

State of Wisconsin Substance Release Notification Form *04-16-221103*

4-Hour Emergency Hotline Number: 1-800-943-0003

Form 4400-91 Rev. 11-95

Date and Mil. Time of Incident *12/28/99 ( ? )* Date and Mil. Time Reported *12/28/99 (2010)*

Person Reporting *Disputaker* Telephone # (608) *846-8522*

Representing Agency, Firm, or Citizen *Wisconsin State Patrol - District 1*

Responsible Party *Murphy Oil - Refinery*

Contact Name *Richard Lowe* Telephone # (715) *398-8223*

Address *Superior - Refinery* City, State, Zip Code *Superior, Wisconsin*

Substance Involved *oil* Amount & Units Released *10 barrels (420)<sup>gal</sup>* Amt. Recovered *contained* Is this a 304 (11004 42 USC) spill?  Yes  No  Unknown

Solid  Semisolid  Liquid  Gas Color \_\_\_\_\_ Odor \_\_\_\_\_

Exact Location (inc. address, facility name, mileage, bldg. #, etc.) *slab manifold in crude area tank*

City *Superior* County *Douglas* Lat/long \_\_\_\_\_

DNR Region *NR*  1/4  1/2 sec  T  NR (E/W) Weather Cond. \_\_\_\_\_

Cause of Incident *line broke. material was contained within Dike. I told Mr. Lowe to also call in the morning.*

<p><b>Spilled Substance Impact To:</b> Check (✓) all that apply</p> <p><input type="checkbox"/> Air <input type="checkbox"/> Potential <input type="checkbox"/> Soil <input checked="" type="checkbox"/> Potential <input type="checkbox"/> Groundwater <input type="checkbox"/> Potential <input type="checkbox"/> Surface Water <input type="checkbox"/> Potential Name: _____ <input type="checkbox"/> Storm Sewer <input type="checkbox"/> Potential <input type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Potential <input type="checkbox"/> Concrete/Asphalt <input type="checkbox"/> Potential <input type="checkbox"/> Private Well <input type="checkbox"/> Potential <input type="checkbox"/> Contained/Recovered <input type="checkbox"/> Other: _____</p>	<p><b>Spill Source:</b></p> <p><input type="checkbox"/> Transportation Accident, Fuel Supply Tank Spill <input type="checkbox"/> Transportation Accident, Load Spill <input type="checkbox"/> Industrial Facility <input type="checkbox"/> Paper Mill <input type="checkbox"/> Chemical Co. <input type="checkbox"/> Ag Coop/Facility/Food Factory/Facility <input type="checkbox"/> Gas/Service Station/Garage/Auto Dealer, Repair Shop <input checked="" type="checkbox"/> Pipeline, Terminal, Tank Farm, Oil Jobber/Wholesaler <input type="checkbox"/> Public Property (city, state, church, school, etc.) <input type="checkbox"/> Utility Co., Power Generating/Transfer Facility <input type="checkbox"/> Private Property (home/farm) <input type="checkbox"/> Construction, Excavation, Wrecking, Quarry, Mine <input type="checkbox"/> Airport Facility <input type="checkbox"/> Railroad Facility <input type="checkbox"/> Other _____</p>	<p><b>Action Taken By Spiller</b></p> <p><input type="checkbox"/> No Action Taken <input type="checkbox"/> No Action Needed <input type="checkbox"/> Monitor <input type="checkbox"/> Cleanup Method: _____ <input type="checkbox"/> Waste Destination: _____ <input type="checkbox"/> Containment <input checked="" type="checkbox"/> Contractor Hired Name: <i>ceda</i> <input type="checkbox"/> Other: _____</p>
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Injuries?  Yes  No If yes, how many? \_\_\_\_\_ Has an evacuation occurred?  Yes  No Potential?  Yes  No

Are there any resource damages?  Yes  No  Potential What kinds? \_\_\_\_\_

<p><b>Other Agencies Notified (✓ first column if notified); Check (✓) both columns if on scene <i>NIH</i></b></p> <p><input type="checkbox"/> Fire Department/Hazmat <input type="checkbox"/> Local DNR <input type="checkbox"/> EPA <input type="checkbox"/> Local Law Enforcement <input type="checkbox"/> Div. Emer. Gov. <input type="checkbox"/> Nat'l Resp. Ctr. 800-442-8802 <input type="checkbox"/> LEPC or Local Emer. Gov. <input type="checkbox"/> DATCP 608-224-4500 <input type="checkbox"/> Chemtrec 800-424-9300 <input type="checkbox"/> Regional Response Team <input type="checkbox"/> DHISS 608-266-2830 <input type="checkbox"/> Other _____</p>	<p>Incident Commander, if known: <i>Richard Lowe</i> Phone: <i>715-398-85</i></p>
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Prepared By: (Print) *David Washburn* (Sign) *David Washburn* Date: *12/30/99* Rpt'd to DATCP?  Yes  No

Person Notified: *Moss to Hosh* Region Notified: *NR* Time: \_\_\_\_\_ Date: *12/30/99*

Invstgtd By: (Print) \_\_\_\_\_ (Sign) \_\_\_\_\_ Date: \_\_\_\_\_ Site Closed?  Yes  No

Spill Coordinator Signoff: \_\_\_\_\_ Date: \_\_\_\_\_ Transferred to ERP?  No  Yes; Case # \_\_\_\_\_ NFA Letter Sent?  Yes  No  
Spill Packet Sent?  Yes  No

NATIONAL RESPONSE CENTER - STATE\*FAX

\*\* GOVERNMENT USE ONLY \*\* GOVERNMENT USE ONLY \*\* GOVERNMENT USE ONLY \*\*

DO NOT RELEASE this information to the public without permission  
 From the National Response Center (G-OPF), U. S. Coast Guard  
 Headquarters, Washington DC 20593-0001 (202)267-2675.

