Oregon
Tina Kotek, Governor

**Department of Environmental Quality**
**Northwest Region**
700 NE Multnomah Street, Suite 600
Portland, OR 97232
(503) 229-5696
FAX (503) 229-6124
TTY 711

July 30, 2024

Cain Petroleum Inc.
Attn: Ronald G Cain
4512 S Kelly Ave
Portland, OR 97239-4218

RE: UST Compliance Inspection
DEQ UST #11912 – 990 N Adair St, Cornelius

Dear Cain Petroleum Inc.:

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 facilities, among others, has been selected for inspection. A thorough inspection of your facilities will be conducted to determine compliance with state and federal UST requirements. **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 inspection for these facilities is scheduled for August 28th, 2024 starting at approximately 8:30 am at the DEQ UST #s listed below.**

**August 28th 8:30 am:**

- **DEQ UST # 11912 – 990 N Adair St, Cornelius**

Please note that the inspection will require uninterrupted participation and attendance by you or a knowledgeable assistant. For 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. This inspection may also include review of Stage I Vapor Recovery.

DEQ staff will not assist with operating tank gauges.

The DEQ requests the following documentation be submitted electronically via email prior to the inspection:

- Line and leak detector testing results for the past three years,
- Monthly tank leak detection records, one year
- Class A, B, and C training documentation,
- Financial responsibility mechanism,
- Annual tank gauge certification for the past three years
- Spill prevention testing records, was due by October 2020
- Monthly walkthroughs, one year
- Overfill Prevention Equipment testing, was due by October 2020
- Cathodic protection testing (if applicable). All tests since 2019.

Please submit these records to ingrid.gaffney@deq.oregon.gov for review. If these records cannot be submitted prior to the inspection, please have them available for review at the facility.

Owners must also be able to operate the tank gauge and print out applicable reports such as the tank setup and in-tank alarm reports. Owners also must be able to sound high fill over alarm from the tank gauge, if applicable.

DEQ will not touch any equipment, if you are unable to assist with equipment access, please have your UST Service Provider there. DEQ will need to observe what equipment is in the tank top sumps and under the dispensers. If ball floats are the primary overfill protection device, these will need to be verified during the inspection, please be able to locate and remove the ball floats.

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 is much like paying a traffic ticket and making corrections.

Some enforcement situations including repeat violations will go through a longer and more formal process including civil penalties.

Thank you for your cooperation. I can be reached at 503-229-5048 ingrid.gaffney@deq.oregon.gov to answer any questions you may have and assist you in the preparation for your inspection.

Sincerely,

Ingrid Gaffney

Ingrid Gaffney
UST Compliance Specialist

Oregon Department of Environmental Quality - Underground Storage Tank Program
Technical Compliance Inspection - UST Inspection Report

Inspector: Ingrid Gaffney Date: 8/28/2024 Time: 8:30 Facility: 11912

| I. Site Information | | | |
|---|---|---|---|
| Facility Name: Cornelius chevron | Permittee: CAIN Petroleum INC. | Contact Michael Bacon | |
| Site Address: 990 N Adair St | Organization: SAME | Phone | |
| City: Cornelius, OR 97113 | Phone: | | |

| II. Tank Information | | | | | |
|---|---|---|---|---|---|
| DEQ Permit # | BEJAJ | BEJBK | BEJBA | BEJBB | |
| Estimated Gallons | 20,000 | 20,000 | 10,000 | 10,000 | |
| Substance | GASOLINE | GASOLINE | GASOLINE | DIESEL | |
| Tank Material | Fiberglass Xerxes | Xerxes | → | → | |
| Tank Install Date | 3/17/1999 | 3/17/1999 | → | → | |
| Pipe Material | ~~Total Containment~~ APT | total Containment | → | APT | |
| Pipe Type | Pressure | Pressure | → | → | |
| Pipe Install Date | 3/17/1999 ~~2019~~ | → | → | New Sh Line | |
| Overfill Device | ALARM | ALARM | ALARM | ALARM | |

**Notes and Comments from the UST database:** ☑ *Check file before conducting inspection*

*Two 20,000 gal. tanks are siphon manifolded.

*7 liquid sensors.

If tanks are manifolded, which tanks: 20,000 x 2 (1/2)

**III. Operating Certificate** **Compliance** ☑ Yes ☐ No

☑ Current ☑ Accurate ☑ Posted for delivery drive to observe

**IV. Operator Training** **Compliance** ☑ Yes ☐ No

Class A/B Operator ☑ Yes ☐ No Name: Michael Bacon Date: 1/30/2015

Class C Operator ☑ Yes ☐ No ☐ Cardlock Benjamin Huffman 1/30/2015

**V. Financial Responsibility** **Compliance** ☑ Yes ☐ No

Type of coverage: Insurance Begin Date: 7/31/2024 End Date: 7/31/2025

Coverage amount correct: $1,000,000 Number of tanks covered: 4

Financial responsibility could also be in the form of self insurance, bonds, local government, trust fund, and or guarantee

**VI. Walkthrough Requirements** **Compliance** ☑ Yes ☐ No

Spill prevention and release detection equipment checked monthly? ☑ Yes ☐ No

Tank top sumps checked annually? ☑ Yes ☐ No

11912

**VII. Release Detection** | **Compliance** ☐ Yes ☑ No

**a) Annual Release Detection Operability Testing** (Sometimes referred to as Tank Gauge Certification)

Date of last testing: 1/3/2023 9/8/2022 Last three tests available? ☑ Yes ☐ No

**b) Piping Release Detection** *(Check all that apply)* aquiredsite in 2022

☑ *Pressurized Piping*

☑ Mechanical Leak Detector (MLLD) ☐ Electronic Leak Detector (ELLD) - *check for swiftcheck requirement*

Date of last testing: 9/21/2023 9/8/2022 Last three tests available? ☑ Yes ☐ No

Number of lines tested: 4 Number of LD tested: 4

Leak detector manufacturer make and model: 99LDVaporless

Tank gauge manufacturer make and model: TLS 350 Veeder Root

MLLD on turbine manifold? ☑ Yes ☐ No

MLLD product appropriate? (Example, diesel Red Jacket FX series on diesel system?) ☑ Yes ☐ No

If ELLD and no line testing: Annual 0.1 gph results from tank gauge? ☐ Yes ☐ No

☑ *Interstitial Monitoring*

[Monthly records must include, date system was checked, observations made, initials of person checking. Electronic records must include power status (on or off), alarm indication status (yes or no) and sensor malfunction notes (yes or no).]

Date of last sump testing: N/A Last two tests available? ☐ Yes ☐ No

Date of last sensor testing: N/A Last three tests available? ☐ Yes ☐ No

Float sensors installed correctly? ☐ Yes ☐ No

Interstitial space opened to sump? ☐ Yes ☐ No

Presence of water in sumps? ☐ Yes ☐ No

☐ *Safe Suction*

Check valve directly below suction pump? ☐ Yes ☐ No

**c) Monthly Tank Release Detection** (*Check all that apply*)

☑ Tank Gauge ☑ CSLD ☐ SCALD ☐ Static

Are correct tank sizes programmed at tank gauge? ☑ Yes ☐ No

Tank diameter/length seem appropriate? ☑ Yes ☐ No

Are tanks manifolded? ☑ Yes ☐ No

If so, tank gauge testing setup for manifolded tanks? ☐ Yes ☐ No

*If Veeder Root tank gauge leak detection*
- ☑ CSLD set at 99%
- ☑ Thermal coefficient set correctly? (Gasoline 0.00070; Diesel 0.00045)

If Incon/Franklin tank gauge leak detection
- ☐ If SCALD is Vol Qual set to 14% (or 99% confidence)
- ☐ Is API gravity set correctly? (Regular 63.5; Plus 62.8; Super 51.3; Diesel 32.8)

For all tank gauges doing static tests (Static tests require tank to be 50% full for a valid test)

☑ Interstitial Monitoring [Monthly records must include, date system was checked, observations made, initials of person checking. Electronic records must include power status (on or off), alarm indication status (yes or no) and sensor malfunction notes (yes or no).]

☐ ~~SIR~~ ~~Ensure pass or fail results within 30-day period. Inconclusive result means release detection requirement not met~~

Siphon manifold.

Tank release detection records available during inspection

| | 2024 | | | | | | | 2023 | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| T1: | ☐ Jan | ☐ Feb | ☐ Mar | ☐ Apr | ☐ May | ☐ Jun | ☐ Jul | ☐ Aug | ☐ Sep | ☐ Oct | ☐ Nov | ☑ Dec |
| T2: | ☐ Jan | ☐ Feb | ☐ Mar | ☐ Apr | ☐ May | ☐ Jun | ☐ Jul | ☐ Aug | ☐ Sep | ☐ Oct | ☐ Nov | ☐ Dec |
| T3: | ☐ Jan | ☐ Feb | ☐ Mar | ☐ Apr | ☐ May | ☐ Jun | ☐ Jul | ☐ Aug | ☐ Sep | ☐ Oct | ☐ Nov | ☐ Dec |
| T4: | ☐ Jan | ☐ Feb | ☐ Mar | ☐ Apr | ☐ May | ☐ Jun | ☐ Jul | ☐ Aug | ☐ Sep | ☑ Oct | ☐ Nov | ☐ Dec |
| T5: | ☐ Jan | ☐ Feb | ☐ Mar | ☐ Apr | ☐ May | ☐ Jun | ☐ Jul | ☐ Aug | ☐ Sep | ☐ Oct | ☐ Nov | ☐ Dec |

Inspector: Ingrid Gaffney Date: _____ Time: _____ Facility: 11912

**VIII. Spill Prevention** **Compliance** ☑ Yes ☐ No

Date(s) of testing: 1/2/2023 site aquired 2022 Number of spill buckets tested? 4

Did spill bucket pass most recent testing? ☑ Yes ☐ No If no, was spill bucket replaced/repaired? ☐ Yes ☐ No

During inspection, visual damage to spill bucket? ☐ Yes ☑ No

☑ Hydrostatic testing (test takes one hour to complete)

☐ Vacuum test (test takes 1 minute, ending vacuum must be 26 inches water column or greater)

**IX. Overfill Prevention** **Compliance** ☑ Yes ☐ No

Date(s) of testing: 9/21/2023 site aquired 2022

Overfill device pass most recent testing? ☐ Yes ☐ No If no, overfill device replaced? ☐ Yes ☐ No

Overfill method that was tested: ☑ Alarm ☐ Flapper ☐ Ball Float

*Overfill Alarm*

| | | |
|---|---|---|
| Alarm sounds when tank is 90% full | ☑ Yes | ☐ No |
| Driver can see or hear alarm at point of transfer? | ☑ Yes | ☐ No |
| Sound alarm from tank gauge during inspection? | ☐ Yes | ☐ No |

*Flapper Valve*

| | | |
|---|---|---|
| Testing verified the valve automatically restricts flow at 95% | ☐ Yes | ☐ No |
| Visual observation of flapper on day of inspection? | ☐ Yes | ☐ No |

*Ball Float*

| | | |
|---|---|---|
| Testing verified the ball float automatically restricts flow at 90% | ☐ Yes | ☐ No |
| Visual observation of ball float during inspection? | ☐ Yes | ☐ No |

**X. Corrosion Protection** **Compliance** ☐ Yes ☐ No

☐ Cathodic ☐ Galvanic ☐ Impressed Current

| | | |
|---|---|---|
| Steel tank with cathodic? | ☐ Yes | ☐ No |
| Steel pipes with cathodic? | ☐ Yes | ☐ No |
| Steel flex-lines with cathodic? | ☐ Yes | ☐ No |
| Date of cathodic test: _____ | | |
| Last two tests available? | ☐ Yes | ☐ No |
| Did last test pass? | ☐ Yes | ☐ No |
| If not: | | |
| Was failed test reported to DEQ? | ☐ Yes | ☐ No |
| Was system repaired? | ☐ Yes | ☐ No |
| Date of repair? _____ | | |
| Cathodic retested within 6 mos. of repair? | ☐ Yes | ☐ No |
| Date of retesting? _____ | | |
| If impressed current system: | | |
| Rectifier Operational? | ☐ Yes | ☐ No |
| Rectifier log maintained? | ☐ Yes | ☐ No |
| Rectifier been operating continuously | ☐ Yes | ☐ No |

