



State of Oregon  
Department of  
Environmental  
Quality

Program Enforcement No. 2025-FC-9906

This section for  
DEQ use only

Department of Environmental Quality  
Underground Storage Tank Program

Field Citation  
For UST Violations

Page 1 of 3

DEQ Information		UST Facility Information	
Inspection Date:	05/05/2025	Facility ID#:	7134
Inspector:	Diana Foss	Facility Name:	LAPINE CFN CARDLOCK
DEQ Office:	DEQ Headquarters, Land Quality Division 700 NE Multnomah Street, Suite 600	Facility Address:	51365 HWY 97, LA PINE, Oregon 97739
Phone #:	503-869-0770	County:	Deschutes

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

Field Citation Issued:	<input type="checkbox"/> In Person	<input checked="" type="checkbox"/> By Mail	<input type="checkbox"/> Both	Date Issued: 05/12/2025
Facility Representative Present During Inspection:	<input type="checkbox"/> Permittee <input type="checkbox"/> Owner <input type="checkbox"/> Other			
Name of Permittee or Owner:	Ed Staub & Sons Petroleum Inc			
Mailing Address:	1301 Esplanade Ave , Klamath Falls Oregon 97601			
Field Citation Penalty – See Page 3 for detailed listing of each violation.				\$ 300

**Check payable to: DEQ Financial Services LBX3615; P.O. Box 3615; Portland OR 97208-3615**

**Or pay online through your YDO account**

**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 for to DEQ by the following date:**

**06/12/2025**

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**

Facility Representative initials: \_\_\_\_\_

**DATE ISSUED: 05/12/2025**

**PROGRAM ENFORCEMENT No.: 2025-FC-9906**

**FACILITY ID: 7134**

**Page 3 of 3**

<b>Violation #1:</b>	<b>Failure to verify or document that overfill prevention equipment is in place and functions properly.</b>		
<b>*TCR:</b>			
Corrective Action:	Provide passing overfill test		
Rule Citation: <b>OAR 340-150-0310(3)</b>	Penalty Amount: \$ 150	Correct Violation by: 06/12/2025	Date Violation Corrected:
<b>Violation #2:</b>	<b>Failure to conduct monthly periodic operation and maintenance walkthrough inspection by 10/01/20 and each month thereafter.</b>		
<b>*TCR:</b>			
Corrective Action:	No corrective action possible		
Rule Citation: <b>OAR 340-150-0315(1)(a)(A)</b>	Penalty Amount: \$ 150	Correct Violation by:	Date Violation Corrected:
<b>Violation #3:</b>	<b>Failure to complete initial overfill, spill prevention or sump testing requirements by October 1, 2020</b>		
<b>*TCR:</b>			
Corrective Action:	No corrective action possible		
Rule Citation: <b>OAR 340-150-0310(10)</b>	Penalty Amount: \$	Correct Violation by:	Date Violation Corrected:
<b>Violation #4:</b>			
<b>*TCR:</b>			
Corrective Action:			
Rule Citation: <b>OAR</b>	Penalty Amount: \$	Correct Violation by:	Date Violation Corrected:
<b>Violation #5:</b>			
<b>*TCR:</b>			
Corrective Action:			
Rule Citation: <b>OAR</b>	Penalty Amount: \$	Correct Violation by:	Date Violation Corrected:
<b>Violation #6:</b>			
<b>*TCR:</b>			
Corrective Action:			
Rule Citation: <b>OAR</b>	Penalty Amount: \$	Correct Violation by:	Date Violation Corrected:
	Total Penalty Amount 300		
	(This Page): \$		

