



Program Enforcement No. 2025-FC-9905

This section for DEQ use only

State of Oregon
Department of
Environmental
Quality

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#:	11065
Inspector:	Diana Foss	Facility Name:	LAPINE PACIFIC PRIDE
DEQ Office:	DEQ Headquarters, Land Quality Division 700 NE Multnomah Street, Suite 600	Facility Address:	50882 US-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 and Sons 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.

DATE ISSUED: 05/12/2025

PROGRAM ENFORCEMENT No.: 2025-FC-9905

FACILITY ID: 11065

Page 3 of 3

Violation #1: **Failure to inspect overfill equipment at least once every 3 years.**
***TCR:**

Corrective Action: Submit passing overfill test

Rule Citation: **OAR 340-150-0310(9)** Penalty Amount: \$ 150 Correct Violation by: 06/12/2025 Date Violation Corrected:

Violation #2: **Failure to maintain records of periodic operation and maintenance walkthrough inspections for one year.**
***TCR:**

Corrective Action: No corrective action possible

Rule Citation: **OAR 340-150-0315(2)** Penalty Amount: \$ 150 Correct Violation by: Date Violation Corrected:

Violation #3: **Failure to complete initial overfill, spill prevention or sump testing requirements by October 1, 2020**
***TCR:**

Corrective Action: No corrective action possible

Rule Citation: **OAR 340-150-0310(10)** Penalty Amount: \$ Correct Violation by: Date Violation Corrected:

Violation #4:
***TCR:**

Corrective Action:

Rule Citation: **OAR** Penalty Amount: \$ Correct Violation by: Date Violation Corrected:

Violation #5:
***TCR:**

Corrective Action:

Rule Citation: **OAR** Penalty Amount: \$ Correct Violation by: Date Violation Corrected:

Violation #6:
***TCR:**

Corrective Action:

Rule Citation: **OAR** 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

Inspection Survey

Submitted by: diana.foss_deq

Submitted time: May 7, 2025, 2:55:12 PM

Date

May 6, 2025

Time

10:21

UST Facility ID

11,065

Inspector

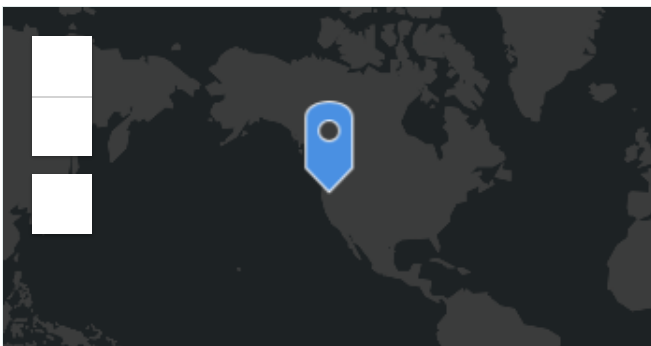
Foss

Type of Inspection

Full Compliance

Location

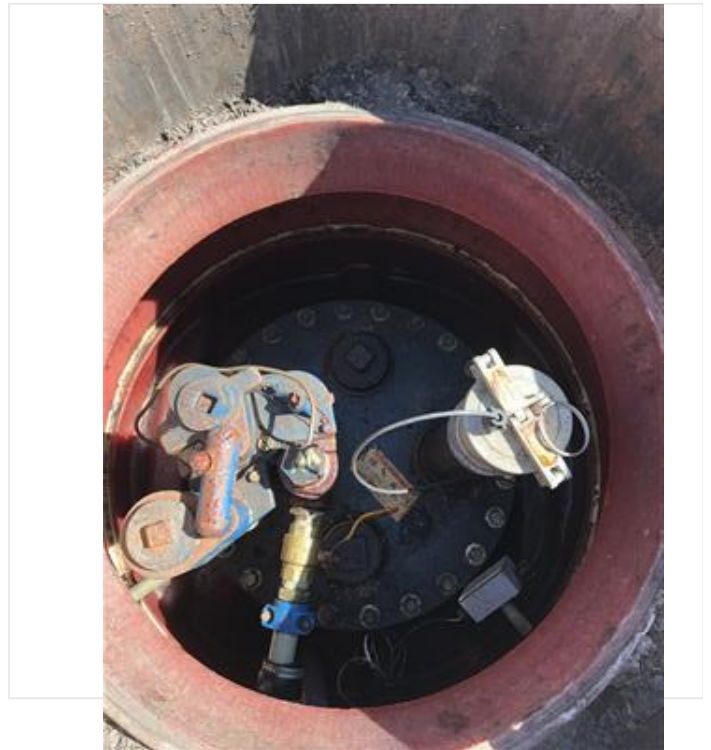
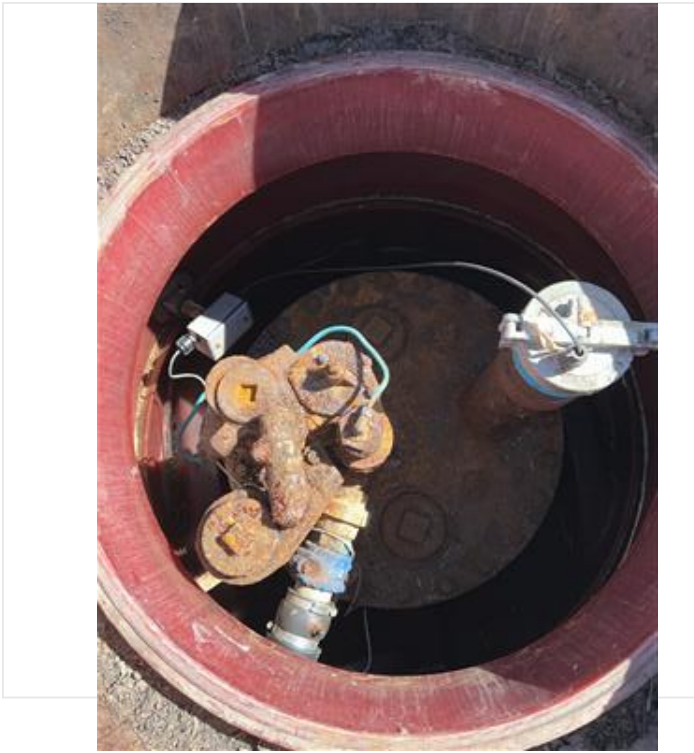
Lat: 43.648434 Lon: -121.520355