☐ Tank Lining

| | | |
|---|---|---|
| Date of last test? _____ | | |
| Pressure test conducted after tank lining inspection? | ☐ Yes | ☐ No |

**XI. General notes from inspection**

Representative onsite: Michael Bacon email: mbacon@caupetroleum.com

+ Aquired in 2022
* Monday Sept. 16th testing
* CSLD & siphon manifold w/ 20,000 tanks x2

violation

* Dispenser #1 Supreme pipe is leaking. *

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

Inspector Signature: Ingrid Gaffney Date: 8/28/2024


1:990 N Adair St, Cornelius, OR 97113

2: Tank nest looking north


3:Dispenser #10

4: UDC #10


5:Dispenser #9

6: UDC #9

7: UDC #8


8: Dispenser #8

9: UDC #4


10:Dispenser #4

11: UDC #1

12: UDC #1 leaking supreme pipe

13: Pipe leak in UDC #1


14: Unleaded sump

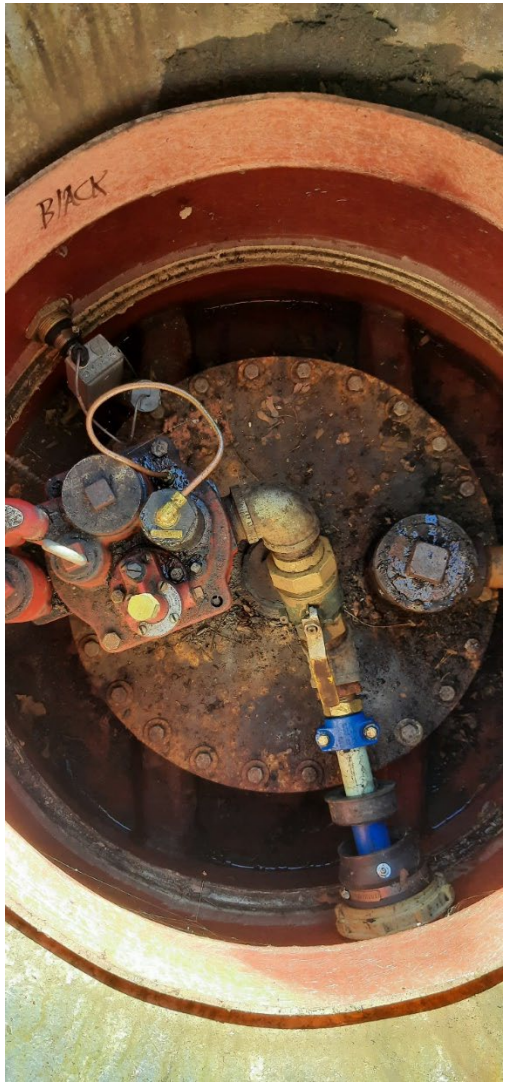
15: Unleaded fill

16: Diesel sump

17: Diesel fill

18: Unleaded sump with manifold of 20,000 gallon tanks


19: Premium fill




20: Premium sump

State of Oregon Department of Environmental Quality

**Program Enforcement No.** 2024-FC-9507

# Department of Environmental Quality
## Underground Storage Tank Program

# Field Citation
# For UST Violations

This section for DEQ use only



| DEQ Information | | UST Facility Information | |
|---|---|---|---|
| **Inspection Date:** | 08/28/2024 | **Facility ID#:** | 11912 |
| **Inspector:** | Ingrid Gaffney | **Facility Name:** | Cornelius Chevron |
| **DEQ Office:** | 700 NE Multnomah St, Ste 600 | **Facility Address:** | 990 N Adair St |
| | Portland, OR 97232-9535 | | Cornelius, OR 97113 |
| **Phone #:** | 503-875-1246 | **County:** | Multnomah |

**Oregon DEQ inspected the facility listed above and identified the UST violations listed on page 3 of this Field Citation.**

**Field Citation Issued:** ○ **In Person** ◉ **By Mail** ○ **Both** **Date Issued:** 08/28/2024

Facility Representative Present During Inspection: Benjamin Huffman ○ Permittee ○ Owner ◉ Other

Name of Permittee or Owner: Cain Petroleum, Inc. Attn: Michael Bacon

Mailing Address: 4512 S Kelly Ave, Portland, OR 97239-4218

**Field Citation Penalty** – See Page 3 for detailed listing of each violation. $ 300 .00

**This Field Citation is issued in accordance with the requirements for the expedited enforcement of underground storage tank (UST) violations, OAR 340-150-0250.**

**Owner or Permittee should select Option 1 or Option 2 below and return a signed copy of this form to DEQ by the following date:** 09/28/2024

DEQ Revenue Section
700 NE Multnomah St. #600
Portland, Oregon 97232

**Check one option**

☐ **Option 1 - I acknowledge that the listed violation(s) have occurred and I am remitting the listed field citation penalty.**

☐ **Option 2 - I do not want to participate in the expedited enforcement process and understand that my file will be referred to the Department's Office of Compliance and Enforcement for formal enforcement action.**

| Name: | Owner / Permittee |
|---|---|
| Signature: | Date: |

## Important

**Read pages 2 and 3 for more information about your options and a detailed listing of violations and compliance requirements.**

# Field Citation Requirements

The permittee or owner should select Option 1 or Option 2 and return a signed copy of Page 1 of the Field Citation form within thirty (30) days of issuance of the Field Citation. If the permittee or owner fails to sign and send Page 1 of the Field Citation form back or pay the penalty within thirty days, Option 1 expires, the Field Citation will serve as a Pre-Enforcement Notice (PEN) and the permittee and owner will be subject to formal enforcement including the imposition of civil penalties in accordance with OAR Chapter 340, Division 12.

The permittee or owner must complete the actions required to correct the violations listed on the Field Citation by the date specified to prevent further enforcement action by DEQ.

## Option 1:

By checking Option 1 the permittee or owner acknowledges that the violations listed on Page 3 of this Field Citation have occurred and agrees to pay the established penalty.

By submitting payment of the penalty amount, the responding permittee or owner agrees to accept the field citation as a final order of the Environmental Quality Commission (commission) and waives any and all rights and objections to the form, content, manner of service and timeliness of the Field Citation; to a contested case hearing and judicial review of the Field Citation [OAR 340-150-0250(6)]; and to service of a copy of this Final Order (*i.e.*, no other copy will be provided).

Upon the Department's receipt of payment of the penalty amount set forth in the Field Citation, the Field Citation becomes a Final Order of the Commission that:

1. Imposes upon the permittee or owner a civil penalty in the amount listed on Page 1 of this Field Citation; and
2. Requires the permittee or owner to satisfactorily complete the requirements and actions necessary to correct the violations documented by the dates set forth on Page 3 of this Field Citation.

Failure by the permittee or owner to complete the actions set forth on Page 3 of the Field Citation by the specified date violates the Commission Order and subjects the permittee and owner to a formal enforcement action including the imposition of additional civil penalties.

## Option 2:

The permittee or owner may deny that the violations as listed on Page 3 of this Field Citation have occurred or contest the Field Citation process by checking Option 2 and submitting to the Department a signed copy of Page 1 of the Field Citation. In that event, the Field Citation will serve as a Pre-Enforcement Notice (PEN) and the permittee and owner will be subject to formal enforcement for those violations set forth in the Field Citation, including the imposition of civil penalties in accordance with OAR Chapter 340, Division 12. Civil penalties that will be imposed by the formal enforcement process will exceed the Field Citation penalties for the same violation(s).

**The Department appreciates your cooperation and efforts to comply with the regulations for underground storage tank systems.**

Department of Environmental Quality (DEQ) Underground Storage Tank Program

# UST FIELD CITATION

**DATE ISSUED:** 08/28/2024 **PROGRAM ENFORCEMENT NO.:** 2024-FC-9507 **FACILITY ID:** 11912 

| | | | | |
|---|---|---|---|---|
| **Violation #1:** ***TCR:** (•) Y ( ) N | Failing investigate or confirm a suspected release in dispenser #1 from the supreme pipe. | | | |
| Corrective Action: | Initiate investigation to confirm suspected release from UDC #1 supreme piping within 5 days. Repair or replace pipe and check regular sump. Provide repair and testing report to DEQ within 30 days. | | | |
| Rule Citation: **OAR 340-150-** 0163(1) | | Penalty Amount: $ 300 .00 | Correct Violation by: 9/28/2024 | Date Corrected: |
| **Violation #2:** ***TCR:** ( ) Y ( ) N | | | | |
| Corrective Action: | | | | |
| Rule Citation: **OAR 340-150-** | | Penalty Amount: $ .00 | Correct Violation by: | Date Corrected: |
| **Violation #3:** ***TCR:** ( ) Y ( ) N | | | | |
| Corrective Action: | | | | |
| Rule Citation: **OAR 340-150-** | | Penalty Amount: $ .00 | Correct Violation by: | Date Corrected: |
| **Violation #4:** ***TCR:** ( ) Y ( ) N | | | | |
| Corrective Action: | | | | |
| Rule Citation: **OAR 340-150-** | | Penalty Amount: $ .00 | Correct Violation by: | Date Corrected: |
| **Violation #5:** ***TCR:** ( ) Y ( ) N | | | | |
| Corrective Action: | | | | |
| Rule Citation: **OAR 340-150-** | | Penalty Amount: $ .00 | Correct Violation by: | Date Corrected: |
| **Violation #6:** ***TCR:** ( ) Y ( ) N | | | | |
| Corrective Action: | | | | |
| Rule Citation: **OAR 340-150-** | | Penalty Amount: $ .00 | Correct Violation by: | Date Corrected: |

| | | |
|---|---|---|
| | Total Penalty Amount (This Page): $ 300 .00 | Total Penalty Amount (All Pages): $ 300 .00 |

