EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT

REGION	SITE NUMBER (to be assigned by HQ)
6	OK03786

GENERAL INSTRUCTIONS: Complete Sections I and III through XV of this form as completely as possible. Then use the information on this form to develop a Tentative Disposition (Section II). File this form in its entirety in the regional Hazardous Waste Log File. Be sure to include all appropriate Supplemental Reports in the file. Submit a copy of the forms 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

OKD070040589

A. SITE NAME	B. STREET (or other identifier)		
Tulsa Rencon Co. Now DBA T.R.I. Container, Inc.	17400 E. Young		
C. CITY	**D. STATE**	**E. ZIP CODE**	**F. COUNTY NAME**
Catoosa	OK	74105	Rogers

G. SITE OPERATOR INFORMATION

1. NAME		2. TELEPHONE NUMBER	
Judson W. Webb, Owner		(918) 234-5100	
3. STREET	**4. CITY**	**5. STATE**	**6. ZIP CODE**
17400 E. Young	Catoosa	OK	74105

H. REALTY OWNER INFORMATION (if different from operator of site)

1. NAME		2. TELEPHONE NUMBER	
3. CITY		**4. STATE**	**5. ZIP CODE**

I. SITE DESCRIPTION

Steel drum cleaning

J. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE

II. TENTATIVE DISPOSITION (complete this section last)

A. ESTIMATE DATE OF TENTATIVE DISPOSITION (mo., day, & yr.)	B. APPARENT SERIOUSNESS OF PROBLEM
11/1/85	☐ 1. HIGH ☐ 2. MEDIUM ☒ 3. LOW ☐ 4. NONE

C. PREPARER INFORMATION

1. NAME	2. TELEPHONE NUMBER	3. DATE (mo., day, & yr.)
Hal Cantwell	(405) 271-5338	8/8/85

III. INSPECTION INFORMATION

A. PRINCIPAL INSPECTOR INFORMATION

1. NAME	2. TITLE	
Hal Cantwell	Environmental Specialist	
3. ORGANIZATION		**4. TELEPHONE NO. (area code & no.)**
Oklahoma State Department of Health, Waste Mgmt. Service		(405) 271-5338

B. INSPECTION PARTICIPANTS

1. NAME	2. ORGANIZATION	3. TELEPHONE NO.
Jimmy Echelle	Oklahoma State Department of Health	(405) 271-5338

204862

C. SITE REPRESENTATIVES INTERVIEWED (corporate officials, workers, residents)

1. NAME	2. TITLE & TELEPHONE NO.	3. ADDRESS
Judson Webb	President and Owner (918) 234-5100	17400 E. Young Catoosa, OK 74105

SUPERFUND FILE

JUL 13 1992

REORGANIZED

Reviewed by 6AW-SC (sym) date 12/12/85

Continued From Front

III. INSPECTION INFORMATION *(continued)*

D. GENERATOR INFORMATION *(sources of waste)*

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE GENERATED
Tulsa Rencon	(918) 234-5100	Drawer K Catoosa, OK 74105	Caustic wash water

E. TRANSPORTER/HAULER INFORMATION

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE TRANSPORTED
USPCI	(405) 528-8371	2000 Classen Center, 210 South Oklahoma City, OK 73106	Caustic wash water

F. IF WASTE IS PROCESSED ON SITE AND ALSO SHIPPED TO OTHER SITES, IDENTIFY OFF-SITE FACILITIES USED FOR DISPOSAL.

1. NAME	2. TELEPHONE NO.	3. ADDRESS
USPCI	(405) 528-8371	Lone Mountain Disposal Facility

G. DATE OF INSPECTION (mo., day & yr.)	H. TIME OF INSPECTION	I. ACCESS GAINED BY: *(credentials must be shown in all cases)*
8/8/85	10:30 a.m.	☒ 1. PERMISSION ☐ 2. WARRANT

J. WEATHER *(describe)*

80°F, clear, calm

IV. SAMPLING INFORMATION

A. Mark 'X' for the types of samples taken and indicate where they have been sent e.g., regional lab, other EPA lab, contractor, etc. and estimate when the results will be available.

