State of Wisconsin
Department of Natural Resources

04-45-48806

State Div. Emergency Gov't. (608) 266-3232
U.S. Nat'l. Response Center (800) 424-8802
Chemtrec/Pesticides/Chlorine (800) 424-9300

# TOXIC AND HAZARDOUS SPILL REPORT

Form 4400-91 Rev. 6-86

Spill ID Number 930811-03
Y Y M M D D 0-99

04-45-048806

| Date of Incident | Day of Week | Time of Incident | | Reported By (Name) | Telephone Number |
|---|---|---|---|---|---|
| 8/11/93 | WED | 10:45 | ☒ A.M. ☐ P.M. | GREG EHRLE | (414) 982-2611 |
| **Date Reported** | **Day of Week** | **Time Reported** | | **Agency or Firm Reporting** | **Reported thru Div. Emergen. Gov't.** |
| 8/11/93 | WED | 12:30 | ☐ A.M. ☒ P.M. | HILLSHIRE FARMS | ☒ Yes ☐ No |

| Substance Involved | Quantity | Units | Person or Firm Responsible |
|---|---|---|---|
| DIESEL FUEL | 10 | GAL | HILLSHIRE FARM & KAHNS |
| **Substance Involved** | **Quantity** | **Units** | **Contact Name / Telephone Number** |
| | | | GREG EHRLE (414) 982-2611 |

**Physical Characteristics**

☐ Solid ☒ Liquid Color _____
☐ Semisolid ☐ Gas Odor _____

**Address — Street or Route**
N 3620 COUNTY HWY D

**City, State, Zip Code**
NEW LONDON, WI, 54961

**Cause of Incident**
FUEL LINE LEAK

**Exact Location Description (intersection, mileage, etc.)**
SE SIDE OF PLANT TRAILER PARKING

| County Location | ¼¼, ¼, Section, Town, Range |
|---|---|
| OUTAGAMIE | ___, ___, ___, T___ N, R___ |

| DNR Dist | DNR Area | Groundwaters Affected | Surface Waters Affected | Name of Surface Water |
|---|---|---|---|---|
| LMD | 03H | ☐ Yes ☒ No ☐ Potential | ☐ Yes ☒ No ☐ Potential | |

| Date District Notified | Day of Week | Time District Notified | District Person Notified | Telephone Number |
|---|---|---|---|---|
| — | | ☐ A.M. ☐ P.M. | — | ( ) |

| Date Investigated | Day of Week | Time Investigated | Person Investigating | Telephone Number |
|---|---|---|---|---|
| 8/13/93 | FRI | 2:00 ☐ A.M. ☒ P.M. | ASHENBRUCKER | (414) 424-1001 |

**Action Taken By DNR**

☒ No Action Taken ☐ Investigation ☐ Supervise/Conduct Cleanup
☐ Spiller Required To Take Action; Type _____
☐ Contractor Hired By DNR; Name _____
☐ Amount Recovered _____
☐ 29.29 Enforcement

**Other Agencies on Scene**

Local _____
State _____
Federal _____

**Action Taken By Spiller**

☐ No Action Taken ☐ No Notification ☐ Investigate
☒ Containment; Type BERM
☒ Cleanup; Method VACUME
☒ Amount Recovered 100 %
☐ Monitor _____
☐ Contractor Hired; Name _____
☐ Other Action _____

**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 _____

RECEIVED
AUG 13 1993
EMERG & REMEDIAL RESPONSE SECTION
BUR OF SOLID & HAZRD WASTE

Person Filing This Report (print name) STEVE ASHENBRUCKER DES

Signature [signature] Date Signed 8/13/93

Additional Comments:
DIESEL FUEL SPILLED ON ASPHALT. SMALL AMOUNT OF SOIL IMPACTED.

Closed 8/13/93
TA 2/12/18

CENTRAL OFFICE COORDINATOR

# SUBSTANCE SPILL/RELEASE ALERT FORM

| Spill No./Notification Date and Military Time | Information should be reported to: | Date and Military Time of Incident |
|---|---|---|
| 93 08 11 12:30<br>YY MM DD TIME | Department of Military Affairs<br>Wisconsin Division of Emergency Government<br>4802 Sheboygan Ave., Room 99A, P.O.Box 7865<br>Madison, Wisconsin 53707-7865<br>(608) 266-3232<br>FAX (608) 266-1569 | 93 08 11 10:45<br>YY MM DD TIME<br>County: Outagamie |

## REPORTING INFORMATION

Reported by: Greg Early (name)
Address: Same →
City: _____ State: _____ Zip: _____
Telephone: _____

Person/Firm Responsible: Hillshire Farms.
Address: N3620 City Hwy D
City: New London State: WI Zip: 54961
Telephone: 414-982-2611 Ext 136

Spill Contact Person/Firm: _____ Address: _____
(if different from above)
Telephone _____ City _____ State _____ Zip _____