**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: \_\_\_\_\_ 06/12/2025 \_\_\_\_\_**

**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*

# Oregon Department of Environmental Quality - Underground Storage Tank Program

## Technical Compliance Inspection - UST Inspection Report

Inspector: \_\_\_\_\_ Date: \_\_\_\_\_

Time: \_\_\_\_\_

Facility: 7134

I. Site Information					
Facility Name: La Pine CFN cardlock			Permittee: Ed Staub and Sons		Contact: Todd Roark
Site Address: 51365 US 97			Organization: Ed Staub & Sons		Phone
City: La Pine			Phone:		
II. Tank Information					
DEQ Permit #	BFJDB 1	BFJDC 4	BFJDD 3	BFJDE 2	
Estimated Gallons	15000	6000	6000	3000	
Substance	diesel	diesel	regular	premium	
Tank Material	composite	composite	composite	composite	
Tank Install Date	2003	2003	2003	2003	
Pipe Material	FRP	FRP	FRP		
Pipe Type	pressure	pressure	pressure	pressure	
Pipe Install Date	2003	2003	2003	2003	
Overfill Device	alarm	alarm	ball float	ball float	
<div style="display: flex; justify-content: space-between;"> <div>Notes and Comments from the UST database:</div> <div><input type="checkbox"/> Check file before conducting inspection</div> </div> <div style="margin-top: 20px;"> ball float?  check install date on FR </div>					
If tanks are manifolded, which tanks: <div style="display: flex; justify-content: space-between;"> <div> III. Operating Certificate <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Current <input checked="" type="checkbox"/> Accurate <input checked="" type="checkbox"/> Posted for delivery drive to observe </div> <div>Compliance <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</div> </div> </div> </div>					
IV. Operator Training					
<div style="display: flex; justify-content: space-between;"> <div> Class A/B Operator <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Class C Operator <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Cardlock </div> <div> Name: Edsby Nordby Date: 11/6/2007 </div> </div>					
V. Financial Responsibility					
<div style="display: flex; justify-content: space-between;"> <div> Type of coverage: Insurance Coverage amount correct: <input checked="" type="checkbox"/> </div> <div> Begin Date: 2/1/25 End Date: 2/1/26 </div> </div> <div style="margin-top: 10px;"> Number of tanks covered: 4 </div>					
Financial responsibility could also be in the form of self insurance, bonds, local government, trust fund, and or guarantee					
VI. Walkthrough Requirements					
<div style="display: flex; justify-content: space-between;"> <div> Spill prevention and release detection equipment checked monthly? 1/25 - 4/25 </div> <div> Compliance <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </div> </div>					
<div style="display: flex; justify-content: space-between;"> <div>Tank top sumps checked annually?</div> <div> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No </div> </div>					



## VII. Release Detection

## Compliance

☐ Yes☐ No

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

Date of last testing: 08/15/24

Last three tests available?

☒ Yes☐ No

## b) Piping Release Detection (Check all that apply)

☐ Pressurized Piping☒ Mechanical Leak Detector (MLLD)☐ Electronic Leak Detector (ELLD) - check for swiftcheck requirementDate of last testing: 10/15/24 - no #1's

Last three tests available?

☒ Yes☐ NoNumber of lines tested: 4Number of LD tested: 4Leak detector manufacturer make and model: Red JacketTank gauge manufacturer make and model: Eco 150

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: \_\_\_\_\_

Last two tests available?

☐ Yes☐ No

Date of last sensor testing: \_\_\_\_\_

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

## Tank release detection records available during inspection

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: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Facility: \_\_\_\_\_

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

Date(s) of testing: 10/17/22 no 2020 Number of spill buckets tested? 3  
 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: 10/17/22  
 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: \_\_\_\_\_

email: \_\_\_\_\_

no spill pre 2020  
no audit

Compliance Determination:

☐ No Violations Observed

☐ Observed violations resulting in enforcement

# Inspection Survey

Submitted by: diana.foss\_deq

Submitted time: May 7, 2025, 2:56:20 PM

Date

**May 6, 2025**

Time

**11:13**

UST Facility ID

**7,134**

Inspector

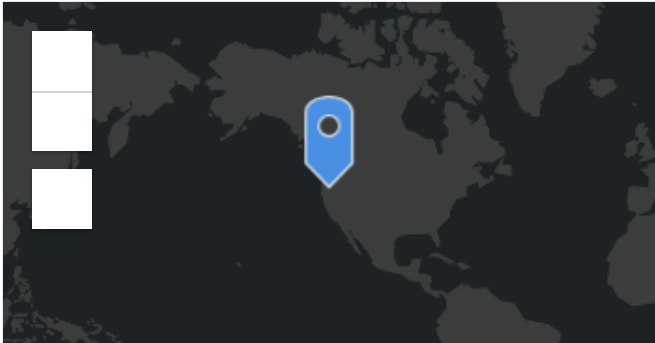
**Foss**

Type of Inspection

**Full Compliance**

Location

**Lat: 43.666282 Lon: -121.507478**



Esri, FAO, NOAA, USGS

Powered by Esri

Photograph



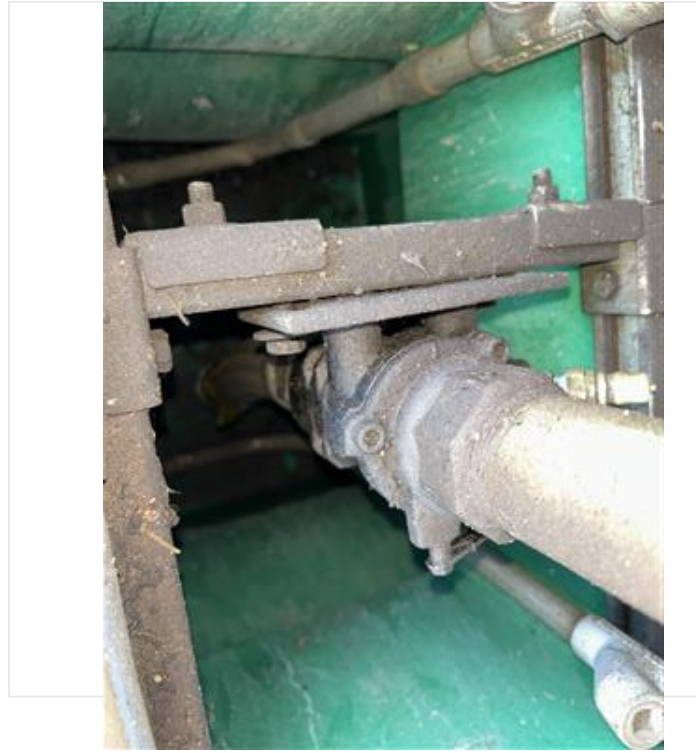




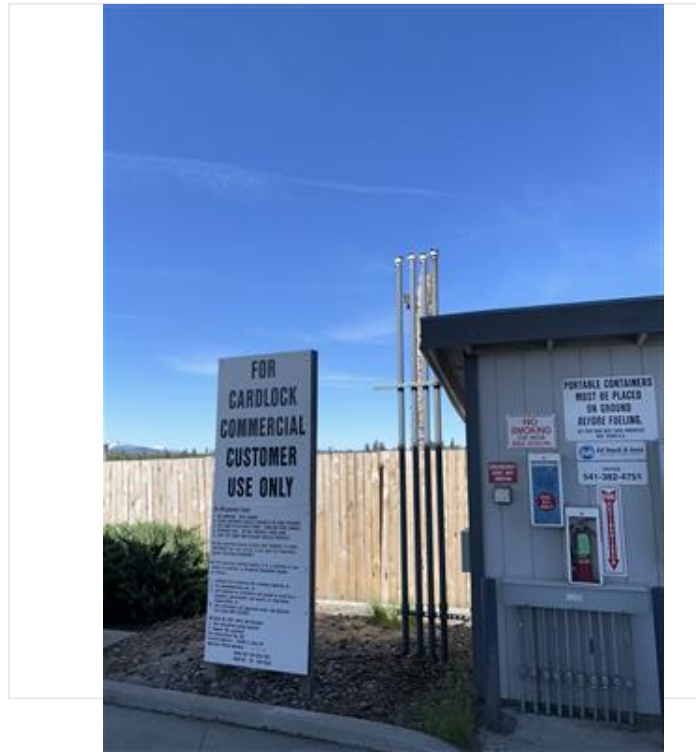




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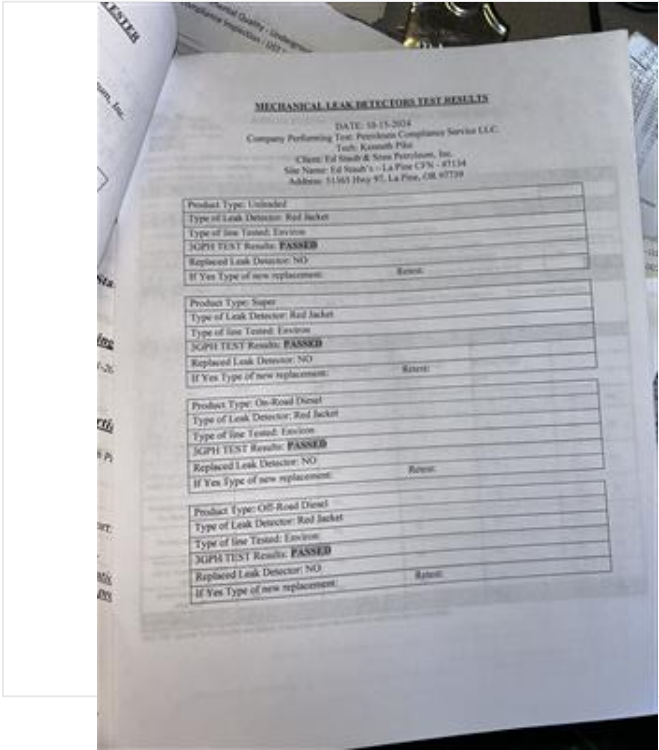




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**MECHANICAL LEAK DETECTORS TEST RESULTS**

DATE: 4-20-22  
Company Performing Test: Petroleum Compliance Service LLC  
Tech: Kenneth Pike  
Client: Ed Staub & Sons Petroleum, Inc.  
Site Name: Ed Staub's - La Pine CPN - #7134  
Address: 51365 Hwy 97, La Pine, OR 97739

Product Type: Unleaded	
Type of Leak Detector: Red Jacket	
Type of line Tested: Environ	
3GPH TEST Results: <b>PASSED</b>	
Replaced Leak Detector: NO	
If Yes Type of new replacement:	Retest:

Product Type: Super	
Type of Leak Detector: Red Jacket	
Type of line Tested: Environ	
3GPH TEST Results: <b>PASSED</b>	
Replaced Leak Detector: NO	
If Yes Type of new replacement:	Retest:

Product Type: On-Road Diesel	
Type of Leak Detector: Red Jacket	