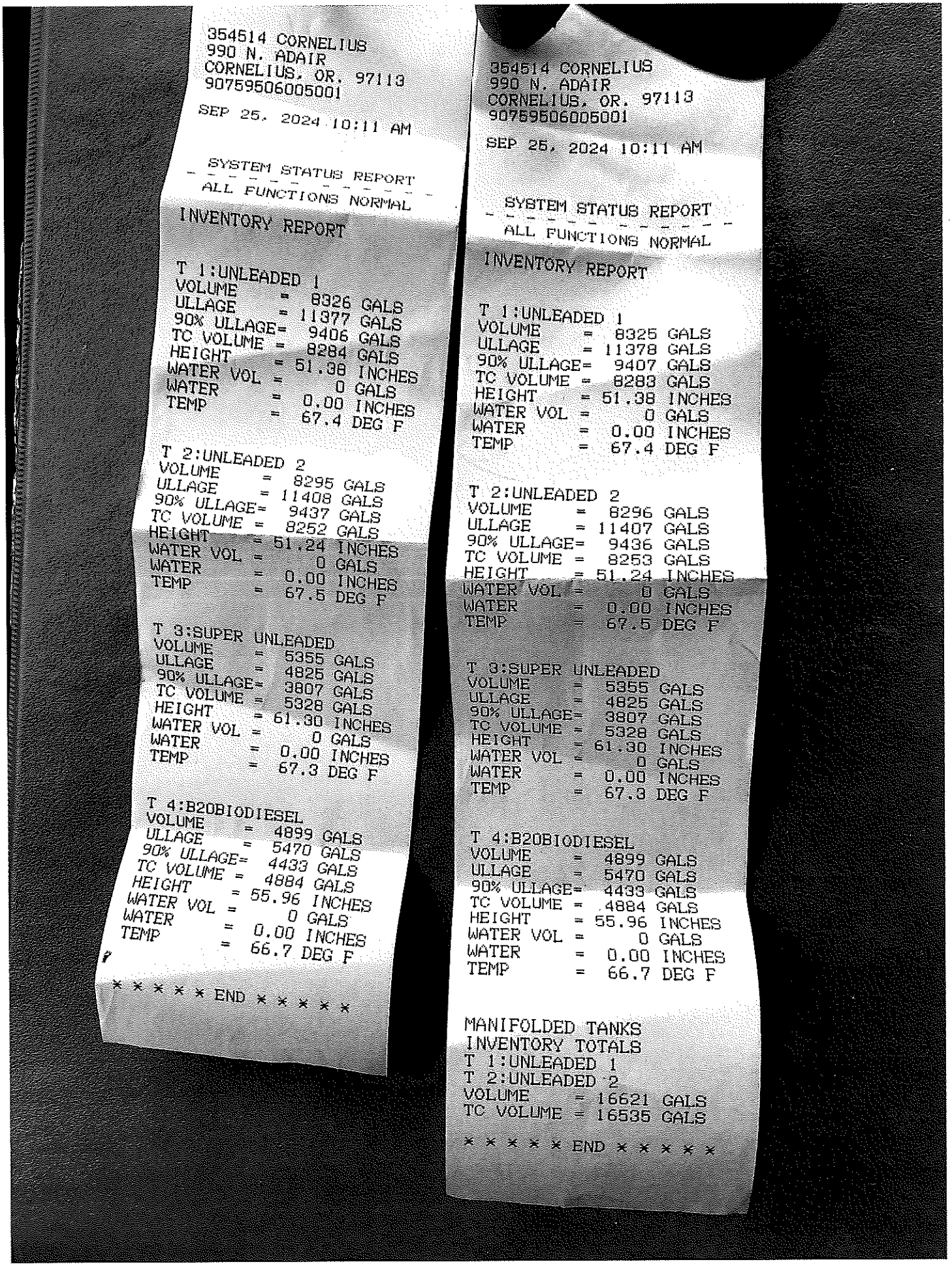
**YOU MUST CORRECT THE VIOLATIONS AS REQUIRED, ENTER THE DATES CORRECTED, SIGN THE STATEMENT BELOW AND RETURN THIS FORM TO THE DEQ INSPECTOR LISTED ON PAGE 1 ON OR BEFORE:_____**

**Retain a copy of this form and all documentation of corrective actions for your records.**

***I hereby certify that the UST violations noted above have been corrected***:_____/_____

*Permittee/Owner Signature* *Date*

*TCR: Technical Compliance Rate



354514 CORNELIUS
990 N. ADAIR
CORNELIUS, OR. 97113
90759506005001

SEP 25, 2024 10:11 AM

SYSTEM STATUS REPORT
ALL FUNCTIONS NORMAL

INVENTORY REPORT

T 1:UNLEADED 1
VOLUME = 8326 GALS
ULLAGE = 11377 GALS
90% ULLAGE= 9406 GALS
TC VOLUME = 8284 GALS
HEIGHT = 51.38 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 67.4 DEG F

T 2:UNLEADED 2
VOLUME = 8295 GALS
ULLAGE = 11408 GALS
90% ULLAGE= 9437 GALS
TC VOLUME = 8252 GALS
HEIGHT = 51.24 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 67.5 DEG F

T 3:SUPER UNLEADED
VOLUME = 5355 GALS
ULLAGE = 4825 GALS
90% ULLAGE= 3807 GALS
TC VOLUME = 5328 GALS
HEIGHT = 61.30 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 67.3 DEG F

T 4:B20BIODIESEL
VOLUME = 4899 GALS
ULLAGE = 5470 GALS
90% ULLAGE= 4433 GALS
TC VOLUME = 4884 GALS
HEIGHT = 55.96 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 66.7 DEG F

* * * * * END * * * * *

354514 CORNELIUS
990 N. ADAIR
CORNELIUS, OR. 97113
90759506005001

SEP 25, 2024 10:11 AM

SYSTEM STATUS REPORT
ALL FUNCTIONS NORMAL

INVENTORY REPORT

T 1:UNLEADED 1
VOLUME = 8325 GALS
ULLAGE = 11378 GALS
90% ULLAGE= 9407 GALS
TC VOLUME = 8283 GALS
HEIGHT = 51.38 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 67.4 DEG F

T 2:UNLEADED 2
VOLUME = 8296 GALS
ULLAGE = 11407 GALS
90% ULLAGE= 9436 GALS
TC VOLUME = 8253 GALS
HEIGHT = 51.24 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 67.5 DEG F

T 3:SUPER UNLEADED
VOLUME = 5355 GALS
ULLAGE = 4825 GALS
90% ULLAGE= 3807 GALS
TC VOLUME = 5328 GALS
HEIGHT = 61.30 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 67.3 DEG F

T 4:B20BIODIESEL
VOLUME = 4899 GALS
ULLAGE = 5470 GALS
90% ULLAGE= 4433 GALS
TC VOLUME = 4884 GALS
HEIGHT = 55.96 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 66.7 DEG F

MANIFOLDED TANKS
INVENTORY TOTALS
T 1:UNLEADED 1
T 2:UNLEADED 2
VOLUME = 16621 GALS
TC VOLUME = 16535 GALS

* * * * * END * * * * *

# INVOICE

Mascott EQUIPMENT
Since 1960

Remit To:
MASCOTT EQUIPMENT CO.
435 NE Hancock
Portland, OR 97212
(503) 282-2587
FAX (503) 288-9664
www.mascottec.com

| | |
|---|---|
| Number | 610622 |
| Date | 09/05/2024 |
| Page | 1 |

*Bill-to Account #:* **3880**
**CAIN PETROLEUM**
**4512 SW KELLY AVENUE**
**PORTLAND, OR 97239**

*Ship-to #:* **31**
**CAIN PETROLEUM**
**990 N ADAIR AVE**
**CORNELIUS, OR 97113**

| Reference # | Shipped | Salesperson | Terms | Tax Code | Doc # | Wh | Freight | Ship Via |
|---|---|---|---|---|---|---|---|---|
| BEN 971-409-8860 | 09/05/2024 | HOWELLS | NET 10 DAYS | OR NOTAX | 492819 | 01 | BILL | SERVICE |

| Item | Description | Ordered | Shipped | Backordrd | UM | Price | UM | Extension |
|---|---|---|---|---|---|---|---|---|
| | DEQ INSPECTION REVEALED SEEPAGE ON PIPE NEAR SHEAR VALVE. PUMP # 1/2 PREMIUM. CLEAN AND TIGHTEN AS NEEDED | | | | | | | |
| LABOR-PD | LABOR, (On-Site/Shop Service) | .75 | .75 | .00 | EA | 105.00 | EA | 78.75 |
| LAPTOP CHARGE-PD | Network Access/Software Update | 1 | 1 | 0 | EA | 33.00 | EA | 33.00 |
| TRIP CHARGE-PD20 | LABOR, TRAVEL 0-20 MILEAGE | 1 | 1 | 0 | EA | 121.00 | EA | 121.00 |
| FUEL SURCHARGE-PD20 | FUEL SURCHARGE | 1 | 1 | 0 | EA | 6.70 | EA | 6.70 |
| SHOP-PD | Miscellaneous Materials Used | 1 | 1 | 0 | EA | 19.73 | EA | 19.73 |
| | 09/04 TECH TG: #1/2 TRACED LEAKAGE TO BASE PLATE CONNECTION TO TESTER'S PORT DISMANTLED, CLEANED, RE-PIPE DOPED, REASSEMBLED, VERIFIED 09/04 SAP | | | | | | | |

1. 25% RESTOCK FEE ON ANY RETURNED MERCHANDISE
2. NO RETURNS ACCEPTED WITHOUT PRIOR APPROVAL
3. THE CONDITIONS AS SET FORTH ON THE REVERSE SIDE HEREON SHALL APPLY TO THIS SALE
4. 15 DAYS ALLOWED FOR CORE RETURN REFUNDS

| Merchandise | Misc | Discount | CAT Tax | Freight | Total Due |
|---|---|---|---|---|---|
| 259.18 | .00 | | 1.17 | .00 | 260.35 |

**PLEASE PAY ON INVOICE - REMIT TO 435 NE HANCOCK - PORTLAND, OR 97212 - NO STATEMENT ISSUED UNLESS REQUESTED**
**PAST DUE ACCOUNTS SUBJECT TO 1.0% INTEREST CHARGE PER MONTH, 12% ANNUAL RATE**
**CREDIT CARD PAYMENTS ARE SUBJECT TO 3% SERVICE FEE.**

*Do not write below this line*

**Customer Copy**

**Continued on next page ...**

SOINV

01-610622

Mascott EQUIPMENT COMPANY

Portland 435 NE Hancock Portland, OR 97212
Tri-Cities 200 S. 20th Ave. Pasco, WA 99301
Seattle 6530 5th Place South Seattle, WA 98108
Alaska 5610 Silverado Way Anchorage, AK 98518

Site Name: Cornelius Chevron Test Date: 09/16/2024
Address: 990 N Adair St
City, State, Zip: Cornelius, OR 97113

Test Data:

| | 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|---|
| Product | Regular 1 | Regular 2 | Super | Diesel | |
| Manufacturer | Vaporless | Vaporless | Vaporless | Vaporless | |
| Model | 99LD2000 | 99LD2000 | 99LD2000 | 99LD2000 | |
| Full Operating Pressure (psi) | 31 | 30 | 30 | 28 | |
| Trip Time (sec) | 3 | 4 | 3 | 4 | |
| Test Leak Rate (ml / min)(gph) | 3.0 gph | 3.0 gph | 3.0 gph | 3.0 gph | |
| Pass / Fail | Pass | Pass | Pass | Pass | |

Notes:

Per PEI RP 1200 9.1.6

This document certifies that the leak detectors tests were performed at the facility referenced above in accordance to the equipment manufacturers specifications. The results as listed are to my knowledge true and accurate. This document's test pass/fail is determined using a low flow threshold trip rate of 3 gph at 10 PSI.

Inspected By:

Technician Name: G. Druery

Technician Signature: Greg Druery

Digitally signed by Greg Druery
DN: cn=Greg Druery, o, ou, email=gdruery@mascottec.com, c=US
Date: 2024.09.17 12:12:28 -07'00'

# DATA CHART FOR USE WITH PETROTITE LINE TESTER

WO# : 493573

STATION NUMBER: _____

DATE: 09/16/2024

1 LOCATION: Cornelius Chevron - 990 N Adair St - Cornelius, OR 97113

2 OWNER: Cain Petroleum

3 OPERATOR: Cain Petroleum

4 REASON FOR TEST: ANNUAL COMPLIANCE TESTING

5 TEST REQUESTED BY: Cain Petroleum

6 SPECIAL INSTRUCTIONS: _____

7 CONTRACTOR OR COMPANY MAKING TEST MECHANIC(S) NAME: MASCOTT EQUIPMENT CO. G. Druery

8 IS A TANK TEST TO BE MADE WITH THIS LINE TEST? ☐ YES ☑ NO

9 MAKE AND TYPE OF PUMP OR DISPENSER (SUCTION OR SUBMERSIBLE) FE Petro and Red Jacket submersible

10 WEATHER Warming TEMPERATURE IN TANKS 68 °F _____ °C COVER OVER LINE Concrete BURIAL DEPTH 30"

| 11 IDENTIFY EACH LINE AS TESTED | 12 TIME (MILITARY) | 13 LOG OF TEST PROCEDURES, AMBIENT TEMPARATURE, WEATHER, ETC | 14 PRESSURE Psi OR kPa | | 15 VOLUME READING | | | 16 REMARKS SIZE, LENGTH & TYPE OF LINE, # FLEX CONNECTORS CONCLUSION, REPAIRS AND COMMENTS |
|---|---|---|---|---|---|---|---|---|
| | | | BEFORE | AFTER | BEFORE | AFTER | NET CHANGE | |
| Regular | 1345 | Set up for line test. Pressurize line and observe. | 75 | | | | | APPROX. 220' Double wall flexible |
| | 1415 | Begin testing | ---------<br>--------- | 60 | ---------<br>--------- | .0630 | ---------<br>--------- | Method of isolation: BALL VALVE |
| | 1430 | First reading | 60 | 60 | .0630 | .0630 | +.0000 | |
| | 1445 | Second reading | 60 | 60 | .0630 | .0630 | +.0000 | TESTED ALL LINES SIMULTANEOUSLY USING |
| | 1500 | Third reading | 60 | 60 | .0630 | .0630 | +.0000 | MANIFOLD. |
| | 1515 | End of test | 60 | 60 | .0630 | .0630 | +.0000 | |
| | | | | | | | | Passed sensitivity test |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

