

MINNESOTA PETROLEUM TANK RELEASE COMPENSATION BOARD

Application for Reimbursement

2-25-91

Site ID #: LEAK00001318

PART I RESPONSIBLE PERSON

1. Name of "Responsible Person" or "Volunteer": (see application guide)

Jerry A. Scott, Superintendent

2. Mailing Address: Hallock Schools  
P.O. Box 670, Hallock, MN 56728

3. Phone: (218) 843-3682

4. The Responsible Person or Volunteer is a :

Corporation \_\_\_\_\_ Partnership \_\_\_\_\_  
Individual X Other \_\_\_\_\_

5. When was the Responsible Person the owner or operator of the Tank?

From 6/10/57 to 11/2/89

PART II ATTACHMENTS

Your application will be returned as incomplete unless it is accompanied by the following attachments: (see application guide)

1. The MPCA approval of the corrective action plan or closure letter.
2. Receipts or invoices for all costs listed in Part IV Eligible Costs.
3. A brief description of the inventory control methods used during the six months prior to the petroleum release. If you did not operate the tanks, please submit a letter so stating.

**PART III TANK FACILITY**

1. Name of "Tank Facility" (see application guide) where the petroleum release occurred:  
Hallock High School
2. Tank Facility address: 444 N. Ash
3. Contact Person at Tank Facility: Jerry A. Scott  
Phone: (218) 843-3682
4. Date when petroleum release occurred or was detected (see application guide) 7/17/89

5. Date when petroleum release was reported to the MPCA: 7/17/89
6. Please complete the following information on the tanks at the Tank Facility. (see application guide)

<u>Tank #</u>	<u>Capacity</u>	<u>Petroleum Product</u>	<u>"X" if removed</u>
<u>1</u>	<u>10,000 gallon</u>	<u>Fuel Oil</u>	<u>X</u>
<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>

7. What was the source of the release at this tank facility? (see application guide)  
Piping failure and tank leakage
8. What date was the MPCA notified of the existence of the tanks as required by Minnesota Statute 116.48? 6/11/86
9. To the best of your knowledge, list all other persons who were owners or operators of the tank during or after the petroleum release:  
None
10. Did any of the persons listed in question 9 incur corrective action costs related to this petroleum release? yes/no If yes, list name, address, phone:  
No

**PART IV ELIGIBLE COSTS**

1. For each "Eligible Cost" (see application guide) category given below, list all corrective actions taken, who performed the action, and the corresponding cost of the action. (Attach additional pages as necessary.)

A. Investigation and source identification including, but not limited to collecting and analyzing soil samples, testing the groundwater, testing adjacent drinking water supplies, tank integrity testing, and engineering services.

<u>Corrective Action</u>	<u>Performed By</u>	<u>Cost</u>
<u>Initial Eng. Services</u>	<u>MECC (Inv. #438, 622)</u> <u>(\$424. + 430.50)</u>	<u>\$ 854.50</u>
<u>Field Sampling/Site Serv.</u>	<u>MECC (Inv. #845, 964)</u> <u>(\$1,679.25 + \$28.50)</u>	<u>\$ 1,707.75</u>
<u>Chemical Lab Analysis</u>	<u>Serco (Inv. #53891, 54145,</u> <u>54262) (598.50 + 250.50 + 95.00)</u>	<u>\$ 1,092.50</u> <u>(950.00 + 15%)</u>
<u>Chemical Lab Analysis</u>	<u>Agasco (Inv. #522953)</u>	<u>\$ 88.00</u>

B. Preparation of a corrective action plan in accordance with MPCA requirements.

<u>Corrective Action</u>	<u>Performed By</u>	<u>Cost</u>
<u>Engineering Services</u>	<u>MECC (Inv. #1322, 1374, 1700,</u> <u>1845) (185.25 + 855.75 + 285.75 + 48.75</u>	<u>\$ 1,375.50</u>
<u>Engineering Services</u>	<u>MECC (Inv. #2370)</u>	<u>\$ 39.00</u>
<u>Reimbursement Application</u>	<u>MECC (Inv. #2370)</u>	<u>\$ 243.75</u>

C. Cleanup of releases including, but not limited to, removal, treatment, or disposal of surface and subsurface contamination and provision of a permanent alternative water supply. Cleanup must be performed in accordance with a corrective action plan approved by the MPCA.

