SDMS Doc ID 2023381

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OA6 2-0006

EPA POTENTIAL HAZARDOUS WASTE SITE IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION	SITE NUMBER (to be assigned by Hq)
1X	10032

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II *(Preliminary Assessment)*. File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force *(EN-335)*; 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME: Pacific Refining Co.

B. STREET (or other identifier): San Pablo Ave. P.O. Box 68, Hercules CA 94547

C. CITY: Hercules

D. STATE: CA

E. ZIP CODE: 94547

F. COUNTY NAME: Contra Costa

G. OWNER/OPERATOR (if known)
1. NAME: Same
2. TELEPHONE NUMBER: none

H. TYPE OF OWNERSHIP
☐ 1. FEDERAL ☐ 2. STATE ☐ 3 COUNTY ☐ 4 MUNICIPAL ☒ 5 PRIVATE ☐ 6 UNKNOWN

I. SITE DESCRIPTION
Oil Refinery with 3 surface impoundments

J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.)
WQCB # 6

K. DATE IDENTIFIED (mo., day, & yr.)
9-79

L. PRINCIPAL STATE CONTACT
1. NAME: WQCB #6 San Francisco Bay Region
2. TELEPHONE NUMBER: (415) 464-1255

II. PRELIMINARY ASSESSMENT (complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM
☒ 1. HIGH ☐ 2. MEDIUM ☐ 3 LOW ☐ 4 NONE ☐ 5 UNKNOWN

B. RECOMMENDATION
☐ 1. NO ACTION NEEDED *(no hazard)*
☒ 3. SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR
b. WILL BE PERFORMED BY:
☐ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR
b. WILL BE PERFORMED BY
☐ 4. SITE INSPECTION NEEDED *(low priority)*

C. PREPARER INFORMATION
1. NAME: Barbara Fontes
2. TELEPHONE NUMBER: (213) 426-9544
3. DATE (mo., day, & yr.): June 16, 1980

III. SITE INFORMATION

A. SITE STATUS
☒ 1. ACTIVE *(Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)*
☐ 2. INACTIVE *(Those sites which no longer receive wastes.)*
☐ 3. OTHER *(specify)* *(Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)*

B. IS GENERATOR ON SITE?
☐ 1. NO ☒ 2. YES *(specify generator's four-digit SIC Code)*

C. AREA OF SITE *(in acres)*
>7.2 - impoundments

D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES
1. LATITUDE *(deg.-min.-sec.)* 38° 4' 42"
2. LONGITUDE *(deg.-min.-sec.)* 122° 16' 21"

E. ARE THERE BUILDINGS ON THE SITE?
☐ 1. NO ☐ 2. YES *(specify)*: Unknown

Continue On Reverse

Continued From Front

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IV. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

'X'	A. TRANSPORTER	'X'	B. STORER	'X'	C. TREATER	'X'	D. DISPOSER
	1. RAIL		1. PILE		1. FILTRATION		1. LANDFILL
	2. SHIP	X	2. SURFACE IMPOUNDMENT		2. INCINERATION		2. LANDFARM
	3. BARGE		3. DRUMS		3. VOLUME REDUCTION		3. OPEN DUMP
	4. TRUCK		4. TANK, ABOVE GROUND		4. RECYCLING/RECOVERY	X	4. SURFACE IMPOUNDMENT
	5. PIPELINE		5. TANK, BELOW GROUND		5. CHEM./PHYS. TREATMENT		5. MIDNIGHT DUMPING
	6. OTHER (specify):		6. OTHER (specify):		6. BIOLOGICAL TREATMENT		6. INCINERATION
					7. WASTE OIL REPROCESSING		7. UNDERGROUND INJECTION
					8. SOLVENT RECOVERY		8. OTHER (specify):
					9. OTHER (specify):		

E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

V. WASTE RELATED INFORMATION

A. WASTE TYPE

[ ] 1 UNKNOWN [X] 2 LIQUID [ ] 3. SOLID [X] 4. SLUDGE [ ] 5. GAS

B. WASTE CHARACTERISTICS

[ ] 1 UNKNOWN [X] 2. CORROSIVE [ ] 3. IGNITABLE [ ] 4 RADIOACTIVE [ ] 5 HIGHLY VOLATILE
[X] 6 TOXIC [ ] 7 REACTIVE [ ] 8 INERT [ ] 9 FLAMMABLE

[ ] 10. OTHER (specify): _____

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT no info	AMOUNT no info	AMOUNT no info	AMOUNT no info	AMOUNT no info	AMOUNT
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
'X' (1) PAINT, PIGMENTS	'X' X (1) OILY WASTES	'X' X (1) HALOGENATED SOLVENTS	'X' X (1) ACIDS	'X' X (1) FLYASH	'X' (1) LABORATORY PHARMACEUT.
(2) METALS SLUDGES	(2) OTHER (specify):	(2) NON-HALOGNTD. SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER (specify):	(3) CAUSTICS	(3) MILLING/ MINE TAILINGS	(3) RADIOACTIVE
X (4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMLTG. WASTES	(4) MUNICIPAL
(5) OTHER (specify):			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER (specify):
			(6) CYANIDE	(6) OTHER (specify):	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			(10) METALS		
			(11) OTHER (specify)		

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EPA

POTENTIAL HAZARDOUS WASTE SITE LOG

SITE NUMBER: 10032

NOTE: The initial identification of a potential site or incident should not be interpreted as a finding of illegal activity or confirmation that an actual health or environmental threat exists. All identified sites will be assessed under the EPA's Hazardous Waste Site Enforcement and Response System to determine if a hazardous waste problem actually exists.

SITE NAME: Pacific Refining Co.

CITY: Hercules | STATE: CA | ZIP CODE: 94547

SUMMARY OF POTENTIAL OR KNOWN PROBLEM: oil refinery with 3 surface impoundments

ITEM	DATE OF DETERMINATION OR COMPLETION	RESPONSIBLE ORGANIZATION OR INDIVIDUAL (EPA, State, Contractor, Other)	PERSON MAKING ENTRY TO LOG FORM	DATE ENTERED ON LOG (mo, day, yr)
1 IDENTIFICATION OF POTENTIAL PROBLEM	9/79	WQCB #6		
2 PRELIMINARY ASSESSMENT				
APPARENT SERIOUSNESS OF PROBLEM	☐ HIGH	☐ MEDIUM ☐ LOW ☐ NONE	☐ UNKNOWN	
3 SITE INSPECTION				
4. EPA TENTATIVE DISPOSITION (check appropriate item(s) below)				
☐ a. NO ACTION NEEDED				
☐ b. INVESTIGATIVE ACTION NEEDED				
☐ c. REMEDIAL ACTION NEEDED				
☐ d. ENFORCEMENT ACTION NEEDED				
5 EPA FINAL STRATEGY DETERMINATION (check appropriate item(s) below)				
☐ a. NO ACTION NEEDED				
☐ b. REMEDIAL ACTION NEEDED				
☐ c. REMEDIAL ACTION NEEDED BUT, NO RESOURCES AVAILABLE				
☐ d. ENFORCEMENT ACTION NEEDED				
☐ (1) CASE DEVELOPMENT PLAN PREPARED				
☐ (2) ENFORCEMENT CASE FILED OR ADMINISTRATIVE ORDER ISSUED				
6 STRATEGY COMPLETED				

EPA Form T2070-1 (10-79)