DATA CHART FOR USE WITH PETROTITE LINE TESTER WO# : 493573

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Super | 1345 | Set up for line test.<br>Pressurize line and observe. | 75 | | | | | APPROX. 190' Double wall flexible |
| | 1415 | Begin testing | ----------<br>---------- | 60 | ---------<br>--------- | .0630 | ---------<br>--------- | Method of isolation:<br>BALL VALVE |
| | 1430 | First reading | 60 | 60 | .0630 | .0630 | +.0000 | |
| | 1445 | Second reading | 60 | 60 | .0630 | .0630 | +.0000 | TESTED ALL LINES<br>SIMULTANEOUSLY USING |
| | 1500 | Third reading | 60 | 60 | .0630 | .0630 | +.0000 | MANIFOLD. |
| | 1515 | End of test | 60 | 60 | .0630 | .0630 | +.0000 | |
| | | | | | | | | Passed sensitivity test |
| | | | | | | | | |
| Diesel | 1345 | Set up for line test.<br>Pressurize line and observe. | 75 | | | | | APPROX. 25' Double wall flexible |
| | 1415 | Begin testing | ----------<br>---------- | 60 | ---------<br>--------- | .0630 | ---------<br>--------- | Method of isolation:<br>BALL VALVE |
| | 1430 | First reading | 60 | 60 | .0630 | .0630 | +.0000 | |
| | 1445 | Second reading | 60 | 60 | .0630 | .0630 | +.0000 | TESTED ALL LINES<br>SIMULTANEOUSLY USING |
| | 1500 | Third reading | 60 | 60 | .0630 | .0630 | +.0000 | MANIFOLD. |
| | 1515 | End of test | 60 | 60 | .0630 | .0630 | +.0000 | |
| | | | | | | | | Passed sensitivity test |

TEST RESULTS

| Line Identification | Pass / Fail | Net Volume Change per Hour | Date Tested |
|---|---|---|---|
| Regular | Pass | +.0000 | 09/16/2024 |
| Super | Pass | +.0000 | 09/16/2024 |
| Diesel | Pass | +.0000 | 09/16/2024 |

17 CONTRACTOR CERTIFICATION
Tech: G. Druery
X Greg Druery Digitally signed by Greg Druery DN: cn=Greg Druery, o, ou, email=gdruery@mascotinc.com, c=US Date: 2024.09.17 12:12:56 -07'00'
Signature

CERTIFICATION#
8d0c96fb

Mascott Equipment Co.
435 NE Hancock Portland, OR 97212
(800) 452-5019

| | | | |
|---|---|---|---|
| Company Name: | Cornelius Chevron | Monitor Make: | Veeder-Root |
| Site Address: | 990 N Adair St | Monitor Model: | TLS-350 |
| City, State, Zip: | Cornelius, OR 97113 | Serial Number: | 90759506005001 |
| Date: | 09/16/2024 | Software Version: | 133.01 |

| Console | Tank # / Size | Pass | Fail |
|---|---|---|---|
| Print or view status of all tanks. Leave copy on site if any programming changes are made. | Unleaded 1 19,703 gal | X | |
| | Unleaded 2 19,703 gal | X | |
| | Super 10,180 gal | X | |
| | Diesel 10,369 gal | X | |
| | | | |
| | | | |
| | | | |

| Actions Performed / Console | Pass | Fail | N/A | Comments |
|---|---|---|---|---|
| Verify date and time | X | | | |
| Verify setup values | X | | | |
| Check battery | X | | | |
| Test external alarm if applicable | X | | | |
| Run system diagnostics | X | | | |
| Verify tests for compliance | X | | | |

| Sensors | Sensor # / Location | Pass | Fail |
|---|---|---|---|
| Print out sensor status and leave on site. Put all sensors into alarm and verify proper operation. | Unleaded 1 STP sump | X | |
| | Unleaded 2 STP sump | X | |
| | Super STP sump | X | |
| | Diesel STP sump | X | |
| | Unleaded 1 annular | X | |
| | Unleaded 2 annular | X | |
| | Super-Diesel annular | X | |
| | | | |
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| | | | |
| | | | |

| Actions Performed / Probes | Pass | Fail | N/A | Comments |
|---|---|---|---|---|
| Run probe diagnostics | X | | | |
| Inspect cables and connections | X | | | |
| Removed, Cleaned and inspected probe | X | | | |
| Verified overfill function at 90% | | | X | |

| Actions Performed / Sensors | Pass | Fail | N/A | Comments |
|---|---|---|---|---|
| Run sensor diagnostics | X | | | |
| Inspect cables and connections | X | | | |
| Test sensor for operation | X | | | |
| Inspect and clean sensors | X | | | |

| Additional Service Checks | Yes | No | N/A | Comments |
|---|---|---|---|---|
| Lights, LED's, annunciator functioning? | X | | | |
| Is customer saving required reports? | X | | | |
| Is Cathodic Protection Required? | | X | | |
| ***Note CP issues and test date*** | | | | |
| Type of Overfill Protection | Electronic alarm | | | |
| Type of Leak Detection | Mechanical | | | |
| Primary Tank Leak Detection Method | CSLD | | | |

**Technician Name:** G. Druery **Technician Signature:** Greg Druery

Digitally signed by Greg Druery
DN: cn=Greg Druery, o, ou, email=gdruery@mascottec.com, c=US
Date: 2024.09.17 12:11:38 -07'00'

Tanks Program
DEQ State of Oregon

State of Oregon Department of Environmental Quality

# Annual Release Detection Operability Testing Form

- **In-tank setup and alarm history reports must be attached to testing form.**
- **Maintain three years of testing records.**
- Instructions on how to use this form.

| **I. FACILITY INFORMATION** – Type or print (in ink) all items. | | | | **TEST DATE** |
|---|---|---|---|---|
| Facility ID #: | 11912 | Facility Name: | Cornelius Chevron | 09/16/2024 |
| **II. AUTOMATIC TANK GAUGE** | | | | ■ **Pass** ☐ **Fail** |
| ATG Manufacturer: | Veeder Root | ATG Model: | TLS-350 | |
| Release Detection Method: | | Tank Gauge 0.2 gph leak tests: (■ Continuous ☐ Static) ☐ SIR ■ Interstitial Monitoring | | |
| Battery Backup Functional? ■ Yes ☐ No | | ATG software properly programmed? ■ Yes ☐ No | | |
| ATG alarms functional and audible? ■ Yes ☐ No | | ATG In-Tank Setup Reports attached to form? ■ Yes | | |
| **III. TEST PROCEDURE** | | | | |
| ☐ PEI/RP 1200 | ■ Oregon Testing Procedures (Page 2) | ☐ Manufacturer Testing Procedures | ☐ Other Method (Describe) | |

## IV. PROBE AND TESTING INFORMATION

| Tank Number | 1 | 2 | 3 | 4 | |
|---|---|---|---|---|---|
| Product Stored | Regular | Regular | Super | Diesel | |
| Model | MAG | MAG | MAG Plus | MAG | |
| Is the ATG console clear of alarms? | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ☐ Yes ☐ No |
| Disconnect cable from tank probe. Is appropriate alarm triggered? | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ☐ Yes ☐ No |
| Tank gauge probes removed and inspected for damage? | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ☐ Yes ☐ No |
| Residual buildup on floats has been removed? | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ☐ Yes ☐ No |
| Float(s) move freely? | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ☐ Yes ☐ No |
| Measured product and water levels match ATG values? | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ☐ Yes ☐ No |
| Alarm history report attached? | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ☐ Yes ☐ No |
| **V. TEST RESULT** | ■ **Pass** ☐ **Fail** | ■ **Pass** ☐ **Fail** | ■ **Pass** ☐ **Fail** | ■ **Pass** ☐ **Fail** | ☐ **Pass** ☐ **Fail** |

Any "No" answer indicates the test failed. Failed tests must be remedied and retested immediately.

## VIII. COMMENTS

The comments section should be used to note additional information discovered or actions taken during testing that affect compliance

## IX. TESTER

| **Person conducting testing:** | G. Druery |
|---|---|

## DEQ tank gauge and probe functionality testing procedures

1. Inspect console and verify that there are no active or recurring warnings or alarms.
2. Confirm that both the visual and audible alarms on the tank gauge console function correctly.
3. Verify that the correct set-up parameters for the probes and appropriate tank leak detection is programmed correctly.
4. Test battery backup (if present).
5. Remove tank probe from tank.
6. Disconnect probe, wait for "Probe Out" alarm, reconnect probe and reset tank gauge.
7. Remove build up from probes.
8. Measure the fuel and water contents of the tank and compare with the tank gauge inventory report ensuring that they are the same.
9. Ensure that the probe's fuel and water floats are the correct type for the product stored in the tank.
10. Reposition the floats, measure distance from bottom of the probe, and utilize tank charts to confirm accuracy of the tank gauge.
11. Reinstall probes ensuring that the tank riser cap seals properly and the communication cable seal is tight.
12. If tank gauge is equipped with printer, attach the printed tank gauge in-tank setup and alarm history report demonstrating that probes were tested.

## DEQ sensor functionality testing procedures

1. Inspect sensor for damage.
2. Place sensor in at least three inches of testing liquid.
3. Verify sensor alarms at tank gauge or sensor has appropriate alarm response (dispenser or turbine shut down).
4. Clear alarm.
5. Reinstall sensor upon verification of proper operation.
6. If tank gauge is equipped with printer, attach the printed tank gauge in-tank setup and alarm history report demonstrating that sensors were tested.