Esri, FAO, NOAA, USGS

Powered by Esri

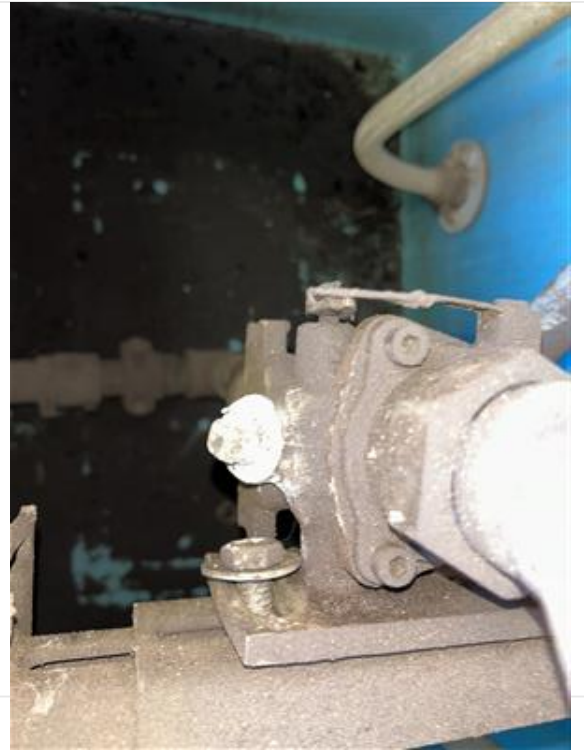
Photograph







photos-20250506-173358.jpg



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

Inspector: _____ Date: _____

Time: 10:00 am

Facility: ~~4852~~ 11065

I. Site Information				
Facility Name: La Pine Pacific Pride		Permittee: Ed Staub and Sons		Contact: Todd Roark
Site Address: 50882 US 97		Organization: Ed Staub & Sons		Phone <u>541-281-3833</u>
City: La Pine		Phone:		
II. Tank Information				
DEQ Permit #	BFGJK	BFGJA	BFGJB	
Estimated Gallons	12000 <u>3</u>	5000 <u>1</u>	7000 <u>2</u>	
Substance	regular	premium	diesel	
Tank Material	FRP	FRP	FRP	
Tank Install Date	2007	2007	2007	
Pipe Material	FRP	FRP	FRP	
Pipe Type	pressure	pressure	pressure	
Pipe Install Date	1997	1997	1997	
Overfill Device	alarm	alarm	alarm	
Notes and Comments from the UST database:				<input type="checkbox"/> Check file before conducting inspection
<p>Open LUST site, what's up? Look at Dylan's notes in YDO about site layout</p>				
If tanks are manifolded, which tanks:				
III. Operating Certificate			Compliance	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Current <input type="checkbox"/> Accurate			<input checked="" type="checkbox"/> Posted for delivery drive to observe	
IV. Operator Training			Compliance	<input type="checkbox"/> Yes <input type="checkbox"/> No
Class A/B Operator <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Name: <u>Todd Roark</u>		Date: <u>5/25/16</u>
Class C Operator <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Cardlock		
V. Financial Responsibility			Compliance	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Type of coverage: <u>INSUR</u>		Begin Date: <u>11/25</u>		End Date: <u>2/1/26</u>
Coverage amount correct: <u>Y</u>		Number of tanks covered: <u>3</u>		
Financial responsibility could also be in the form of self insurance, bonds, local government, trust fund, and or guarantee				
VI. Walkthrough Requirements			Compliance	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Spill prevention and release detection equipment checked monthly?			<u>MISSING Jan 25</u>	
Tank top sumps checked annually?			<u>July 24</u>	

VII. Release Detection

Compliance

Yes No

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

Date of last testing: 7/18/24

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 requirement

Date of last testing: 7/18/24

Last three tests available?

Yes No

Number of lines tested: 3

Number of LD tested: 3

Leak detector manufacturer make and model: _____

Tank gauge manufacturer make and model: _____

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
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date(s) of testing: _____	Number of spill buckets tested? _____
Did spill bucket pass most recent testing? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, was spill bucket replaced/repared? <input type="checkbox"/> Yes <input type="checkbox"/> No
During inspection, visual damage to spill bucket? <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>reg unit roller loose (small dress)</i>
<input type="checkbox"/> Hydrostatic testing (test takes one hour to complete)	
<input type="checkbox"/> Vacuum test (test takes 1 minute, ending vacuum must be 26 inches water column or greater)	

IX. Overfill Prevention	Compliance
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date(s) of testing: _____	
Overfill device pass most recent testing? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, overfill device replaced? <input type="checkbox"/> Yes <input type="checkbox"/> No
Overfill method that was tested: <input type="checkbox"/> Alarm <input type="checkbox"/> Flapper <input type="checkbox"/> Ball Float	
Overfill Alarm	
Alarm sounds when tank is 90% full	<input type="checkbox"/> Yes <input type="checkbox"/> No
Driver can see or hear alarm at point of transfer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Sound alarm from tank gauge during inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Flapper Valve	
Testing verified the valve automatically restricts flow at 95%	<input type="checkbox"/> Yes <input type="checkbox"/> No
Visual observation of flapper on day of inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ball Float	
Testing verified the ball float automatically restricts flow at 90%	<input type="checkbox"/> Yes <input type="checkbox"/> No
Visual observation of ball float during inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No

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

XI. General notes from inspection

Representative onsite: _____ email: _____

Shear value plug dispenser 4,7 +8

Compliance Determination: No Violations Observed Observed violations resulting in enforcement

Inspector Signature: _____ Date: _____

APPENDIX C-6

**OVERFILL ALARM
OPERATION INSPECTION**

Facility Name: <u>Lapine Fuel Commander</u>	Owner: <u>Ed Staub + Son</u>
Address: <u>50852 S. Hwy 97</u>	Address: <u>101 Esplanade NW</u>
City, State, Zip Code: <u>Lapine OR 97739</u>	City, State, Zip Code: <u>Klamath Falls OR 97601</u>
Facility I.D. #: <u>11065</u>	Phone #: <u>541-887-8900</u>
Testing Company: <u>Ed Staub + Sons</u>	Phone #: _____ Date: <u>5-15-25</u>

This procedure is to determine whether the high level alarm is operational and will trigger when the tank is no more than 90% full. See PEI/RP1200 Section 7.3 for the inspection procedure. This procedure is applicable to tank level monitor stems that touch the bottom of the tank when in place.