1. SAMPLE TYPE	2. SAMPLE TAKEN *(mark 'X')*	3. SAMPLE SENT TO:	4. DATE RESULTS AVAILABLE
a. GROUNDWATER			
b. SURFACE WATER			
c. WASTE			
d. AIR			
e. RUNOFF			
f. SPILL			
g. SOIL			
h. VEGETATION			
i. OTHER *(specify)* Rencon			

B. FIELD MEASUREMENTS TAKEN *(e.g., radioactivity, explosivity, pH, etc.)*

1. TYPE	2. LOCATION OF MEASUREMENTS	3. RESULTS

Continued From Page 2

IV. SAMPLING INFORMATION (continued)

C. PHOTOS

1. TYPE OF PHOTOS: [X] a. GROUND [ ] b. AERIAL
2. PHOTOS IN CUSTODY OF: Oklahoma State Department of Health, Solid Waste Div.

D. SITE MAPPED?

[X] YES. SPECIFY LOCATION OF MAPS: Attached

E. COORDINATES

1. LATITUDE (deg.-min.-sec.): 36° 11' 10"
2. LONGITUDE (deg.-min.-sec.): 95° 47' 15"

V. SITE INFORMATION

A. SITE STATUS

[X] 1. ACTIVE (Those inductrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if intrequently.)
[ ] 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 [X] 2. YES (specify generator's four-digit SIC Code): 3412

C. AREA OF SITE (in acres): 5

D. ARE THERE BUILDINGS ON THE SITE?

[ ] 1. NO [X] 2. YES (specify): Office, Process and Warehouse

VI. 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	X	4. TANK, ABOVE GROUND		4. RECYCLING/RECOVERY		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. SUPPLEMENTAL REPORTS: If the site falls within any of the categories listed below, Supplemental Reports must be completed. Indicate which Supplemental Reports you have filled out and attached to this for..

[ ] 1. STORAGE (D) [ ] 2. INCINERATION (S) [ ] 3. LANDFILL (E) [X] 4. SURFACE IMPOUNDMENT (C) [ ] 5. DEEP WELL
[ ] 6. CHEM/BIO/PHYS TREATMENT [ ] 7. LANDFARM (F) [ ] 8. OPEN DUMP [ ] 9. TRANSPORTER [ ] 10. RECYCLOR/RECLAIMER

VII. WASTE RELATED INFORMATION

A. WASTE TYPE

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

B. WASTE CHARACTERISTICS

[X] 1. CORROSIVE [ ] 2. IGNITABLE [ ] 3. RADIOACTIVE [ ] 4. HIGHLY VOLATILE
[X] 5. TOXIC [ ] 6. REACTIVE [ ] 7. INERT [X] 8. FLAMMABLE
[ ] 9. OTHER (specify):

C. WASTE CATEGORIES

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

Caustic wash water

Continued From Front

VII. WASTE RELATED INFORMATION *(continued)*

1. 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	AMOUNT Unknown	AMOUNT	AMOUNT Unknown	AMOUNT	AMOUNT
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
X (1) PAINT, PIGMENTS	X (1) OILY WASTES	X (1) HALOGENATED SOLVENTS	X (1) ACIDS	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 X	(3) MILLING/MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMELTING 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)*:		

6. LIST SUBSTANCES OF GREATEST CONCERN WHICH ARE ON THE SITE *(place in descending order of hazard)*

1. SUBSTANCE	2. FORM *(mark 'X')*			3. TOXICITY *(mark 'X')*				4. CAS NUMBER	5. AMOUNT	6. UNIT
	a. SOLID	b. LIQ.	c. VAPOR	a. HIGH	b. MED.	c. LOW	d. NONE			
Lead		X							2.83 120.5	mg/l mg/kg

VIII. HAZARD DESCRIPTION

FIELD EVALUATION HAZARD DESCRIPTION: Place an 'X' in the box to indicate that the listed hazard exists. Describe the hazard in the space provided.

A. HUMAN HEALTH HAZARDS

Continued From Page 4

VIII. HAZARD DESCRIPTION (continued)

☐ B. NON-WORKER INJURY/EXPOSURE

☐ C. WORKER INJURY/EXPOSURE

☐ D. CONTAMINATION OF WATER SUPPLY

☐ E. CONTAMINATION OF FOOD CHAIN

☒ F. CONTAMINATION OF GROUND WATER

Very permeable soil over shallow ground water depth.

given as moderate in XIII.