SYSTEM SETUP

SEP 16, 2024 12:40 PM

SYSTEM UNITS
U.S.
SYSTEM LANGUAGE
ENGLISH
SYSTEM DATE/TIME FORMAT
MON DD YYYY HH:MM:SS xM

354514 CORNELIUS
990 N. ADAIR
CORNELIUS, OR. 97113
90759506005001

SHIFT TIME 1 : 6:00 AM
SHIFT TIME 2 : DISABLED
SHIFT TIME 3 : DISABLED
SHIFT TIME 4 : DISABLED

TANK PER TST NEEDED WRN
DISABLED
TANK ANN TST NEEDED WRN
DISABLED

LINE RE-ENABLE METHOD
PASS LINE TEST

LINE PER TST NEEDED WRN
DISABLED
LINE ANN TST NEEDED WRN
DISABLED

PRINT TC VOLUMES
ENABLED

TEMP COMPENSATION
VALUE (DEG F ): 60.0
STICK HEIGHT OFFSET
DISABLED
ULLAGE: 90%

H-PROTOCOL DATA FORMAT
HEIGHT
DAYLIGHT SAVING TIME
ENABLED
START DATE
MAR WEEK 2 SUN
START TIME
2:00 AM
END DATE
NOV WEEK 1 SUN
END TIME
2:00 AM

RE-DIRECT LOCAL PRINTOUT
DISABLED

EURO PROTOCOL PREFIX
S

SYSTEM SECURITY
CODE : 000000

TANK CHART SECURITY
DISABLED

CUSTOM ALARMS
DISABLED

SERVICE NOTICE
DISABLED

```
T 4:B20BIODIESEL
PRODUCT CODE      :       4
THERMAL COEFF     :.000450
TANK DIAMETER     : 120.00
TANK PROFILE      : 20 PTS
        FULL VOL  :  10369
 114.0 INCH VOL   :  10297
 108.0 INCH VOL   :  10042
 102.0 INCH VOL   :   9670
  96.0 INCH VOL   :   9209
  90.0 INCH VOL   :   8676
  84.0 INCH VOL   :   8085
  78.0 INCH VOL   :   7448
  72.0 INCH VOL   :   6778
  66.0 INCH VOL   :   6084
  60.0 INCH VOL   :   5377
  54.0 INCH VOL   :   4667
  48.0 INCH VOL   :   3965
  42.0 INCH VOL   :   3280
  36.0 INCH VOL   :   2624
  30.0 INCH VOL   :   2007
  24.0 INCH VOL   :   1441
  18.0 INCH VOL   :    939
  12.0 INCH VOL   :    516
   6.0 INCH VOL   :    193


FLOAT SIZE:       4.0 IN.

WATER WARNING     :     2.0
HIGH WATER LIMIT:     2.5
WATER ALARM FILTER:  LOW

MAX OR LABEL VOL:  10369
OVERFILL LIMIT    :    90%
                  :   9332
HIGH PRODUCT      :    95%
                  :   9850
DELIVERY LIMIT    :    10%
                  :   1036

LOW PRODUCT       :    500
LEAK ALARM LIMIT:      10
SUDDEN LOSS LIMIT:     99
TANK TILT         :   0.00
PROBE OFFSET      :   0.00


SIPHON MANIFOLDED TANKS
T#: NONE
LINE MANIFOLDED TANKS
T#: NONE


LEAK MIN PERIODIC:    15%
                  :   1555

LEAK MIN ANNUAL   :     0%
                  :      0


PERIODIC TEST TYPE
                STANDARD

ANNUAL TEST FAIL
          ALARM DISABLED

PERIODIC TEST FAIL
          ALARM DISABLED

GROSS TEST FAIL
          ALARM DISABLED

ANN TEST AVERAGING:  OFF
PER TEST AVERAGING:  OFF

TANK TEST NOTIFY:    OFF

TNK TST SIPHON BREAK:OFF

DELIVERY DELAY    :  1 MIN
```

ALARM HISTORY REPORT

---- IN-TANK ALARM -----

T 1:UNLEADED 1

OVERFILL ALARM
SEP 21, 2023 12:14 PM
JAN 3, 2023 2:15 PM

HIGH PRODUCT ALARM
JAN 3, 2023 2:15 PM

INVALID FUEL LEVEL
SEP 21, 2023 12:12 PM
DEC 23, 2022 2:45 PM

PROBE OUT
SEP 16, 2024 2:35 PM
SEP 21, 2023 12:15 PM
SEP 21, 2023 12:14 PM

DELIVERY NEEDED
JAN 19, 2024 8:03 AM
SEP 21, 2023 12:12 PM
AUG 3, 2023 8:06 PM

PER TST NEEDED WRN
JAN 7, 2023 12:00 AM

PER TST NEEDED ALM
FEB 1, 2023 12:00 AM
JAN 31, 2023 12:00 AM
JAN 29, 2023 12:00 AM

CSLD INCR RATE WARN
JUN 21, 2023 3:26 AM
JUN 6, 2023 8:00 AM
MAY 31, 2023 5:43 AM

LOW TEMP WARNING
SEP 16, 2024 2:37 PM
SEP 21, 2023 12:15 PM

* * * * * END * * * * *

ALARM HISTORY REPORT

---- IN-TANK ALARM -----

T 2:UNLEADED 2

OVERFILL ALARM
SEP 21, 2023 12:06 PM
JAN 3, 2023 2:21 PM

HIGH PRODUCT ALARM
JAN 3, 2023 2:21 PM

**From:** LITKE Emily * DEQ
**To:** GAFFNEY Ingrid * DEQ; Michael Bacon
**Cc:** UST Duty Officer * DEQ; bhuffman@cainpetroleum.com
**Subject:** RE: DEQ UST Inspection Determination: Cornelius Chevron #11912
**Date:** Tuesday, October 1, 2024 3:21:00 PM

---

I am following up on the inspection completed by Ingrid Gaffney on 8/28/24 for facility 11912 Cornelius Chevron

The deadline for the payment of the $300 fine and corrective was 9/28/24.

Please send the invoice from the work completed by Mascott on 9/16/24 and the invoice/work order for work completed by Patriot Environmental on 9/25/24.

Emily Litke (she/her)
Duty Officer, Underground Storage Tanks
DEQ Headquarters, Land Quality Division
700 NE Multnomah Street, Suite 600
Portland OR 97232-4100
503-806-9516
Emily.LITKE@deq.oregon.gov

-----Original Message-----
From: GAFFNEY Ingrid * DEQ <Ingrid.GAFFNEY@deq.oregon.gov>
Sent: Monday, September 23, 2024 5:21 PM
To: Michael Bacon <MBacon@cainpetroleum.com>
Cc: UST Duty Officer * DEQ <UST.DutyOfficer@DEQ.oregon.gov>; bhuffman@cainpetroleum.com; LITKE Emily * DEQ <Emily.Litke@deq.oregon.gov>
Subject: RE: DEQ UST Inspection Determination: Cornelius Chevron #11912

Great. Thanks so much! Make sure to send the payment too.

Regards,

Ingrid Gaffney
UST Compliance Inspector
DEQ UST Program
700 NE Multnomah St, Ste 600
Portland, OR 97232
https://www.oregon.gov/deq/Pages/index.aspx
she/ her

-----Original Message-----
From: Michael Bacon <MBacon@cainpetroleum.com>
Sent: Monday, September 23, 2024 4:32 PM
To: GAFFNEY Ingrid * DEQ <Ingrid.GAFFNEY@deq.oregon.gov>
Cc: UST Duty Officer * DEQ <UST.DutyOfficer@deq.oregon.gov>; bhuffman@cainpetroleum.com; LITKE Emily * DEQ <Emily.Litke@deq.oregon.gov>
Subject: Re: DEQ UST Inspection Determination: Cornelius Chevron #11912

Yes we had Mascott out the next day to address the seepage and found that it was a simple fix. I will forward you the invoice. Testing was performed on the 16th and everything passed. I will forward you the test results from Mascott. Alex from Patriot Environmental will be onsite 09/25 to address veeder root issues

On Mon, Sep 23, 2024 at 9:40 AM GAFFNEY Ingrid * DEQ <Ingrid.GAFFNEY@deq.oregon.gov> wrote:
>
> Hello Cain Petroleum
>
> Has anything been sent or done to demonstrate to DEQ the below violations are addressed?
>
>
>
> Please provide an update. Thank you!
>
>
>
> Regards,
>
>
>
> Ingrid Gaffney
>
> UST Compliance Inspector
>
> DEQ UST Program
>
> 700 NE Multnomah St, Ste 600
>
> Portland, OR 97232
>
> https://www.oregon.gov/deq/Pages/index.aspx
>
> she/ her
>
>
>
> From: UST Duty Officer * DEQ
> Sent: Wednesday, August 28, 2024 3:35 PM
> To: Michael Bacon <MBacon@cainpetroleum.com>
> Cc: bhuffman@cainpetroleum.com
> Subject: DEQ UST Inspection Determination: Cornelius Chevron #11912
>
>
>
> Hello Michael and Ben,
>
> Thank you for meeting with DEQ onsite August 28, 2024, to inspect the underground storage tanks at 990 N Adair St, Cornelius, OR 97113.
>
>
>
> Since DEQ observed a release of product in UDC #1 (product
> dripping/weeping from the supreme pipe) at 990 N Adair St, Cornelius.
> DEQ must issue a field citation, per enforcement guidance. Please see
> the attached citation and note about your set up for the siphoned
> tanks
>
>
>
> This field citation will help DEQ keep track of the necessary repairs and testing required due to the observed

release. The field citation states Troutdale Foodmart has 30 days to perform or schedule the repairs and necessary repair testing.
>
> If you require more time, please let the DEQ UST Duty Officer know (see contact below).
>
> Please contact the UST Duty Officer at 503-229-5034 or ust.dutyofficer@deq.oregon.gov for the investigation and testing and be sure to email the UST duty officer when sending over the final documentation.
>
>
>
> CORRECTIVE ACTIONS:
>
>
>
> Initiate investigation to confirm suspected release into UDC #1 supreme pipe within 5 days. Provide repair and testing report to DEQ within 30 days.
> Have the service provider correct the siphon manifold setting for the site so that the two 20,000 tanks are set up correctly in the veeder root.
>
>
>
>
>
>
>
>
> Regards,
>
>
>
> Ingrid Gaffney
>
> UST Compliance Inspector
>
> DEQ UST Program
>
> 700 NE Multnomah St, Ste 600
>
> Portland, OR 97232
>
> https://www.oregon.gov/deq/Pages/index.aspx
>
> she/ her
>
>

--
Michael Bacon
Retail Operations Coordinator
Cain Petroleum
971-717-4383

# DEPARTMENT OF ENVIRONMENTAL QUALITY
# TRANSMITTAL ADVICE
## UST EXPEDITED ENFORCEMENT PROG

| CK # | TRAN AMNT | FOR THE ACCOUNT OF | CIVIL PENALTY # | |
|---|---|---|---|---|
| CHECK NAME | | REASON FOR PAYMENT | INV # | RCPT # |
| 43242 | **300.00** | CORNELIUS CHEVRON | **2024-FC-9507** | |
| CAIN PETROLEUM | | FIELD CITATION FOR UST VIOLATION | **FC-9507** | |
| | **300.00** | **TOTAL** | | |

| | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| ED20241002AD | 43242 | $300.00 | CORNELIUS CHEVRON | CAIN PETROLEUM | FC-9507 | 2024-FC-9507 | USTXPENF | FIELD CITATION FOR UST VIOLATION | 10/2/2024 | |

Connection: PROD

# Program Enforcement Maintenance

Program Enforcement | Violations List (1) | Corrective Actions (0) | Link Actions

File # 11912

Create PEN | Create OCE Enforcement

Name CORNELIUS CHEVRON

Location 990 N ADAIR ST / CORNELIUS / WASHINGTON

Permit UST General Permit.34-11912-2024-OPER.Active

**Recipient Information:** Show Recipient Selection

Name / Title Bacon, Michael /

Address 4512 S Kelly Ave / Portland / OR / 97239-4218

Phone / Fax / Email 503-546-3535 / 503-546-3530 / Mbacon@cainpetroleum.com

Edit | Delete

Program Enforcement Number 2024-FC-9507

Regulatory Program Underground Storage Tanks

Staff Assigned Ingrid Gaffney

Enforcement Type Field Citation

Enforcement Action Issued Date 08/28/2024 Show Calendar

Response Received Date Show Calendar

Payment Due Date 09/28/2024 Show Calendar

Payment Received Date Show Calendar

Penalty Amount $300.00

PEN Referral Date Show Calendar

Closed Date Show Calendar

Withdrawn Date Show Calendar

Link To Complaint

Comments Dispenser #1 has a suspected release from a weeping supreme pipe.
Check #43242 for $300 on the account of Cain Petroleum was received and processed on 10/2/24. DA

Edit | Delete

Create By 08/28/2024 03:24:11 PM Ingrid Gaffney

Program Enforcement No. 2024-FC-9507

# Department of Environmental Quality
## Underground Storage Tank Program

# Field Citation
# For UST Violations

State of Oregon Department of Environmental Quality

OCT 02 2024

This section for DEQ use only



| DEQ Information | | UST Facility Information | |
|---|---|---|---|
| **Inspection Date:** | 08/28/2024 | **Facility ID#:** | 11912 |
| **Inspector:** | Ingrid Gaffney | **Facility Name:** | Cornelius Chevron |
| **DEQ Office:** | 700 NE Multnomah St, Ste 600 | **Facility Address:** | 990 N Adair St |
| | Portland, OR 97232-9535 | | Cornelius, OR 97113 |
| **Phone #:** | 503-875-1246 | **County:** | Multnomah |