From: National Response Center  
 USCG HQ Washington, D. C.  
 1-800-424-8802

To: WI DEPT NAT RES BUREAU OF LAW ENF  
 Incident Report # 469026

INCIDENT DESCRIPTION

\*Report taken by MST3 RUTHERFORD at 21:58 on 28-DEC-98  
 Incident Type: FIXED  
 Incident Cause: OTHER  
 Affected Area: SOIL  
 The incident occurred on 28-DEC-98 at 20:00 local time.  
 Affected Medium: LAND

SUSPECTED RESPONSIBLE PARTY

Name: RICHARD LOWNEY  
 Organization: MURPHY OIL USA INC  
 Address: STINSON AVE  
 SUPERIOR, WI 54880  
 Day Phone: (715)3988223  
 Type of Organization: PRIVATE ENTERPRISE

INCIDENT LOCATION

STINSON AVE County: DOUGLAS  
 SUPERIOR, WI 54880

RELEASED MATERIAL(S)

CHRIS Code: GAS Official Material Name: GASOLINE: AUTOMOTIVE (UNLEADED)  
 Also Known As:  
 Qty Released: 10 BBL(S) Qty in Water: 0 NON(S)

SOURCE/CAUSE OF INCIDENT

INTERNAL FACILITY PIPELINE / LINE FROZE AND THEN RUPTURED

DAMAGE

Injuries: Fatalities: Evacuations: Damages: Air Close: Road Close:  
 N N

REMEDIAL ACTIONS

RELEASE WAS SECURED / A CONTRACTOR WAS HIRED TO MITIGATE

NOTIFICATIONS BY CALLER

NOTIFICATIONS BY NRC

ATSDR MN ATTN: LARRY SOUTHER	(612) 2150918
ATSDR WI ATTN: JAMES DREW	(608) 2662663
U. S. EPA V	(312) 3532318
NOAA 1ST CLASS BB RPTS FOR WI	(206) 5266344
RSPA OFFICE OF PIPELINE SAFETY	(202) 3664577
MN DEM ATTN: MR KAM	(612) 6495451

NATIONAL RESPONSE CENTER - STATE\*FAX

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ADDITIONAL INFORMATION

WILL NOTIFY: SERC

\*\*\* END INCIDENT REPORT \* 468026 \*\*\*

Report any problems or Fax number changes by calling 1-800-424-8802  
PLEASE VISIT OUR WEB SITE AT <http://www.nrc.uscg.mil>



State of Wisconsin \ DEPARTMENT OF NATURAL RESOURCES

Tommy G. Thompson, Governor  
George E. Meyer, Secretary  
William H. Smith, Regional Director

1705 Tower Avenue  
Superior, Wisconsin 54880  
Telephone 715-392-0802  
FAX 715-392-7993

May 19, 1999

Ms. Liz Lundmark  
Murphy Oil U.S.A  
PO Box 2066  
Superior, WI 54880

Subject: Spill of 420 gallons of oil at the slop oil manifold in the crude area  
at the Murphy Oil Refinery, December 28, 1998, Superior, Wisconsin

Dear Ms. Lundmark:

The purpose of this letter is to inform you of your legal responsibilities regarding the spill with which you are currently involved. Under State Law, section 292.11, Statutes, you must clean-up any contamination resulting from your spill to state standards. Because a hazardous substance has been discharged, you are responsible for restoring the environment.

The Hazardous Substance Spills Law, section 292.11(3), Wisconsin Statutes states:

"A person who possesses or controls a hazardous substance which is discharged or who causes the discharge of a hazardous substance shall take the actions necessary to restore to the environment to the extent practicable and minimize the harmful effects from the discharge to the air, lands, or waters of the state."

Required Actions:

As the responsible party of the discharge of a hazardous substance, you have the responsibility to assess the immediate impact of the discharge on human health and the environment and to act immediately to minimize these impacts. Furthermore, you must clean-up the discharge to acceptable State standards and take any other actions necessary to restore the environment to the extent practicable. Following the initial response and clean-up, if impacts of the discharge remain in the soils, water and/or groundwater, additional investigation and clean up may be required by the Department.

Spill clean-up should occur as quickly as possible to prevent extensive migration of the spill and also keep response, cleanup, and restoration costs from escalating. Clean-up progress should be reported to the Department on a regular basis as the clean-up occurs. **Within 90 days of the date of the letter, return to the following address a narrative clean-up summary, site map, copies of documents confirming the proper disposal of contaminated materials and/or soils, and any sample results which confirm**

*Quality Natural Resources Management  
Through Excellent Customer Service*



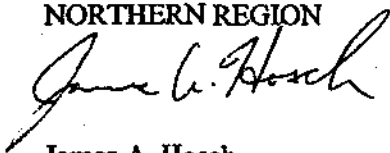
**contaminant removal:**

Department of Natural Resources  
Attention: James A. Hosch  
1705 Tower Avenue  
Superior, WI 54880

Based on the information provided, the Department will determine the need for further action or a case close-out. You will be notified of the Department's decision. Failure to provide the requested information within the specified time period may result in enforcement action.

If you should have any questions regarding this letter please feel free to call me at (715)392-0802.

Sincerely,  
NORTHERN REGION



James A. Hosch  
Spill Coordinator

cc: Paula Schneider - Rhineland