<u>Corrective Action</u>	<u>Performed By</u>	<u>Cost</u>
<u>Excavation of Cont. Soil</u>	<u>Weleske (Inv. dated 11/3/89)</u>	
	<u>(\$90.00+\$65.00+\$20.00)x 6 hours</u>	<u>\$1,050.00</u>
<u>Haul 400 yds.Replacement Soil</u>		
<u>@ \$6/yd.</u>	<u>Weleske (Inv. dated 11/6/89)</u>	<u>\$2,400.00</u>
<u>Load 400 yds. @ .75/yd.</u>	<u>Weleske (Inv. dated 11/6/89)</u>	<u>\$ 300.00</u>
<u>Equipment Use</u>	<u>Weleske (Inv. dated 11/6/89)</u>	
	<u>45% of (\$180.00+\$520.00+\$40.00)</u>	<u>\$ 329.62</u>
<u>Site Restoration</u>	<u>Weleske (Inv. dated 11/8/89)</u>	
	<u>1/2(\$130+\$260+\$2470)</u>	<u>\$1,430.00</u>
<u>Labor for fencing</u>	<u>Weleske (Inv. dated 11/8/89)</u>	
	<u>1/2(\$60.00)</u>	<u>\$ 30.00</u>
<u>Sand for holding down poly</u>	<u>Weleske (Inv. dated 11/8/89)</u>	
	<u>1/2(\$234.00)</u>	<u>\$ 117.00</u>
<u>Poly to Cover Cont. Dirt</u>	<u>Crane Johnson (Inv. #4031191)</u>	<u>\$ 279.40</u>
<u>Load Contaminated Dirt</u>	<u>Weleske Improvement</u>	
	<u>(Inv. dated 9/24/90)</u>	<u>\$ 617.50</u>
<u>Haul Contaminated Dirt</u>	<u>Blomquist Trucking (Inv. #50377)</u>	<u>\$1,080.00</u>
<u>Land use for spread site</u>	<u>City of Hallock</u>	
	<u>1/2(\$1,500.00)</u>	<u>\$ 750.00</u>
<u>Spreading of Cont. Soil and</u>	<u>Weleske (Inv. dated 10/30/90)</u>	
<u>Site Restoration</u>	<u>1/2(1126.13)+360+1350+117+135</u>	<u>\$2,525.07</u>
<u>Site Restoration</u>	<u>Wilson Landscaping (Inv. 148181)</u>	<u>\$ 74.75</u>
<u>Site Restoration</u>	<u>Blomquist (Inv. #671751)</u>	<u>\$ 400.00</u>
<u>Plastic removal from Soil pile</u>	<u>Independent School District #351</u>	<u>\$ 55.00</u>

Amount of contaminated soil excavated (cubic yds. or tons): 400 Cubic Yards

Was it necessary for cleanup to excavate all of the soil? Yes

What was the soil contamination concentration (total hydrocarbons)?  
8.3 ppm to 56.0 ppm

Were soils contaminated at less than 10 ppm as measured by a field instrument? No

If any costs were incurred on an emergency or temporary basis, complete Sections D and E below:

**D. Emergency response and initial site hazard mitigation.** Costs may include, but are not limited to those necessary to abate acute risks to human health, safety and the environment.

Corrective Action	Performed By	Cost
N/A		

**E. Temporary site hazard control measures.** Costs may include, but are not limited to, temporary provision of drinking water and housing, initial abatement of vapors and removal of free product.

Corrective Action	Performed By	Cost

2. Is the Responsible Person or Volunteer eligible under any insurance policies to recover cleanup arising from this petroleum release? yes / no

If yes, list the name of the insurance carrier, policy number and policy limits: (see application guide)

\_\_\_\_\_

\_\_\_\_\_

3. Total of all eligible costs listed above  
or \$1,000,000, whichever is less:

	\$ 16,839.34
	X .90
	= \$ 15,155.41
Insurance Reimbursement	< \$ 0 >
Total Reimbursement Request =	\$ 15,155.41

(see application guide)

4. At this time, do you anticipate incurring any ongoing corrective action costs relative to the petroleum release at this Tank Facility?