Type of line Tested: Environ	
3GPH TEST Results: <b>PASSED</b>	
Replaced Leak Detector: NO	
If Yes Type of new replacement:	Retest:

Product Type: Off-Road Diesel	
Type of Leak Detector: Red Jacket	
Type of line Tested: Environ	
3GPH TEST Results: <b>PASSED</b>	
Replaced Leak Detector: NO	
If Yes Type of new replacement:	Retest:

**MECHANICAL LEAK DETECTORS TEST RESULTS**

DATE: 10-11-2021  
Company Performing Test: Petroleum Compliance Service LLC  
Tech: Kenneth Pike  
Client: Ed Staub & Sons Petroleum, Inc.  
Site Name: Ed Staub's - La Pine CPN - #7134  
Address: 51365 Hwy 97, La Pine, OR 97739

Product Type: Unleaded	
Type of Leak Detector: Red Jacket	
Type of line Tested: Environ	
3GPH TEST Results: <b>PASSED</b>	
Replaced Leak Detector: NO	
If Yes Type of new replacement:	Retest:

Product Type: Super	
Type of Leak Detector: Red Jacket	
Type of line Tested: Environ	
3GPH TEST Results: <b>PASSED</b>	
Replaced Leak Detector: NO	
If Yes Type of new replacement:	Retest:

Product Type: On-Road Diesel	
Type of Leak Detector: Red Jacket	
Type of line Tested: Environ	
3GPH TEST Results: <b>PASSED</b>	
Replaced Leak Detector: NO	
If Yes Type of new replacement:	Retest:

Product Type: Off-Road Diesel	
Type of Leak Detector: Red Jacket	
Type of line Tested: Environ	
3GPH TEST Results: <b>PASSED</b>	
Replaced Leak Detector: NO	
If Yes Type of new replacement:	Retest:



