



Oregon

Tina Kotek, Governor

Department of Environmental Quality

Northwest Region

700 NE Multnomah Street, Suite 600

Portland, OR 97232

(503) 229-5263

FAX (503) 229-6945

TTY 711

May 28, 2024

Katherine Kirkpatrick
circlejkhk@yahoo.com

RE: UST Compliance Inspection
DEQ UST # 12146
Blue River Gas

Attention Katherine Kirkpatrick,

The Oregon Department of Environmental Quality (DEQ) is conducting underground storage tank (UST) inspections throughout Oregon. The purpose of this letter is to inform you that your facility, among others, has been selected for inspection. A thorough inspection of your facility will be conducted to determine compliance with state and federal UST requirements. The inspection will include a file review, compliance testing documentation, and a site visit. **The date you receive this letter is the date that the inspection starts.** If you have work done after that date, you will need to have the previous set of records available for evaluation in addition to the most recent records.

If I do not hear from you, the site visit for this inspection for this facility is scheduled for June 24, 2024, starting at approximately 10:00 AM. Please note that the inspection will require uninterrupted participation and attendance by you or a knowledgeable assistant. For the site visit part of the inspection, you need to provide access to tank sumps, under dispenser areas, cathodic protection rectifiers, and leak monitoring equipment. DEQ will not touch the equipment or enter the facility; if you are unable to assist with equipment access, please have your UST Service Provider there.

To complete this inspection, you will need to have required proof of financial responsibility and proof of A/B operator training available on-site on the day of the inspection or sent to me prior to the inspection at dave.pardue@deq.oregon.gov. If the records are not available during the day of the inspection, you will have five (5) business days to provide the records to me electronically. After which time this facility may be subject to enforcement actions.

Our records indicate that the USTs at your facility are in Temporary Closure. During the site visit, the DEQ will verify that the tanks are empty as defined by OAR 340-150-0010(32) and the equipment is secure as indicated in OAR-340-0167.

At a minimum the following records are required to complete this inspection:

- Financial responsibility mechanism.
- Cathodic protection testing (if applicable).
- Tank lining records (if applicable).

As stated previously, DEQ will not touch any equipment and if you are unable to assist with equipment access, please have your UST Service Provider there to remove manway or sump lids and be prepared to stick the tanks to show the presence of any liquid.

If violations are found at the time of the inspection without prior notification, DEQ is required to initiate enforcement action. For UST violations, enforcement usually begins with a field citation option, which includes paying a monetary fine and conducting corrective actions.

Some enforcement may be referred to the Office of Compliance and Enforcement for further review which may result in civil penalties.

Thank you for your cooperation. I can be reached at 503-360-4287 or dave.pardue@deq.oregon.gov to answer any questions you may have and assist you in the preparation for your inspection.

Sincerely,

Dave Pardue

Dave Pardue
UST Program Coordinator

CC: File

Mark Drouin
UST Program
Mark.drouin@deq.oregon.gov
541-213-1204

Oregon Department of Environmental Quality - Underground Storage Tank Program
Technical Compliance Inspection - UST Inspection Report (Temporary Closure)

Inspector: Dave Pardue

Date: ____ 6/24/2024

Time: ____ 1000

Facility: __ 12146

I. Site Information					
Facility Name:	Blue River Gas	Permittee:	Katheryn Kirkpatrick		
Site Address:	51752 Cascade St	Organization:			
City:	Blue River	Phone:	(541) 822-3592		
II. Tank Information					
DEQ Permit #	BFHDE	BFHDF	BFHDG		
Estimated Gallons	7K	3K	2K		
Substance	gas	DIESEL	gas		
Tank Material	composite	composite	composite		
Tank Install Date	9/6/2002	9/6/2002	9/6/2002		
Pipe Material	FRP	FRP	FRP		
Pipe Type	PRESSURE	PRESSURE	PRESSURE		
Pipe Install Date					
Overfill Device	ball float	ball float	ball float		
Objective of field visit: Temp Closure					
Notes and Comments from the UST database: <div style="float: right;"><input type="checkbox"/> Check file before conducting inspection</div>					
No FR since 2020 Compliance overdue as of 5/23/21					

III. Financial Responsibility	Compliance <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Type of coverage:	Begin Date:	End Date:
Coverage amount correct:	Number of tanks covered:	
Financial responsibility could also be in the form of self insurance, bonds, local government, trust fund, and or guarantee		

IV. Corrosion Protection	Compliance <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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<input type="checkbox"/> Cathodic <input type="checkbox"/> Galvanic <input type="checkbox"/> Impressed Current <input type="checkbox"/> Fiberglass/composite tanks			
Steel tank with cathodic?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Steel pipes with cathodic?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Steel flex-lines with cathodic?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date of cathodic test: _____			
Last two tests available?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Did last test pass?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If not:			
Was failed test reported to DEQ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Was system repaired?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date of repair? _____			
Cathodic retested within 6 mos. of repair?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Date of retesting? _____			
If impressed current system:			
Rectifier Operational?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Rectifier log maintained?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Rectifier been operating continuously	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<input type="checkbox"/> Tank Lining			
Date of lest test? _____			
Pressure test conducted after tank lining inspection?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

V. General notes from inspection

Representative onsite: _____ none

email: _____

Compliance Determination: ☐ No Violations Observed ☒ Observed violations resulting in enforcement

Inspector Signature: _ Dave Pardue

Date: ____ 6/24/2024