## SUBSTANCE INFORMATION

Name of Substance/ Quantity Involved: 10 gal. diesel fuel

[ ] EHS Chemical [ ] CERCLA Chemical [ ] Unknown

| CAS # | Placard # | Quantity | Solid | Powder | Liquid | Vapor | Gas | Radio-Active | Unknown | Color | Odor |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | [ ] | [ ] | [ ] | [ ] | [ ] | [ ] | [ ] | | |
| | | | [ ] | [ ] | [ ] | [ ] | [ ] | [ ] | [ ] | | |
| | | | [ ] | [ ] | [ ] | [ ] | [ ] | [ ] | [ ] | | |

## SITE INFORMATION

Exact Location of Spill/Release (include Street Address, County, City, Village, Town, Highway, Intersection, Mileage, etc.):
Same

### Source of Spill

[ ] Transportation [ ] Manufacture [X] Agriculture
[ ] Public Property [ ] Construction [ ] Business
[ ] Private Property [ ] Other: _____

Weather Conditions
Wind Speed and Direction: NA
[ ] Rain [ ] Sleet [ ] Snow [ ] Fog
[ ] Other:

### Spill Destination

[ ] Soil [ ] Air [ ] Water
[ ] Storm Sewer [ ] Sanitary Sewer [X] Contained/ Recovered [ ] Other
[ ] Surface Water [ ] Yes [ ] No [ ] Potential
Name: _____
[ ] Ground Water [ ] Yes [ ] No [ ] Potential
Distance to nearest drinking water well: feet

## PUBLIC HEALTH INFORMATION

Recommended safety precautions (known acute/chronic health risks):
NA

| | No | Unknown | Yes | Number |
|---|---|---|---|---|
| Injuries | [X] | [ ] | [ ] | [ ] |
| Fatalities | [X] | [ ] | [ ] | [ ] |
| Facility Evacuated | [X] | [ ] | [ ] | [ ] |
| Public Evacuated | [X] | [ ] | [ ] | [ ] |
| Shelter facility: | | | | |
| Hospital | [X] | [ ] | [ ] | [ ] |
| School | [X] | [ ] | [ ] | [ ] |
| Other/Type | [X] | [ ] | [ ] | [ ] |

Shelter Location and Name

RECEIVED
AUG 18 1993
EMERG & REMEDIAL RESPONSE SECTION
BUR OF SOLID & HAZARDOUS WASTE

## RESPONSE INFORMATION

**Local Responder on Scene (Give name of response agencies)**

[ ] Fire _____ **Incident Commander**

[ ] Law Enforcement _____ **Name** _____

[X] DNR District **Title** _____

[X] County EG Outagamie **Dept.** _____

[ ] EMS _____ **Telephone** _____

[ ] Other: _____ [ ] No further follow-up or state assistance required

**List of contacts made by responsible party/firm or individual reporting incident:**

| Agency | Telephone Number | Contact Name |
|---|---|---|
| [ ] Dist. Dept. of Natural Resources (DNR) | | |
| [ ] Loc. Emer. Planning Committee (LEPC) | | |
| [ ] Local Public Health | | |
| [ ] CHEMTREC | 1-800-424-9300 | |
| [ ] National Response Center (NRC) | 1-800-424-8802 | |

**Narrative: Cause of incident/Actions being taken/Other information:**

Refrigeration Unit sprung leak
absorbent + solid material used to clean up. Also pumped small amount

## DEG DUTY OFFICER CONTACTS

| Agency | Telephone Number | Contact Name |
|---|---|---|
| [X] DNR (days) | (608) 266-2141 | Faxed 8-11-93 |
| [ ] DNR (Duty Officer pager) | | |
| [ ] DOT/State Patrol | (608) 246-3228 | |
| [ ] DH&SS | | |
| [ ] DILHR | | |
| [ ] DATCP | | |
| [ ] NRC | 1-800-424-8802 | |
| [ ] Area Director | | |
| [ ] DEG, Dir. Bureau of Field Services and Disaster Resources | | |

## INCIDENT FOLLOW-UP (to include date and time)

## AGENCY DEFINITIONS

| | | | |
|---|---|---|---|
| DEG | Div. of Emerg Government | NRC | Nat'l Response Center (Federal Reporting Environmental Protection Agency US Coast Guard) |
| CHEMTREC | Chemical Transportation Emerg. Center | | |
| DNR | Department of Natural Resources | DILHR | Dept. of Industry, Labor and Human Relations |
| DOT/State Patrol | Dept. of Transportation | DATCP | Dept. of Agriculture, Trade and Consumer Protection |
| DH&SS | Dept. of Health & Social Services | | |

Reminder: If the release is of an EHS or CERCLA chemical at or above the reportable quantity, the responsible party must also submit a follow-up written report per Fed. Statutes, as soon as practicable, to the State Emergency Response Board, Box 7865, Madison, WI 53707-7865, the Local Emergency Planning Committee and the NRC.

Barbara J. Rice
Signature of DEG Duty Officer

Dorothy A. Enlow
Signature of Preparer