# UNDERGROUND STORAGE TANK OVERFILL PREVENTION EQUIPMENT INSPECTION REPORT FORM (Page 1 of 1)

Type of Action		<input type="checkbox"/> Installation Inspection	<input type="checkbox"/> Repair Inspection	<input checked="" type="checkbox"/> 36 Month Inspection
<b>I. FACILITY INFORMATION</b>				
Business Name (Same as Facility Name or DBA-Doing Business As) <i>Lopine CFN</i>			Date of Overfill Prevention Equipment Inspection <i>5-15-25</i>	
Business Site Address <i>Ed Stueb &amp; Sons</i>		City <i>Lopine</i>	ZIP Code <i>51365</i>	
<b>II. UNDERGROUND STORAGE TANK SERVICE TECHNICIAN INFORMATION</b>				
Name of UST Service Technician Performing the Inspection (Print as shown on the ICC Certification.) <i>SHannon Erickson</i>			Phone #	
Contractor / Tank Tester License # <i>Ed Stueb &amp; Son</i>		ICC Certification #	ICC Certification Expiration Date	
Overfill Prevention Equipment Inspection Training and Certifications (List applicable certifications.)				
<b>III. OVERFILL PREVENTION EQUIPMENT INSPECTION INFORMATION</b>				
Inspection Method Used:	<input type="checkbox"/> Manufacturer Guidelines (Specify):			
	<input checked="" type="checkbox"/> Industry Code or Engineering Standard (Specify):			
	<input type="checkbox"/> Engineered Method (Specify):			
Attach the inspection procedures and all documentation required to determine the results.				# of Attached Pages
TANK ID: (By tank number, stored product, etc.)	<i>1-Off Road</i>	<i>2-Unl</i>	<i>3-Super</i>	<i>4-Clear</i>
What is the tank inside diameter? (Inches)	<i>95"</i>	<i>95"</i>	<i>95"</i>	<i>95"</i>
Is the fill piping secondarily contained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the vent piping secondarily contained?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Overfill Prevention Equipment Manufacturer(s)				
What is the overfill prevention equipment response when activated? (Check all that apply.)	<input type="checkbox"/> Shuts Off Flow	<input type="checkbox"/> Shuts Off Flow	<input type="checkbox"/> Shuts Off Flow	<input type="checkbox"/> Shuts Off Flow
	<input checked="" type="checkbox"/> Restricts Flow	<input type="checkbox"/> Restricts Flow	<input type="checkbox"/> Restricts Flow	<input type="checkbox"/> Restricts Flow
	<input type="checkbox"/> A/V Alarm	<input type="checkbox"/> A/V Alarm	<input type="checkbox"/> A/V Alarm	<input type="checkbox"/> A/V Alarm
Are flow restrictors installed on vent piping?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
At what level in the tank is the overfill prevention set to activate? (Inches from bottom of tank.)	<i>85"</i>	<i>85"</i>	<i>81.75"</i>	<i>85"</i>
What is the percent capacity of the tank at which the overfill prevention equipment activates?	<i>&gt; 90%</i>	<i>&gt; 90%</i>	<i>79.210</i>	<i>&gt; 90%</i>
Is the overfill prevention in proper operating condition to respond when the substance reaches the appropriate level?	<input checked="" type="checkbox"/> Yes <i>89.473</i>	<input checked="" type="checkbox"/> Yes <i>89.473</i>	<input checked="" type="checkbox"/> Yes <i>89.210</i>	<input checked="" type="checkbox"/> Yes <i>89.473</i>
	<input type="checkbox"/> No (Specify in V.)	<input type="checkbox"/> No (Specify in V.)	<input type="checkbox"/> No (Specify in V.)	<input type="checkbox"/> No (Specify in V.)
<b>IV. SUMMARY OF INSPECTION RESULTS</b>				
Overfill Prevention Inspection Results	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail	<input checked="" type="checkbox"/> Pass <input type="checkbox"/> Fail
<b>V. COMMENTS</b>				
Any items marked "Fail" must be explained in this section. Any additional comments may also be provided here.				
<div style="display: flex; justify-content: space-around;"> <div><i>A=100</i> <i>B=85</i> <i>X=15</i></div> <div><i>A=100</i> <i>B=85</i> <i>X=15</i></div> <div><i>A=100.5</i> <i>B=85.5</i> <i>X=15.5</i></div> <div><i>A=100</i> <i>B=85</i> <i>X=15</i></div> </div>				
<b>VI. CERTIFICATION BY UST SERVICE TECHNICIAN CONDUCTING THIS INSPECTION</b>				
I hereby certify that the overfill prevention equipment was inspected and all the information contained herein is accurate.				
UST Service Technician Signature <i>[Signature]</i>				

If the facility has more components than this form accommodates, additional copies of this page may be attached.

