

DR

State Div. Emergency Gov't.  
 U.S. Nat'l. Response Center  
 Chemtroc/Pesticides/Chlorine

(608) 296-3232  
 (800) 424-8802  
 (800) 24-9300

Spill ID Number *on print-out*  
 01-16-208436 *return print-out*  
 Y Y M M D D 0 9 9 *closed*

Date of Incident <b>12-16-94</b>	Day of Week <b>FRI</b>	Time of Incident <b>17:00</b>	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
Date Reported <b>12-17-94</b>	Day of Week <b>SAT</b>	Time Reported	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
Substance Involved <b>NAPHTHA</b>	Quantity <b>5</b>	Units <b>gal</b>	
Substance Involved	Quantity	Units	

Reported By (Name) <b>STAVROS</b>	Telephone Number <b>(312) 353-2318</b>
Agency or Firm Reporting <b>EPA</b>	Reported thru Div. Emergen. Gov't. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Person or Firm Responsible <b>Kurphy Oil</b>	
Contact Name <b>NORMAN BATYLE</b>	Telephone Number <b>(715) 398-3533</b>

Physical Characteristics

Solid  Liquid  Semisolid  Gas

Color \_\_\_\_\_ Odor \_\_\_\_\_

Address - Street or Route  
**2400 STINSON AVE**

City, State, Zip Code  
**SUPERIOR WI**

Cause of Incident \_\_\_\_\_

Action Taken By Spiller

No Action Taken  No Notification  Investigate

Containment: Type \_\_\_\_\_

Cleanup: Method \_\_\_\_\_

Amount Recovered \_\_\_\_\_

Monitor \_\_\_\_\_

Contractor Hired; Name \_\_\_\_\_

Other Action \_\_\_\_\_

Exact Location Description (intersection, mileage, etc.)

County Location **Douglas**

¼, ¼, Section, Town, Range  
\_\_\_\_\_, \_\_\_\_\_, T \_\_\_\_\_, N \_\_\_\_\_, R \_\_\_\_\_

DNR Dist **NAD** DNR Area **Brule**

Groundwaters Affected  
 Yes  No  Potential

Surface Waters Affected  
 Yes  No  Potential

Name of Surface Water \_\_\_\_\_

Date District Notified  
**12-19-94**

Day of Week  
**MON**

Time District Notified  
**8:10**  A.M.  P.M.

District Person Notified  
**STEVE LaValley**

Telephone Number  
**( ) FAKED**

Date Investigated \_\_\_\_\_

Day of Week \_\_\_\_\_

Time Investigated \_\_\_\_\_  A.M.  P.M.

Person Investigating \_\_\_\_\_

Telephone Number  
( )

Action Taken By DNR

No Action Taken  Investigation  Supervisor/Conduct Cleanup

Spiller Required To Take Action: Type \_\_\_\_\_

Contractor Hired By DNR; Name \_\_\_\_\_

Amount Recovered \_\_\_\_\_

20.29 Enforcement

Other Agencies on Scene \_\_\_\_\_

Local \_\_\_\_\_

State \_\_\_\_\_

Federal \_\_\_\_\_

Spill Location

Industrial Facility/Paper Mill/Chem. Co.

Gas/Service Station/Garage, Auto Dealer, Repair Shop

Ag Coop/Facility/Cheese Factory/Creamery

Other Small Business (bank, grocery, insurance co., etc.)

Public Property (city, county, state, church, school, etc.)

Utility Co., Power Generating/Transfer Facility

Private Property (home/farm)

Pipeline, Terminal, Tank Farm, Oil Jobber/Wholesaler

Transportation Accident, Fuel Supply Tank Spill

Transportation Accident, Load Spill

Construction, Excavation, Wrecking, Quarry, Mine

Other \_\_\_\_\_

Spilled Substance Destination

Air

Soil

Groundwater

Surface Water

Storm Sewer

Sanitary Sewer

Contained/Recovered

Other \_\_\_\_\_

Person Filing This Report (print name)  
**JOHN DANIEL**

Signature **John Daniel** Date Signed **12-19-94**

Additional Comments:  
**EPA STATED THAT THE LOCAL DNR HAD BEEN NOTIFIED ON FRIDAY REGARDING THIS SPILL**