☒ G. CONTAMINATION OF SURFACE WATER

Reported that high rainfall amounts caused retention pond to overflow into creek. Overflow tank now in place to correct problem.

Continue On R

Continued From Front

VIII. HAZARD DESCRIPTION (continued)

☐ H. DAMAGE TO FLORA/FAUNA

☐ I. FISH KILL

☐ J. CONTAMINATION OF AIR

☐ K. NOTICEABLE ODORS

☐ L. CONTAMINATION OF SOIL

☐ M. PROPERTY DAMAGE

Continued From Page 6

VIII. HAZARD DESCRIPTION (continued)

☐ N. FIRE OR EXPLOSION

☐ O. SPILLS/LEAKING CONTAINERS/RUNOFF/STANDING LIQUID

☐ P. SEWER, STORM DRAIN PROBLEMS

☐ Q. EROSION PROBLEMS

☐ R. INADEQUATE SECURITY

☐ S. INCOMPATIBLE WASTES

 Continue On Reverse

VIII. HAZARD DESCRIPTION (continued)

☐ T. MIDNIGHT DUMPING

☐ U. OTHER (specify):

IX. POPULATION DIRECTLY AFFECTED BY SITE

A. LOCATION OF POPULATION	B. APPROX. NO. OF PEOPLE AFFECTED	C. APPROX. NO. OF PEOPLE AFFECTED WITHIN UNIT AREA	D. APPROX. NO. OF BUILDINGS AFFECTED	E. DISTANCE TO SITE (specify units)
1. IN RESIDENTIAL AREAS	0	0	0	
2. IN COMMERCIAL OR INDUSTRIAL AREAS	200	200	6	⅛ mile
3. IN PUBLICLY TRAVELLED AREAS	20			⅛ mile
4. PUBLIC USE AREAS (parks, schools, etc.)	0	0	0	

X. WATER AND HYDROLOGICAL DATA

A. DEPTH TO GROUNDWATER (specify unit)	B. DIRECTION OF FLOW	C. GROUNDWATER USE IN VICINITY
5'-50'	WSW	None
D. POTENTIAL YIELD OF AQUIFER	**E. DISTANCE TO DRINKING WATER SUPPLY (specify unit of measure)**	**F. DIRECTION TO DRINKING WATER SUPPLY**
Unknown	10 miles	N

G. TYPE OF DRINKING WATER SUPPLY

☐ 1. NON-COMMUNITY < 15 CONNECTIONS

☒ 2. COMMUNITY (specify name): Tulsa > 15 CONNECTIONS

☐ 3. SURFACE WATER

☐ 4. WELL

Continue On Page 9

Continued From Page 9

X. WATER AND HYDROLOGICAL DATA (continued)

H. LIST ALL DRINKING WATER WELLS WITHIN A 1/4 MILE RADIUS OF SITE

1. WELL	2. DEPTH (specify unit)	3. LOCATION (proximity to population/ buildings)	4. NON-COMMUNITY (mark 'X')	5. COMMUNITY (mark 'X')
None				

I. RECEIVING WATER

1. NAME: Unnamed creek

☐ 2. SEWERS ☒ 3. STREAMS/RIVERS ☐ 4. LAKES/RESERVOIRS ☐ 5. OTHER (specify):

6. SPECIFY USE AND CLASSIFICATION OF RECEIVING WATERS

XI. SOIL AND VEGITATION DATA

LOCATION OF SITE IS IN:

☐ A. KNOWN FAULT ZONE ☐ B. KARST ZONE ☐ C. 100 YEAR FLOOD PLAIN ☐ D. WETLAND

☐ E. A REGULATED FLOODWAY ☐ F. CRITICAL HABITAT ☐ G. RECHARGE ZONE OR SOLE SOURCE AQUIFER

XII. TYPE OF GEOLOGICAL MATERIAL OBSERVED

Mark 'X' to indicate the type(s) of geological material observed and specify where necessary, the component parts.

'X'	A. OVERBURDEN	'X'	B. BEDROCK (specify below)	'X'	C. OTHER (specify below)
X	1. SAND				
X	2. CLAY				
X	3. GRAVEL				

XIII. SOIL PERMEABILITY

☐ A. UNKNOWN ☐ B. VERY HIGH (100,000 to 1000 cm/sec.) ☐ C. HIGH (1000 to 10 cm/sec.)