ID = Identification, UST = Underground Storage Tank, ICC = International Code Council, A/V = Audible and Visual



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

Inspector: Foss Date: 5/6/25 Time: 10:30am Facility: 7134

I. Site Information					
Facility Name: La Pine CFN cardlock		Permittee: Ed Staub and Sons		Contact: Todd Roark	
Site Address: 51365 US 97		Organization: Ed Staub & Sons		Phone	
City: La Pine		Phone:			
II. Tank Information					
DEQ Permit #	BFIDB <u>1</u>	BFIDC <u>4</u>	BFIDD <u>3</u>	BFIDE <u>2</u>	
Estimated Gallons	15000	6000	6000	3000	
Substance	diesel	diesel	regular	premium	
Tank Material	composite	composite	composite	composite	
Tank Install Date	2003	2003	2003	2003	
Pipe Material	FRP	FRP	FRP		
Pipe Type	pressure	pressure	pressure	pressure	
Pipe Install Date	2003	2003	2003	2003	
Overfill Device	alarm	alarm	ball float	ball float	
<b>Notes and Comments from the UST database:</b> <span style="float: right;"><input type="checkbox"/> Check file before conducting inspection</span>  ball float? check install date on FR          If tanks are manifolded, which tanks:					
III. Operating Certificate			Compliance		
<input checked="" type="checkbox"/> Current <input type="checkbox"/> Accurate <input checked="" type="checkbox"/> Posted for delivery drive to observe			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
IV. Operator Training			Compliance		
Class A/B Operator <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cardlock			Name: <u>Eds Staub</u> Date: <u>11/6/2007</u>		
Class C Operator <input type="checkbox"/> Yes <input type="checkbox"/> No			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
V. Financial Responsibility			Compliance		
Type of coverage: <u>Insurance</u>			Begin Date: <u>2/1/25</u> End Date: <u>2/1/26</u>		
Coverage amount correct: <input checked="" type="checkbox"/>			Number of tanks covered: <u>4</u>		
Financial responsibility could also be in the form of self insurance, bonds, local government, trust fund, and or guaranteee					
VI. Walkthrough Requirements			Compliance		
Spill prevention and release detection equipment checked monthly? <u>1/25 - 4/25</u>			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Tank top sumps checked annually?			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		