No

If yes, explain briefly what work will be done and an approximate cost of that work.

**PART V CONTRACTORS/CONSULTANTS**

1. Complete the following for all contractors, subcontractors, consultants, engineering firms or others who performed corrective actions at this release site. (see application guide) Failure to provide this information for ALL persons who performed corrective action may result in an action to recover any reimbursement which may be paid. (Attach additional sheets if necessary.)

A. Name of individual or firm: Midwest Environmental Control Corp.

Mailing address: 3901 University Avenue N.E.  
Minneapolis, MN 55421

Contact Person: Craig Diekvoss Phone: (612) 781-1647

B. Name of individual or firm: SERCO Laboratory

Mailing address: 1931 West County Road C2  
St. Paul, MN 55113

Contact Person: Diane Anderson Phone: (612) 636-7173

C. Name of individual or firm: Northwest ECSU

Mailing address: P.O. Box 390  
Thief River Falls, MN 56701

Contact Person: Gene Kjellberg Phone: (218) 681-8005

D. Name of individual or firm: Weleske Improvements

Mailing address: P.O. Box 428  
Hallock, MN 56728

Contact Person: Shane Weleske Phone: (218) 843-2443

E. Name of individual or firm: Wilson's Landscaping & Greenhouse

Mailing address: P.O. Box 442  
Hallock, MN 56728

Contact Person: Greg Wilson Phone: ( 218 ) 843-2180

F. Name of individual or firm: City of Hallock

Mailing address: P.O. Box 336  
Hallock, MN 56728

Contact Person: Hank Noel Phone: ( 218 ) 843-2838

G. Name of individual or firm: Crane Johnson Lumber Co.

Mailing address: P.O. Box 250  
Hallock, MN 56728

Contact Person: Bob Cameron Phone: ( 218 ) 843-2601

H. Name of individual or firm: Agasco, Inc.

Mailing address: P.O. Box 458  
Grand Forks, ND 58206-0458

Contact Person: \_\_\_\_\_ Phone: ( 800 ) 437-4600

I. Name of individual or firm: Blomquist Trucking

Mailing address: RR 1. Box 196  
Hallock, MN 56728

Contact Person: Erlyce or Steve Blomquist Phone: ( 218 ) 754-6791

2. Describe below any relationship, financial or otherwise, between the applicant and any contractor who performed work at this site:

Hallock School contracted Midwest Environmental thru Northwest ECSU.  
Hallock School contracted Weleske Improvements, Wilson's Landscaping,  
City of Hallock, Crane Johnson Lumber Co., Agasco, Inc., Bloomquist  
Trucking and student employees.  
Midwest Environmental subcontracted SERCO Laboratories.

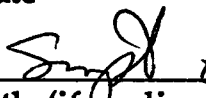
**PART VI CERTIFICATION** (see application guide)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those person directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I understand that by filing this application with the Board I agree to return to the Board, upon its demand, the entire award I may receive or any lesser amount the Board considers appropriate if: (a) I knowingly misrepresented or omitted any fact relevant to the determinations made by the Board or Commissioner, oral or written; or (b) I fail to complete, to the commissioner's satisfaction, ongoing corrective action which may be underway where the Commissioner has determined, pursuant to Minn. Stat. 115C.09, subd. 2(b) (1) (1986a), that the tank release for which I may be reimbursed has been adequately addressed based on my representation that there is ongoing corrective action.

I further certify that I have the authority to submit this application on behalf of Halloch Public Schools.  
(entity)

  
Signature of Responsible Person  
or Volunteer

2-21-91  
Date

  
Title (if applicant is not an  
individual)

Witnessed by:

Name: Denise Blomquist  
Date: 2-21-91

Please send this application and accompanying documents to:

Robin Hanson  
Petroleum Tank Release Compensation Board  
MN Department of Commerce  
133 East Seventh Street  
St. Paul, MN 55101  
(612) 297-4017