**Oregon DEQ inspected the facility listed above and identified the UST violations listed on page 3 of this Field Citation.**

**Field Citation Issued:** ○ **In Person** ◉ **By Mail** ○ **Both** **Date Issued:** 08/28/2024

Facility Representative Present During Inspection: Benjamin Huffman ○ Permittee ○ Owner ◉ Other

Name of Permittee or Owner: Cain Petroleum, Inc. Attn: Michael Bacon

Mailing Address: 4512 S Kelly Ave, Portland, OR 97239-4218

**Field Citation Penalty** – See Page 3 for detailed listing of each violation. $ 300 .00

**This Field Citation is issued in accordance with the requirements for the expedited enforcement of underground storage tank (UST) violations, OAR 340-150-0250.**

**Owner or Permittee should select Option 1 or Option 2 below and return a signed copy of this form to DEQ by the following date:** 09/28/2024

DEQ Revenue Section
700 NE Multnomah St. #600
Portland, Oregon 97232

**Check one option**

☒ **Option 1 - I acknowledge that the listed violation(s) have occurred and I am remitting the listed field citation penalty.**

☐ **Option 2 - I do not want to participate in the expedited enforcement process and understand that my file will be referred to the Department's Office of Compliance and Enforcement for formal enforcement action.**

Name: MICHAEL BACON Owner / Permittee

Signature: Michael B Date: 09/25/24

## Important

**Read pages 2 and 3 for more information about your options and a detailed listing of violations and compliance requirements.**

# Field Citation Requirements

The permittee or owner should select Option 1 or Option 2 and return a signed copy of Page 1 of the Field Citation form within thirty (30) days of issuance of the Field Citation. If the permittee or owner fails to sign and send Page 1 of the Field Citation form back or pay the penalty within thirty days, Option 1 expires, the Field Citation will serve as a Pre-Enforcement Notice (PEN) and the permittee and owner will be subject to formal enforcement including the imposition of civil penalties in accordance with OAR Chapter 340, Division 12.

The permittee or owner must complete the actions required to correct the violations listed on the Field Citation by the date specified to prevent further enforcement action by DEQ.

**Option 1:**

By checking Option 1 the permittee or owner acknowledges that the violations listed on Page 3 of this Field Citation have occurred and agrees to pay the established penalty.

By submitting payment of the penalty amount, the responding permittee or owner agrees to accept the field citation as a final order of the Environmental Quality Commission (commission) and waives any and all rights and objections to the form, content, manner of service and timeliness of the Field Citation; to a contested case hearing and judicial review of the Field Citation [OAR 340-150-0250(6)]; and to service of a copy of this Final Order (*i.e.*, no other copy will be provided).

Upon the Department's receipt of payment of the penalty amount set forth in the Field Citation, the Field Citation becomes a Final Order of the Commission that:

1. Imposes upon the permittee or owner a civil penalty in the amount listed on Page 1 of this Field Citation; and
2. Requires the permittee or owner to satisfactorily complete the requirements and actions necessary to correct the violations documented by the dates set forth on Page 3 of this Field Citation.

Failure by the permittee or owner to complete the actions set forth on Page 3 of the Field Citation by the specified date violates the Commission Order and subjects the permittee and owner to a formal enforcement action including the imposition of additional civil penalties.

**Option 2:**

The permittee or owner may deny that the violations as listed on Page 3 of this Field Citation have occurred or contest the Field Citation process by checking Option 2 and submitting to the Department a signed copy of Page 1 of the Field Citation. In that event, the Field Citation will serve as a Pre-Enforcement Notice (PEN) and the permittee and owner will be subject to formal enforcement for those violations set forth in the Field Citation, including the imposition of civil penalties in accordance with OAR Chapter 340, Division 12. Civil penalties that will be imposed by the formal enforcement process will exceed the Field Citation penalties for the same violation(s).

**The Department appreciates your cooperation and efforts to comply with the regulations for underground storage tank systems.**

Department of Environmental Quality (DEQ) Underground Storage Tank Program

# UST FIELD CITATION

**DATE ISSUED:** 08/28/2024 **PROGRAM ENFORCEMENT NO.:** 2024-FC-9507 **FACILITY ID:** 11912 

| | | | |
|---|---|---|---|
| **Violation #1:** *TCR: (•) Y ( ) N | Failing investigate or confirm a suspected release in dispenser #1 from the supreme pipe. | | |
| Corrective Action: | Initiate investigation to confirm suspected release from UDC #1 supreme piping within 5 days. Repair or replace pipe and check regular sump. Provide repair and testing report to DEQ within 30 days. | | |
| Rule Citation: **OAR 340-150-** 0163(1) | Penalty Amount: $ 300 .00 | Correct Violation by: 9/28/2024 | Date Corrected: 9/5/24 |
| **Violation #2:** *TCR: ( ) Y ( ) N | | | |
| Corrective Action: | | | |
| Rule Citation: **OAR 340-150-** | Penalty Amount: $ .00 | Correct Violation by: | Date Corrected: |
| **Violation #3:** *TCR: ( ) Y ( ) N | | | |
| Corrective Action: | | | |
| Rule Citation: **OAR 340-150-** | Penalty Amount: $ .00 | Correct Violation by: | Date Corrected: |
| **Violation #4:** *TCR: ( ) Y ( ) N | | | |
| Corrective Action: | | | |
| Rule Citation: **OAR 340-150-** | Penalty Amount: $ .00 | Correct Violation by: | Date Corrected: |
| **Violation #5:** *TCR: ( ) Y ( ) N | | | |
| Corrective Action: | | | |
| Rule Citation: **OAR 340-150-** | Penalty Amount: $ .00 | Correct Violation by: | Date Corrected: |
| **Violation #6:** *TCR: ( ) Y ( ) N | | | |
| Corrective Action: | | | |
| Rule Citation: **OAR 340-150-** | Penalty Amount: $ .00 | Correct Violation by: | Date Corrected: |

Total Penalty Amount (This Page): $ 300 .00 Total Penalty Amount (All Pages): $ 300 .00

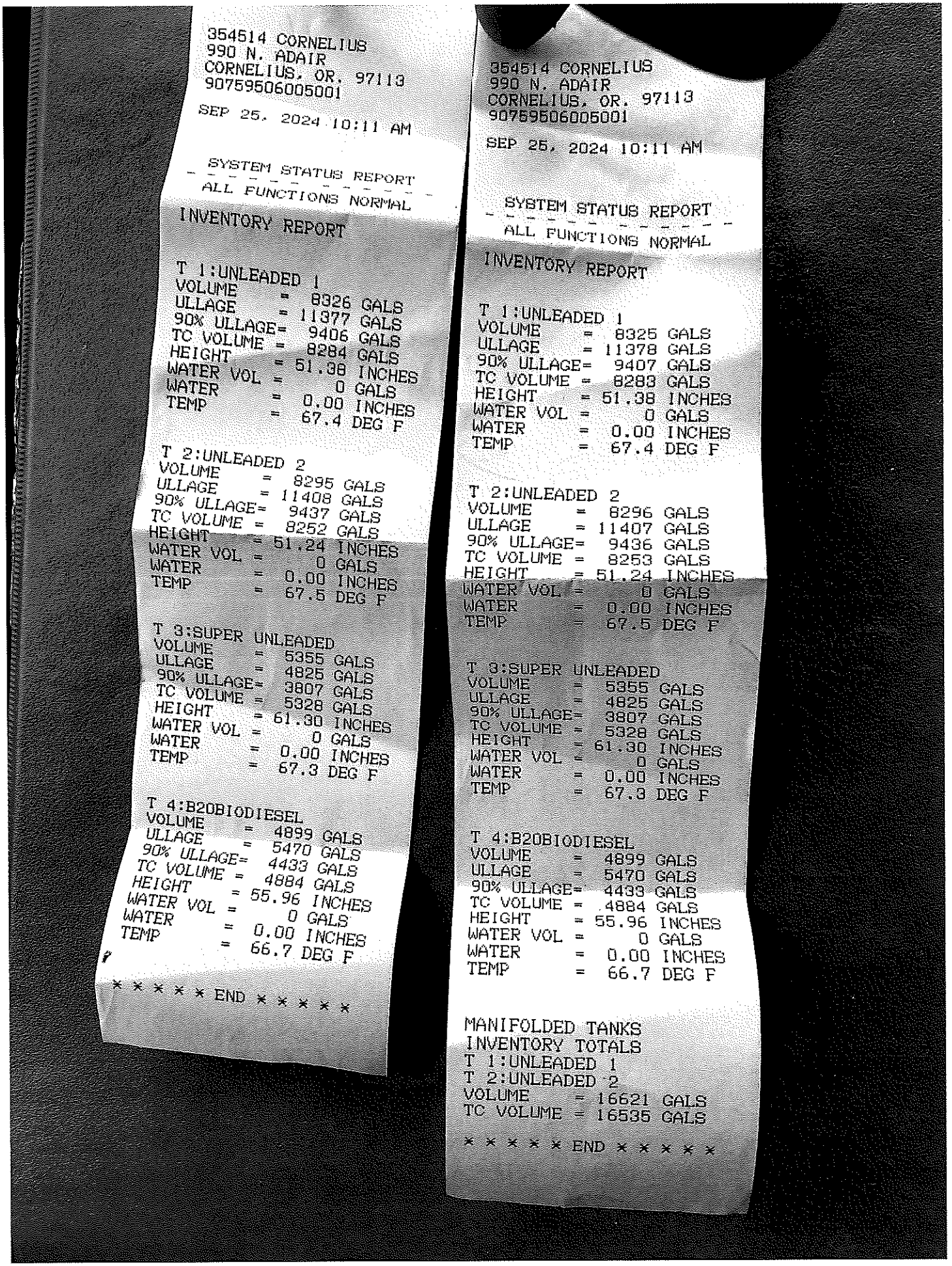
**YOU MUST CORRECT THE VIOLATIONS AS REQUIRED, ENTER THE DATES CORRECTED, SIGN THE STATEMENT BELOW AND RETURN THIS FORM TO THE DEQ INSPECTOR LISTED ON PAGE 1 ON OR BEFORE:** _____

**Retain a copy of this form and all documentation of corrective actions for your records.**

***I hereby certify that the UST violations noted above have been corrected:*** _____ / 09/25/24

*Permittee/Owner Signature* *Date*

*TCR: Technical Compliance Rate



354514 CORNELIUS
990 N. ADAIR
CORNELIUS, OR. 97113
90759506005001

SEP 25, 2024 10:11 AM

SYSTEM STATUS REPORT
ALL FUNCTIONS NORMAL

INVENTORY REPORT

T 1:UNLEADED 1
VOLUME = 8326 GALS
ULLAGE = 11377 GALS
90% ULLAGE= 9406 GALS
TC VOLUME = 8284 GALS
HEIGHT = 51.38 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 67.4 DEG F

T 2:UNLEADED 2
VOLUME = 8295 GALS
ULLAGE = 11408 GALS
90% ULLAGE= 9437 GALS
TC VOLUME = 8252 GALS
HEIGHT = 51.24 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 67.5 DEG F

T 3:SUPER UNLEADED
VOLUME = 5355 GALS
ULLAGE = 4825 GALS
90% ULLAGE= 3807 GALS
TC VOLUME = 5328 GALS
HEIGHT = 61.30 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 67.3 DEG F

T 4:B20BIODIESEL
VOLUME = 4899 GALS
ULLAGE = 5470 GALS
90% ULLAGE= 4433 GALS
TC VOLUME = 4884 GALS
HEIGHT = 55.96 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 66.7 DEG F