VII. Release Detection		Compliance	
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>a) Annual Release Detection Operability Testing (Sometimes referred to as Tank Gauge Certification)</b>			
Date of last testing: <u>8/15/24</u>		Last three tests available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>b) Piping Release Detection (Check all that apply)</b>			
<input type="checkbox"/> Pressurized Piping			
<input checked="" type="checkbox"/> Mechanical Leak Detector (MLLD) <input type="checkbox"/> Electronic Leak Detector (ELLD) - check for swiftcheck requirement			
Date of last testing: <u>10/15/24 - no #s</u>		Last three tests available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Number of lines tested: <u>4</u>		Number of LD tested: <u>4</u>	
Leak detector manufacturer make and model: <u>Red Jacket</u>			
Tank gauge manufacturer make and model: <u>Eco 150</u>			
MLLD on turbine manifold?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
MLLD product appropriate? (Example, diesel Red Jacket FX series on diesel system?)		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If ELLD and no line testing: Annual 0.1 gph results from tank gauge?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> <b>Interstitial Monitoring</b>			
[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: _____		Last two tests available? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of last sensor testing: _____		Last three tests available? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Float sensors installed correctly?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Interstitial space opened to sump?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Presence of water in sumps?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="checkbox"/> <b>Safe Suction</b>			
Check valve directly below suction pump?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>c) Monthly Tank Release Detection (Check all that apply)</b>			
<input type="checkbox"/> Tank Gauge <input checked="" type="checkbox"/> CSLD <input type="checkbox"/> SCALD <input type="checkbox"/> Static			
Are correct tank sizes programmed at tank gauge?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Tank diameter/length seem appropriate?		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Are tanks manifolded?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If so, tank gauge testing setup for manifolded tanks?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<div style="font-size: small;">If Veeder Root tank gauge leak detection</div> <div style="font-size: x-small;"><input type="checkbox"/> CSLD set at 99% <input type="checkbox"/> Thermal coefficient set correctly? (Gasoline 0.00070; Diesel 0.00045)</div> <div style="font-size: small;">If Incon/Franklin tank gauge leak detection</div> <div style="font-size: x-small;"><input type="checkbox"/> If SCALD is Vol Qual set to 14% (or 99% confidence) <input type="checkbox"/> Is API gravity set correctly? (Regular 63.5; Plus 62.8; Super 51.3; Diesel 32.8)</div> <div style="font-size: x-small;">For all tank gauges doing static tests (Static tests require tank to be 50% full for a valid test)</div>			
<input type="checkbox"/> <b>Interstitial Monitoring</b> [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).]			
<input type="checkbox"/> <b>SIR</b> Ensure pass or fail results within 30-day period. Inconclusive result means release detection requirement not met			
<b>Tank release detection records available during inspection</b>			
T1: <input type="checkbox"/> Jan <input type="checkbox"/> Feb <input type="checkbox"/> Mar <input type="checkbox"/> Apr <input type="checkbox"/> May <input type="checkbox"/> Jun <input type="checkbox"/> Jul <input type="checkbox"/> Aug <input type="checkbox"/> Sep <input type="checkbox"/> Oct <input type="checkbox"/> Nov <input type="checkbox"/> Dec			
T2: <input type="checkbox"/> Jan <input type="checkbox"/> Feb <input type="checkbox"/> Mar <input type="checkbox"/> Apr <input type="checkbox"/> May <input type="checkbox"/> Jun <input type="checkbox"/> Jul <input type="checkbox"/> Aug <input type="checkbox"/> Sep <input type="checkbox"/> Oct <input type="checkbox"/> Nov <input type="checkbox"/> Dec			
T3: <input type="checkbox"/> Jan <input type="checkbox"/> Feb <input type="checkbox"/> Mar <input type="checkbox"/> Apr <input type="checkbox"/> May <input type="checkbox"/> Jun <input type="checkbox"/> Jul <input type="checkbox"/> Aug <input type="checkbox"/> Sep <input type="checkbox"/> Oct <input type="checkbox"/> Nov <input type="checkbox"/> Dec			
T4: <input type="checkbox"/> Jan <input type="checkbox"/> Feb <input type="checkbox"/> Mar <input type="checkbox"/> Apr <input type="checkbox"/> May <input type="checkbox"/> Jun <input type="checkbox"/> Jul <input type="checkbox"/> Aug <input type="checkbox"/> Sep <input type="checkbox"/> Oct <input type="checkbox"/> Nov <input type="checkbox"/> Dec			
T5: <input type="checkbox"/> Jan <input type="checkbox"/> Feb <input type="checkbox"/> Mar <input type="checkbox"/> Apr <input type="checkbox"/> May <input type="checkbox"/> Jun <input type="checkbox"/> Jul <input type="checkbox"/> Aug <input type="checkbox"/> Sep <input type="checkbox"/> Oct <input type="checkbox"/> Nov <input type="checkbox"/> Dec			

Inspector: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Facility: \_\_\_\_\_

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

Date(s) of testing: 10/17/22 no 2020 Number of spill buckets tested? 3  
 Did spill bucket pass most recent testing? ☒ Yes ☐ No If no, was spill bucket replaced/repared? ☒ 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: 10/17/22  
 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

no overfill

**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: \_\_\_\_\_

email: \_\_\_\_\_

no spill pre 2020  
no audit

Compliance Determination: ☐ No Violations Observed

☐ Observed violations resulting in enforcement

Inspector Signature: \_\_\_\_\_

Date: \_\_\_\_\_



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**RE: Inspection follow up #7134 La Pine CFN Cardlock**

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**From** FOSS Diana \* DEQ <Diana.FOSS@deq.oregon.gov>  
**Date** Mon 9/8/2025 10:56 AM  
**To** UST Duty Officer \* DEQ <UST.DutyOfficer@DEQ.oregon.gov>

Yes, thanks! It's the file "La Pine FC Pac Pride deq" in the folder in the shared drive.



