waste oil is sometimes found to contain toxic compounds such as PCBs and various solvents.



State of California
CONTRACTORS STATE LICENSE BOARD
ACTIVE LICENSE



License Number **481444** Entity **INDIV**

Business Name **COTTLE ENGINEERING**

Classification(s) **A HAZ**

Expiration Date **10/31/95**



STATE OF CALIFORNIA
STATE AND CONSUMER SERVICES AGENCY CONTRACTORS STATE LICENSE BOARD



Building Quality



HAZARDOUS SUBSTANCES REMOVAL AND REMEDIAL ACTIONS CERTIFICATION

Pursuant to the provisions of Section 7058.7 of the Business and Professions Code, the Registrar of Contractors does hereby certify that the following qualifying person has successfully completed the hazardous substances removal and remedial actions examination.



Qualifier: DAVID EVANS COTTLE

License No.: 481444

Namestyle: COTTLE ENGINEERING

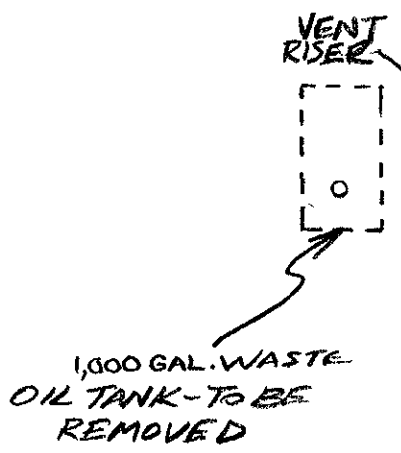
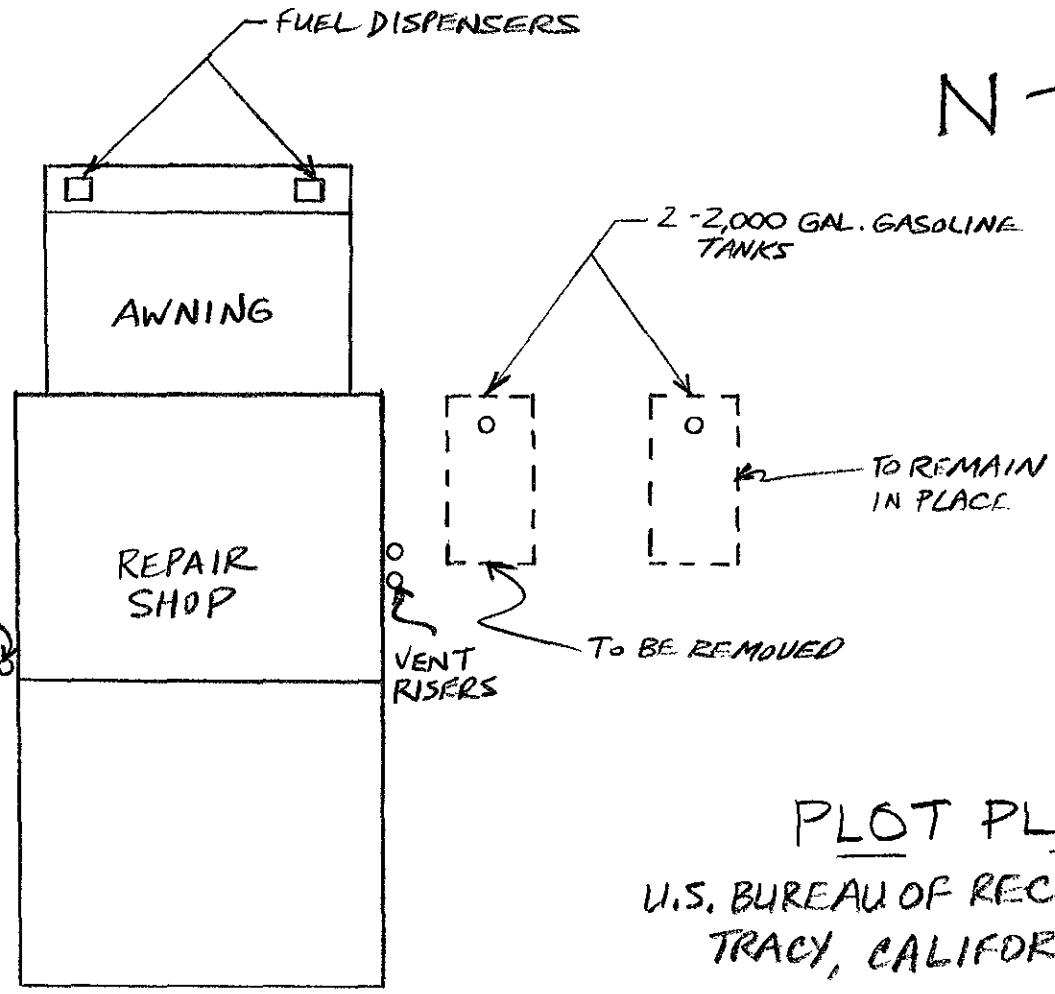
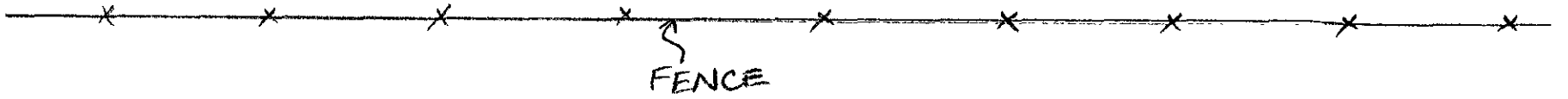
WITNESS my hand and official seal this
24th day of DECEMBER 1991

David R. Phillips
Registrar of Contractors

13L-36 (2/91)

This certification is the property of the Registrar of Contractors, is not transferable, and shall be returned to the Registrar upon demand when suspended, revoked, or invalidated for any reason.

A 4310



PLOT PLAN
U.S. BUREAU OF RECLAMATION
TRACY, CALIFORNIA