* * * * * END * * * * *

354514 CORNELIUS
990 N. ADAIR
CORNELIUS, OR. 97113
90759506005001

SEP 25, 2024 10:11 AM

SYSTEM STATUS REPORT
ALL FUNCTIONS NORMAL

INVENTORY REPORT

T 1:UNLEADED 1
VOLUME = 8325 GALS
ULLAGE = 11378 GALS
90% ULLAGE= 9407 GALS
TC VOLUME = 8283 GALS
HEIGHT = 51.38 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 67.4 DEG F

T 2:UNLEADED 2
VOLUME = 8296 GALS
ULLAGE = 11407 GALS
90% ULLAGE= 9436 GALS
TC VOLUME = 8253 GALS
HEIGHT = 51.24 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 67.5 DEG F

T 3:SUPER UNLEADED
VOLUME = 5355 GALS
ULLAGE = 4825 GALS
90% ULLAGE= 3807 GALS
TC VOLUME = 5328 GALS
HEIGHT = 61.30 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 67.3 DEG F

T 4:B20BIODIESEL
VOLUME = 4899 GALS
ULLAGE = 5470 GALS
90% ULLAGE= 4433 GALS
TC VOLUME = 4884 GALS
HEIGHT = 55.96 INCHES
WATER VOL = 0 GALS
WATER = 0.00 INCHES
TEMP = 66.7 DEG F

MANIFOLDED TANKS
INVENTORY TOTALS
T 1:UNLEADED 1
T 2:UNLEADED 2
VOLUME = 16621 GALS
TC VOLUME = 16535 GALS

* * * * * END * * * * *

# INVOICE

Mascott EQUIPMENT
Since 1960

Remit To:
MASCOTT EQUIPMENT CO.
435 NE Hancock
Portland, OR 97212
(503) 282-2587
FAX (503) 288-9664
www.mascottec.com

| | |
|---|---|
| Number | 610622 |
| Date | 09/05/2024 |
| Page | 1 |

*Bill-to Account #:* **3880**
**CAIN PETROLEUM**
**4512 SW KELLY AVENUE**
**PORTLAND, OR 97239**

*Ship-to #:* **31**
**CAIN PETROLEUM**
**990 N ADAIR AVE**
**CORNELIUS, OR 97113**

| Reference # | Shipped | Salesperson | Terms | Tax Code | Doc # | Wh | Freight | Ship Via |
|---|---|---|---|---|---|---|---|---|
| BEN 971-409-8860 | 09/05/2024 | HOWELLS | NET 10 DAYS | OR NOTAX | 492819 | 01 | BILL | SERVICE |

| Item | Description | Ordered | Shipped | Backordrd | UM | Price | UM | Extension |
|---|---|---|---|---|---|---|---|---|
| | DEQ INSPECTION REVEALED SEEPAGE ON PIPE NEAR SHEAR VALVE. PUMP # 1/2 PREMIUM. CLEAN AND TIGHTEN AS NEEDED | | | | | | | |
| LABOR-PD | LABOR, (On-Site/Shop Service) | .75 | .75 | .00 | EA | 105.00 | EA | 78.75 |
| LAPTOP CHARGE-PD | Network Access/Software Update | 1 | 1 | 0 | EA | 33.00 | EA | 33.00 |
| TRIP CHARGE-PD20 | LABOR, TRAVEL 0-20 MILEAGE | 1 | 1 | 0 | EA | 121.00 | EA | 121.00 |
| FUEL SURCHARGE-PD20 | FUEL SURCHARGE | 1 | 1 | 0 | EA | 6.70 | EA | 6.70 |
| SHOP-PD | Miscellaneous Materials Used | 1 | 1 | 0 | EA | 19.73 | EA | 19.73 |
| | 09/04 TECH TG: #1/2 TRACED LEAKAGE TO BASE PLATE CONNECTION TO TESTER'S PORT DISMANTLED, CLEANED, RE-PIPE DOPED, REASSEMBLED, VERIFIED 09/04 SAP | | | | | | | |

1. 25% RESTOCK FEE ON ANY RETURNED MERCHANDISE
2. NO RETURNS ACCEPTED WITHOUT PRIOR APPROVAL
3. THE CONDITIONS AS SET FORTH ON THE REVERSE SIDE HEREON SHALL APPLY TO THIS SALE
4. 15 DAYS ALLOWED FOR CORE RETURN REFUNDS

| Merchandise | Misc | Discount | CAT Tax | Freight | Total Due |
|---|---|---|---|---|---|
| 259.18 | .00 | | 1.17 | .00 | 260.35 |

**PLEASE PAY ON INVOICE - REMIT TO 435 NE HANCOCK - PORTLAND, OR 97212 - NO STATEMENT ISSUED UNLESS REQUESTED**
**PAST DUE ACCOUNTS SUBJECT TO 1.0% INTEREST CHARGE PER MONTH, 12% ANNUAL RATE**
**CREDIT CARD PAYMENTS ARE SUBJECT TO 3% SERVICE FEE.**

*Do not write below this line*

**Customer Copy**

**Continued on next page ...**

SOINV

01-610622

Mascott EQUIPMENT COMPANY

Portland 435 NE Hancock Portland, OR 97212
Tri-Cities 200 S. 20th Ave. Pasco, WA 99301
Seattle 6530 5th Place South Seattle, WA 98108
Alaska 5610 Silverado Way Anchorage, AK 98518

Site Name: Cornelius Chevron Test Date: 09/16/2024
Address: 990 N Adair St
City, State, Zip: Cornelius, OR 97113

Test Data:

| | 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|---|
| Product | Regular 1 | Regular 2 | Super | Diesel | |
| Manufacturer | Vaporless | Vaporless | Vaporless | Vaporless | |
| Model | 99LD2000 | 99LD2000 | 99LD2000 | 99LD2000 | |
| Full Operating Pressure (psi) | 31 | 30 | 30 | 28 | |
| Trip Time (sec) | 3 | 4 | 3 | 4 | |
| Test Leak Rate (ml / min)(gph) | 3.0 gph | 3.0 gph | 3.0 gph | 3.0 gph | |
| Pass / Fail | Pass | Pass | Pass | Pass | |

Notes:

Per PEI RP 1200 9.1.6

This document certifies that the leak detectors tests were performed at the facility referenced above in accordance to the equipment manufacturers specifications. The results as listed are to my knowledge true and accurate. This document's test pass/fail is determined using a low flow threshold trip rate of 3 gph at 10 PSI.

Inspected By:

Technician Name: G. Druery

Technician Signature: Greg Druery

Digitally signed by Greg Druery
DN: cn=Greg Druery, o, ou, email=gdruery@mascottec.com, c=US
Date: 2024.09.17 12:12:28 -07'00'

# DATA CHART FOR USE WITH PETROTITE LINE TESTER

WO# : 493573

STATION NUMBER: _____

DATE: 09/16/2024

1 LOCATION: Cornelius Chevron - 990 N Adair St - Cornelius, OR 97113

2 OWNER: Cain Petroleum

3 OPERATOR: Cain Petroleum

4 REASON FOR TEST: ANNUAL COMPLIANCE TESTING

5 TEST REQUESTED BY: Cain Petroleum

6 SPECIAL INSTRUCTIONS: _____

7 CONTRACTOR OR COMPANY MAKING TEST MECHANIC(S) NAME: MASCOTT EQUIPMENT CO. G. Druery

8 IS A TANK TEST TO BE MADE WITH THIS LINE TEST? ☐ YES ☑ NO

9 MAKE AND TYPE OF PUMP OR DISPENSER (SUCTION OR SUBMERSIBLE) FE Petro and Red Jacket submersible

10 WEATHER Warming TEMPERATURE IN TANKS 68 °F _____ °C COVER OVER LINE Concrete BURIAL DEPTH 30"

| 11 IDENTIFY EACH LINE AS TESTED | 12 TIME (MILITARY) | 13 LOG OF TEST PROCEDURES, AMBIENT TEMPARATURE, WEATHER, ETC | 14 PRESSURE Psi OR kPa | | 15 VOLUME READING | | | 16 REMARKS SIZE, LENGTH & TYPE OF LINE, # FLEX CONNECTORS CONCLUSION, REPAIRS AND COMMENTS |
|---|---|---|---|---|---|---|---|---|
| | | | BEFORE | AFTER | BEFORE | AFTER | NET CHANGE | |
| Regular | 1345 | Set up for line test. Pressurize line and observe. | 75 | | | | | APPROX. 220' Double wall flexible |
| | 1415 | Begin testing | ---------<br>--------- | 60 | ---------<br>--------- | .0630 | ---------<br>--------- | Method of isolation: BALL VALVE |
| | 1430 | First reading | 60 | 60 | .0630 | .0630 | +.0000 | |
| | 1445 | Second reading | 60 | 60 | .0630 | .0630 | +.0000 | TESTED ALL LINES SIMULTANEOUSLY USING |
| | 1500 | Third reading | 60 | 60 | .0630 | .0630 | +.0000 | MANIFOLD. |
| | 1515 | End of test | 60 | 60 | .0630 | .0630 | +.0000 | |
| | | | | | | | | Passed sensitivity test |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

DATA CHART FOR USE WITH PETROTITE LINE TESTER WO# : 493573

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Super | 1345 | Set up for line test.<br>Pressurize line and observe. | 75 | | | | | APPROX. 190' Double wall flexible |
| | 1415 | Begin testing | ----------<br>---------- | 60 | ---------<br>--------- | .0630 | ---------<br>--------- | Method of isolation:<br>BALL VALVE |
| | 1430 | First reading | 60 | 60 | .0630 | .0630 | +.0000 | |
| | 1445 | Second reading | 60 | 60 | .0630 | .0630 | +.0000 | TESTED ALL LINES<br>SIMULTANEOUSLY USING |
| | 1500 | Third reading | 60 | 60 | .0630 | .0630 | +.0000 | MANIFOLD. |
| | 1515 | End of test | 60 | 60 | .0630 | .0630 | +.0000 | |
| | | | | | | | | Passed sensitivity test |
| | | | | | | | | |
| Diesel | 1345 | Set up for line test.<br>Pressurize line and observe. | 75 | | | | | APPROX. 25' Double wall flexible |
| | 1415 | Begin testing | ----------<br>---------- | 60 | ---------<br>--------- | .0630 | ---------<br>--------- | Method of isolation:<br>BALL VALVE |
| | 1430 | First reading | 60 | 60 | .0630 | .0630 | +.0000 | |
| | 1445 | Second reading | 60 | 60 | .0630 | .0630 | +.0000 | TESTED ALL LINES<br>SIMULTANEOUSLY USING |
| | 1500 | Third reading | 60 | 60 | .0630 | .0630 | +.0000 | MANIFOLD. |
| | 1515 | End of test | 60 | 60 | .0630 | .0630 | +.0000 | |
| | | | | | | | | Passed sensitivity test |

TEST RESULTS

| Line Identification | Pass / Fail | Net Volume Change per Hour | Date Tested |
|---|---|---|---|
| Regular | Pass | +.0000 | 09/16/2024 |
| Super | Pass | +.0000 | 09/16/2024 |
| Diesel | Pass | +.0000 | 09/16/2024 |

17 CONTRACTOR CERTIFICATION
Tech: G. Druery
X Greg Druery Digitally signed by Greg Druery DN: cn=Greg Druery, o, ou, email=gdruery@mascotinc.com, c=US Date: 2024.09.17 12:12:56 -07'00'
Signature