**Diana Foss** (she/her)  
Senior Policy Analyst, Underground Storage Tanks  
DEQ Headquarters, Land Quality Division  
700 NE Multnomah Street, Suite 600  
Portland OR 97232-4100  
C 503-869-0770

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**From:** UST Duty Officer \* DEQ <UST.DutyOfficer@DEQ.oregon.gov>  
**Sent:** Monday, September 8, 2025 10:54 AM  
**To:** FOSS Diana \* DEQ <Diana.FOSS@deq.oregon.gov>  
**Subject:** Re: Inspection follow up #7134 La Pine CFN Cardlock

Hey Diana,

Do you have the passing overfill for 11065 La Pine pac pride - - I have the overfill for 7134, but just wanted to confirm for the other facility. There was so delay in the payment the penalty, but finally processed.

Emily

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**From:** FOSS Diana \* DEQ <[Diana.FOSS@deq.oregon.gov](mailto:Diana.FOSS@deq.oregon.gov)>  
**Sent:** Monday, May 12, 2025 2:11 PM  
**To:** Todd Roark <[todd.roark@edstaub.com](mailto:todd.roark@edstaub.com)>  
**Cc:** UST Duty Officer \* DEQ <[UST.DutyOfficer@DEQ.oregon.gov](mailto:UST.DutyOfficer@DEQ.oregon.gov)>; GILBERT Blakely \* DEQ <[Blakely.GILBERT@deq.oregon.gov](mailto:Blakely.GILBERT@deq.oregon.gov)>  
**Subject:** Inspection follow up #7134 La Pine CFN Cardlock

Hi, Todd,

Thank you for meeting me at your sites in La Pine and Chemult last week, and for being patient with my onboarding for Blake.

All three sites were missing overfill tests. Until you can prove that you have functional overfill, you are not to receive fuel deliveries.

OAR 340-150-0163(3):

The permittee may not operate an UST that does not meet the conditions and requirements of the operation certificate and all other applicable rules and statutes. The permittee must:

1. Immediately take all actions necessary to bring the UST system into compliance

Attached, please find a temporary closure certificate. Your facility has been put on the Do Not Deliver list. After you submit a passing overfill test, I will re-issue your operating certificate.

Attached, also find 2025-FC-9906. Payment of the \$300 penalty is due 6/12/25, as is the one corrective action of submitting a passing overfill test for each tank.

Please let me know if you have any questions. Thank you for working with us to keep Oregon's soil and groundwater safe from petroleum contamination.



**Diana Foss** (she/her)

Senior Policy Analyst, Underground Storage Tanks

DEQ Headquarters, Land Quality Division

700 NE Multnomah Street, Suite 600

Portland OR 97232-4100

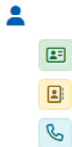
C 503-869-0770

LAPINE CFN CARDLOCK



Google  
51365 HWY 97, LA PINE, OR 97739  
14823 ✓  
224529  
CEM\_FacilityIdentifier=22828 UST (7134)  
Stationary

Contact Info



Inspection Info



8118 Completed



UST

Fee  
\$ 300.00

—

Paid  
\$ 300.00

=

Due  
\$ 0.00

Penalty

▶ 2025-FC-9906

UST - Field Citation

\$ 300.00

1 Results

Add Penalty Send to FIMS

Payment

▼ Check by Mail 30210-2

9/5/2025

\$ 300.00

54523

Type	Amount
Check by Mail	300
E-Payment Confirmation#	E-Payment Settle Date
	mm/dd/yyyy
Ref#	Payment Date
54523	09/05/2025
Comments	
2025-FC-9906	

(Remaining Length: 3988)