☒ D. MODERATE (10 to .1 cm/sec.) ☐ E. LOW (.1 to .001 cm/sec.) ☐ F. VERY LOW (.001 to .00001 cm/sec.)

G. RECHARGE AREA

☐ 1. YES ☒ 2. NO 3. COMMENTS:

H. DISCHARGE AREA

☒ 1. YES ☐ 2. NO 3. COMMENTS:

I. SLOPE

1. ESTIMATE % OF SLOPE: 2-4

2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.: SW > NE

J. OTHER GEOLOGICAL DATA

Continue On Reverse

Continued From Front

XIV. PERMIT INFORMATION

List all applicable permits held by the site and provide the related information.

A. PERMIT TYPE (e.g., RCRA, State, NPDES, etc.)	B. ISSUING AGENCY	C. PERMIT NUMBER	D. DATE ISSUED (mo., day, & yr.)	E. EXPIRATION DATE (mo., day, & yr.)	F. IN COMPLIANCE (mark "X")		
					1. YES	2. NO	3. UNKNOWN

XV. PAST REGULATORY OR ENFORCEMENT ACTIONS

☐ NONE ☐ YES (summarize in this space)

NOTE: Based on the information in Sections III through XV, fill out the Tentative Disposition (*Section II*) information on the first page of this form.

SURFACE IMPOUNDMENTS SITE INSPECTION REPORT
(Supplemental Report)

INSTRUCTION
Answer and Explain as Necessary.

1. TYPE OF IMPOUNDMENT

3 ponds

2. STABILITY/CONDITION OF EMBANKMENTS

Vegetated, not breached

3. EVIDENCE OF SITE INSTABILITY *(Erosion, Settling, Sink Holes, etc.)*

☐ YES ☒ NO small pond some

4. EVIDENCE OF DISPOSAL OF IGNITABLE OR REACTIVE WASTE

☐ YES ☒ NO

5. ONLY COMPATIBLE WASTES ARE STORED OR DISPOSED OF IN THE IMPOUNDMENT

☒ YES ☐ NO

6. RECORDS CHECKED FOR CONTENTS AND LOCATION OF EACH SURFACE IMPOUNDMENT

☒ YES ☐ NO

7. IMPOUNDMENT HAS LINER SYSTEM

☐ YES ☒ NO

7a. INTEGRITY OF LINER SYSTEM CHECKED

☐ YES ☐ NO

7b. FINDINGS

8. SOIL STRUCTURE AND SUBSTRUCTURE

Sandy clay loam

9. MONITORING WELLS

☒ YES ☐ NO

10. LENGTH, WIDTH, AND DEPTH

LENGTH 250' WIDTH 50' DEPTH 12'

11. CALCULATED VOLUMETRIC CAPACITY

150,000 ft^3

12. PERCENT OF CAPACITY REMAINING

25%

13. ESTIMATE FREEBOARD

3½ ft.