Tank Number	1	2	3	
Product Stored	<u>441</u>	<u>Non Eth</u>	<u>Off Road</u>	
Tank Level Monitor Brand and Model	<u>TLS 450</u>	<u>TLS 450</u>	<u>TLS 450</u>	
1. Tank Volume, gallons	<u>11527</u>	<u>4643</u>	<u>6850</u>	
2. Tank Diameter, inches	<u>89.75</u>	<u>90 1/2</u>	<u>90.25</u>	
3. Overfill alarm activates in the test mode at the console?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. When activated, overfill alarm can be heard or seen while delivering to the tank?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. After removing the probe from the tank, it has been inspected and any damaged or missing parts replaced?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Float moves freely on the stem without binding?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Moving product level float up the stem trigger alarm?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Inch level from bottom of stem when 90% alarm is triggered.	<u>79 3/4"</u>	<u>76"</u>	<u>71.25</u>	
9. Tank volume at inch level in Line 8.	<u>10574</u>	<u>4178.7</u>	<u>5572</u>	
10. Calculate (Line 9 / Line 1) x 100	<u>87</u>	<u>84</u>	<u>78</u>	
11. Is Line 10 less than 90%?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
12. Fuel float level on the console agrees with the gauge stick reading?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
13. Overfill alarm activates at any product level above 90% tank capacity?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

If any answers in Lines 3, 4, 5, 6, 7 or 11 are "No," or Line 13 is "Yes," the system has failed the test.

Test 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 type="checkbox"/> Pass <input type="checkbox"/> Fail
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Comments:

Tester's Name (print) Steffen Erichsen Tester's Signature [Signature]

Inspection Follow up Facility 11065 La Pine Pacific Pride

From FOSS Diana * DEQ <Diana.FOSS@deq.oregon.gov>
Date Mon 5/12/2025 2:11 PM
To Todd Roark <todd.roark@edstaub.com>
Cc UST Duty Officer * DEQ <UST.DutyOfficer@DEQ.oregon.gov>; GILBERT Blakely * DEQ <Blakely.GILBERT@deq.oregon.gov>

 2 attachments (297 KB)

Temporary Closure Certificate 9-11065-TCL.pdf; 2025-FC-9905.pdf;

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:

- a. 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 field citation 2025-FC-9905. The penalty of \$300 is due 6/12/2025, as is the corrective action of submitting a passing overfill test for all 3 tanks.

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

Fee \$ 300.00 - Paid \$ 300.00 = Due \$ 0.00

Penalty

▶ 2025-FC-9905 UST - Field Citation	\$ 300.00
▶ 2025-FC-9905 UST - Field Citation	\$ -150.00
▶ 2025-FC-9905 UST - Field Citation	\$ 150.00

3 Results

+ Add Penalty Send to FIMS

Payment

▼ Check by Mail 30210-1 \$ 300.00

📅 9/5/2025

📍 54522

Type	Amount
Check by Mail	300

E-Payment Confirmation#

E-Payment Settle Date

Ref#

Payment Date

Comments

2025-FC-9905

(Remaining Length: 3988)

1 Results

Site Info

LAPINE PACIFIC PRIDE



📍 50882 US-97, La Pine, OR 97739

📄 16088 ✓

📄 225794

📄 CEM_FacilityIdentifier=16252 UST (11065)

📄 Stationary

Inspection Info

8119 Completed

📄 UST

📄 Full Compliance Inspection (FCI) TCR only

📅 Start Date 5/5/2025 End Date 5/7/2025

Created & Updated Info