CERTIFICATION#
8d0c96fb

Mascott Equipment Co.
435 NE Hancock Portland, OR 97212
(800) 452-5019

| | | | |
|---|---|---|---|
| Company Name: | Cornelius Chevron | Monitor Make: | Veeder-Root |
| Site Address: | 990 N Adair St | Monitor Model: | TLS-350 |
| City, State, Zip: | Cornelius, OR 97113 | Serial Number: | 90759506005001 |
| Date: | 09/16/2024 | Software Version: | 133.01 |

| Console | Tank # / Size | Pass | Fail |
|---|---|---|---|
| Print or view status of all tanks. Leave copy on site if any programming changes are made. | Unleaded 1 19,703 gal | X | |
| | Unleaded 2 19,703 gal | X | |
| | Super 10,180 gal | X | |
| | Diesel 10,369 gal | X | |
| | | | |
| | | | |
| | | | |

| Actions Performed / Console | Pass | Fail | N/A | Comments |
|---|---|---|---|---|
| Verify date and time | X | | | |
| Verify setup values | X | | | |
| Check battery | X | | | |
| Test external alarm if applicable | X | | | |
| Run system diagnostics | X | | | |
| Verify tests for compliance | X | | | |

| Sensors | Sensor # / Location | Pass | Fail |
|---|---|---|---|
| Print out sensor status and leave on site. Put all sensors into alarm and verify proper operation. | Unleaded 1 STP sump | X | |
| | Unleaded 2 STP sump | X | |
| | Super STP sump | X | |
| | Diesel STP sump | X | |
| | Unleaded 1 annular | X | |
| | Unleaded 2 annular | X | |
| | Super-Diesel annular | X | |
| | | | |
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| | | | |
| | | | |

| Actions Performed / Probes | Pass | Fail | N/A | Comments |
|---|---|---|---|---|
| Run probe diagnostics | X | | | |
| Inspect cables and connections | X | | | |
| Removed, Cleaned and inspected probe | X | | | |
| Verified overfill function at 90% | | | X | |

| Actions Performed / Sensors | Pass | Fail | N/A | Comments |
|---|---|---|---|---|
| Run sensor diagnostics | X | | | |
| Inspect cables and connections | X | | | |
| Test sensor for operation | X | | | |
| Inspect and clean sensors | X | | | |

| Additional Service Checks | Yes | No | N/A | Comments |
|---|---|---|---|---|
| Lights, LED's, annunciator functioning? | X | | | |
| Is customer saving required reports? | X | | | |
| Is Cathodic Protection Required? | | X | | |
| ***Note CP issues and test date*** | | | | |
| Type of Overfill Protection | Electronic alarm | | | |
| Type of Leak Detection | Mechanical | | | |
| Primary Tank Leak Detection Method | CSLD | | | |

**Technician Name:** G. Druery **Technician Signature:** Greg Druery

Digitally signed by Greg Druery
DN: cn=Greg Druery, o, ou, email=gdruery@mascottec.com, c=US
Date: 2024.09.17 12:11:38 -07'00'

Tanks Program
DEQ State of Oregon

State of Oregon Department of Environmental Quality

# Annual Release Detection Operability Testing Form

- **In-tank setup and alarm history reports must be attached to testing form.**
- **Maintain three years of testing records.**
- Instructions on how to use this form.

| **I. FACILITY INFORMATION** – Type or print (in ink) all items. | | | | **TEST DATE** |
|---|---|---|---|---|
| Facility ID #: | 11912 | Facility Name: | Cornelius Chevron | 09/16/2024 |
| **II. AUTOMATIC TANK GAUGE** | | | | ■ **Pass** ☐ **Fail** |
| ATG Manufacturer: | Veeder Root | ATG Model: | TLS-350 | |
| Release Detection Method: | | Tank Gauge 0.2 gph leak tests: (■ Continuous ☐ Static) ☐ SIR ■ Interstitial Monitoring | | |
| Battery Backup Functional? ■ Yes ☐ No | | ATG software properly programmed? ■ Yes ☐ No | | |
| ATG alarms functional and audible? ■ Yes ☐ No | | ATG In-Tank Setup Reports attached to form? ■ Yes | | |
| **III. TEST PROCEDURE** | | | | |
| ☐ PEI/RP 1200 | ■ Oregon Testing Procedures (Page 2) | ☐ Manufacturer Testing Procedures | ☐ Other Method (Describe) | |

## IV. PROBE AND TESTING INFORMATION

| Tank Number | 1 | 2 | 3 | 4 | |
|---|---|---|---|---|---|
| Product Stored | Regular | Regular | Super | Diesel | |
| Model | MAG | MAG | MAG Plus | MAG | |
| Is the ATG console clear of alarms? | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ☐ Yes ☐ No |
| Disconnect cable from tank probe. Is appropriate alarm triggered? | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ☐ Yes ☐ No |
| Tank gauge probes removed and inspected for damage? | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ☐ Yes ☐ No |
| Residual buildup on floats has been removed? | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ☐ Yes ☐ No |
| Float(s) move freely? | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ☐ Yes ☐ No |
| Measured product and water levels match ATG values? | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ☐ Yes ☐ No |
| Alarm history report attached? | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ■ Yes ☐ No | ☐ Yes ☐ No |
| **V. TEST RESULT** | ■ **Pass** ☐ **Fail** | ■ **Pass** ☐ **Fail** | ■ **Pass** ☐ **Fail** | ■ **Pass** ☐ **Fail** | ☐ **Pass** ☐ **Fail** |

Any "No" answer indicates the test failed. Failed tests must be remedied and retested immediately.

## VIII. COMMENTS

The comments section should be used to note additional information discovered or actions taken during testing that affect compliance

## IX. TESTER

| **Person conducting testing:** | G. Druery |
|---|---|

## DEQ tank gauge and probe functionality testing procedures

1. Inspect console and verify that there are no active or recurring warnings or alarms.
2. Confirm that both the visual and audible alarms on the tank gauge console function correctly.
3. Verify that the correct set-up parameters for the probes and appropriate tank leak detection is programmed correctly.
4. Test battery backup (if present).
5. Remove tank probe from tank.
6. Disconnect probe, wait for "Probe Out" alarm, reconnect probe and reset tank gauge.
7. Remove build up from probes.
8. Measure the fuel and water contents of the tank and compare with the tank gauge inventory report ensuring that they are the same.
9. Ensure that the probe's fuel and water floats are the correct type for the product stored in the tank.
10. Reposition the floats, measure distance from bottom of the probe, and utilize tank charts to confirm accuracy of the tank gauge.
11. Reinstall probes ensuring that the tank riser cap seals properly and the communication cable seal is tight.
12. If tank gauge is equipped with printer, attach the printed tank gauge in-tank setup and alarm history report demonstrating that probes were tested.

## DEQ sensor functionality testing procedures

1. Inspect sensor for damage.
2. Place sensor in at least three inches of testing liquid.
3. Verify sensor alarms at tank gauge or sensor has appropriate alarm response (dispenser or turbine shut down).
4. Clear alarm.
5. Reinstall sensor upon verification of proper operation.
6. If tank gauge is equipped with printer, attach the printed tank gauge in-tank setup and alarm history report demonstrating that sensors were tested.

SYSTEM SETUP

SEP 16, 2024 12:40 PM

SYSTEM UNITS
U.S.
SYSTEM LANGUAGE
ENGLISH
SYSTEM DATE/TIME FORMAT
MON DD YYYY HH:MM:SS xM

354514 CORNELIUS
990 N. ADAIR
CORNELIUS, OR. 97113
90759506005001

SHIFT TIME 1 : 6:00 AM
SHIFT TIME 2 : DISABLED
SHIFT TIME 3 : DISABLED
SHIFT TIME 4 : DISABLED

TANK PER TST NEEDED WRN
DISABLED
TANK ANN TST NEEDED WRN
DISABLED

LINE RE-ENABLE METHOD
PASS LINE TEST

LINE PER TST NEEDED WRN
DISABLED
LINE ANN TST NEEDED WRN
DISABLED

PRINT TC VOLUMES
ENABLED

TEMP COMPENSATION
VALUE (DEG F ): 60.0
STICK HEIGHT OFFSET
DISABLED
ULLAGE: 90%

H-PROTOCOL DATA FORMAT
HEIGHT
DAYLIGHT SAVING TIME
ENABLED
START DATE
MAR WEEK 2 SUN
START TIME
2:00 AM
END DATE
NOV WEEK 1 SUN
END TIME
2:00 AM

RE-DIRECT LOCAL PRINTOUT
DISABLED

EURO PROTOCOL PREFIX
S

SYSTEM SECURITY
CODE : 000000

TANK CHART SECURITY
DISABLED

CUSTOM ALARMS
DISABLED

SERVICE NOTICE
DISABLED

```
T 4:B20BIODIESEL
PRODUCT CODE      :       4
THERMAL COEFF     :.000450
TANK DIAMETER     : 120.00
TANK PROFILE      : 20 PTS
        FULL VOL  :  10369
 114.0 INCH VOL   :  10297
 108.0 INCH VOL   :  10042
 102.0 INCH VOL   :   9670
  96.0 INCH VOL   :   9209
  90.0 INCH VOL   :   8676
  84.0 INCH VOL   :   8085
  78.0 INCH VOL   :   7448
  72.0 INCH VOL   :   6778
  66.0 INCH VOL   :   6084
  60.0 INCH VOL   :   5377
  54.0 INCH VOL   :   4667
  48.0 INCH VOL   :   3965
  42.0 INCH VOL   :   3280
  36.0 INCH VOL   :   2624
  30.0 INCH VOL   :   2007
  24.0 INCH VOL   :   1441
  18.0 INCH VOL   :    939
  12.0 INCH VOL   :    516
   6.0 INCH VOL   :    193


FLOAT SIZE:       4.0 IN.

WATER WARNING     :     2.0
HIGH WATER LIMIT:     2.5
WATER ALARM FILTER:  LOW

MAX OR LABEL VOL:  10369
OVERFILL LIMIT    :    90%
                  :   9332
HIGH PRODUCT      :    95%
                  :   9850
DELIVERY LIMIT    :    10%
                  :   1036

LOW PRODUCT       :    500
LEAK ALARM LIMIT:      10
SUDDEN LOSS LIMIT:     99
TANK TILT         :   0.00
PROBE OFFSET      :   0.00


SIPHON MANIFOLDED TANKS
T#: NONE
LINE MANIFOLDED TANKS
T#: NONE


LEAK MIN PERIODIC:    15%
                  :   1555

LEAK MIN ANNUAL   :     0%
                  :      0


PERIODIC TEST TYPE
                STANDARD

ANNUAL TEST FAIL
          ALARM DISABLED

PERIODIC TEST FAIL
          ALARM DISABLED

GROSS TEST FAIL
          ALARM DISABLED

ANN TEST AVERAGING:  OFF
PER TEST AVERAGING:  OFF

TANK TEST NOTIFY:    OFF

TNK TST SIPHON BREAK:OFF

DELIVERY DELAY    :  1 MIN
```

ALARM HISTORY REPORT

---- IN-TANK ALARM -----

T 1:UNLEADED 1

OVERFILL ALARM
SEP 21, 2023 12:14 PM
JAN 3, 2023 2:15 PM

HIGH PRODUCT ALARM
JAN 3, 2023 2:15 PM

INVALID FUEL LEVEL
SEP 21, 2023 12:12 PM
DEC 23, 2022 2:45 PM

PROBE OUT
SEP 16, 2024 2:35 PM
SEP 21, 2023 12:15 PM
SEP 21, 2023 12:14 PM

DELIVERY NEEDED
JAN 19, 2024 8:03 AM
SEP 21, 2023 12:12 PM
AUG 3, 2023 8:06 PM

PER TST NEEDED WRN
JAN 7, 2023 12:00 AM

PER TST NEEDED ALM
FEB 1, 2023 12:00 AM
JAN 31, 2023 12:00 AM
JAN 29, 2023 12:00 AM

CSLD INCR RATE WARN
JUN 21, 2023 3:26 AM
JUN 6, 2023 8:00 AM
MAY 31, 2023 5:43 AM

LOW TEMP WARNING
SEP 16, 2024 2:37 PM
SEP 21, 2023 12:15 PM

* * * * * END * * * * *

ALARM HISTORY REPORT

---- IN-TANK ALARM -----

T 2:UNLEADED 2

OVERFILL ALARM
SEP 21, 2023 12:06 PM
JAN 3, 2023 2:21 PM

HIGH PRODUCT ALARM
JAN 3, 2023 2:21 PM