

## STATE OF MINNESOTA

Department of Public Safety - Division of Emergency Management  
444 Cedar St. Suite 223 St. Paul, MN 55101

## MINNESOTA DUTY OFFICER

Report #: 38435

Report Date: 6/14/2002

Report Time: 8:15

DO#: 22

## CALLER INFORMATION

Contact: Jon Bargmann

Company: Coteau Environmental - Watertown

Address: 312 9th Ave Southeast, Suite C

City: Watertown

State: SD Zip: 57201-

Phone: (605) 886-4009 Ext:

Alt phone:

Ext:

Have local police and/or fire been notified?

## NARRATIVE

ISA

## INCIDENT REPORT: TANK

## RESPONSIBLE PARTY/PROPERTY OWNER

Name: Brian Borgending

Company: North American State Bank

Address: PO BOX 189

City: Belgrade

State MN Zip 56312-

Phone: (320) 254-8271 Ext

Alt. phone:

Ext

## SITE LOCATION

Name: Former KC Quick Stop

Address: 230 1st St

City: BROOTEN

County ST. LOUIS

Zip:

## SITE INFORMATION

Discovery date 6/13/200

Discovery time: 16:00

Previously reported site? YES

Leak #: 14698

## TANK INFORMATION

Number/Size of Tank(s)

Tank Contents

Age of Tank(s)

Type of Tank

Native soil type: sand gravel

Surface water nearby? Unknown

Monitoring wells on site? No

Site water source: Municipal

Contaminated soil excavated?

Quantity:

Able to dig out contamination?

Ground water encountered? Yes

Depth to ground water: 7-9 ft

Free product found? Yes

Stained soils? Yes

Petroleum odors? Yes

Highest vapor reading: na

Analytical results: na

If this incident involves an A.S.T. is there secondary containment around the tank?

If a Phase I or Phase II site assessment is being done, is it tank related Unknown

MPCA Project Manager: \_\_\_\_\_

Leak Number: \_\_\_\_\_

ANY QUESTIONS - PLEASE CONTACT THE MN DUTY OFFICER AT 651-649-5451 OR 800-422-0798

L# 14698 - CUM

- \* 4 borings advanced
- \* walls to be installed by August 2002
- \* saturated soil possible product

**Notifications**

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In:	Out:	Link:	Date:	Time:	Agency:	County:	Method of Contact:
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	6/14/2002	8:19	MPCA Metro		Fax
Narrative:							
In:	Out:	Link:	Date:	Time:	Agency:	County:	Method of Contact:
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	6/14/2002	8:21	MPCA Region 1		Fax
Narrative:							