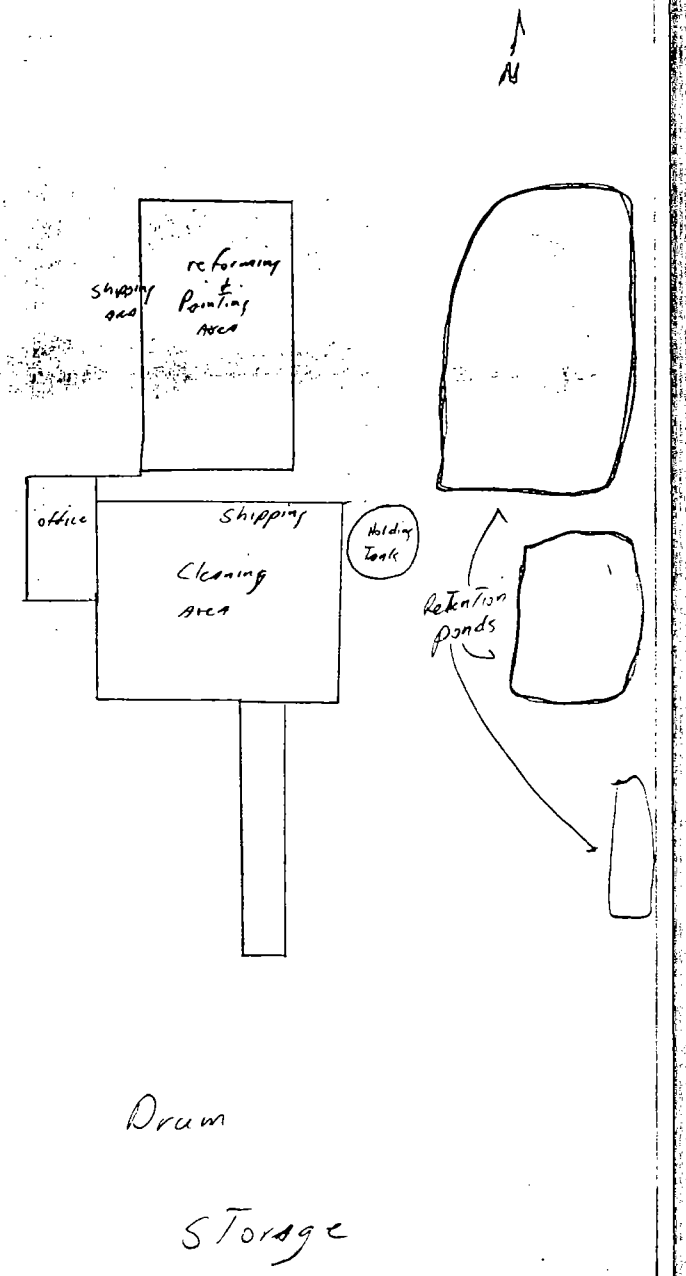
14. SOLIDS DEPOSITION

☐ YES ☒ NO

15. DREDGING DISPOSAL METHOD

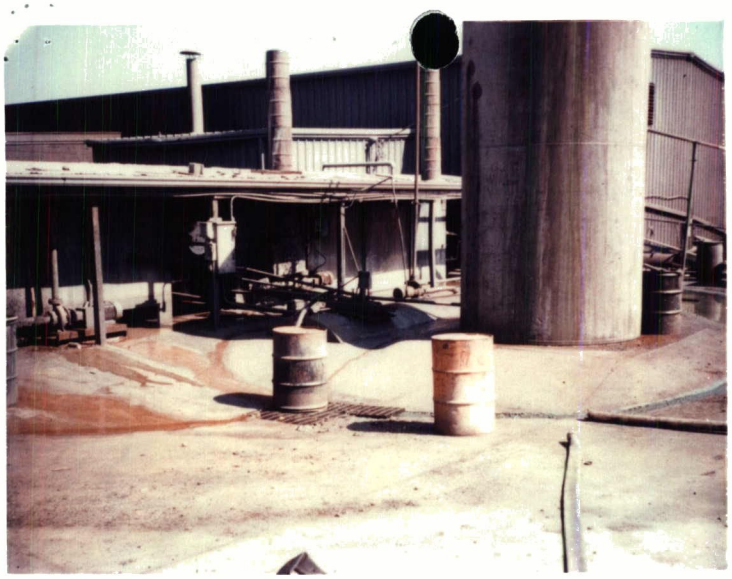
16. OTHER EQUIPMENT

Tulsa Rencon
DBA TRI Containers



Area Plan Not To Scale

HAZSIT NO. ~~0403786~~
SHEET 2 of 2



Photographer / Witness

Courtwell / Echelle

Date / Time / Direction

Aug 6/85/10:30 / NE

Comments: Process Area

Storm Drain

Photographer / Witness

Date / Time / Direction

Comments:

Photographer / Witness

Date / Time / Direction

Comments:

HAZSIT NO. ~~040 3786~~
SHEET 1 of 2

Photographer / Witness
Cantwell / Echelle

Date / Time / Direction
Aug 8/85/10:30 / NNE

Comments: Retention Pond

Photographer / Witness
Cantwell / Echelle

Date / Time / Direction
Aug 8/85/10:30 ENE.

Comments: Used Drum Storage

Photographer / Witness
Cantwell / Echelle

Date / Time / Direction
Aug 8/85/10:30 / W

Comments: Used Drum Storage yard Drain