



TV Tracking #: 939 (Semi-Annual)

1. RECEIVED IN
ENFORCEMENT: 07/26/2024

Tesoro Refining & Marketing Company LLC
A subsidiary of Marathon Petroleum Corporation
Martinez Renewable Fuels Facility
150 Solano Way
Martinez, CA 94553

July 26, 2024

VIA EMAIL TO COMPLIANCE@BAAQMD.GOV

Mr. Jeffrey Gove, Director
Compliance and Enforcement Division
Bay Area Air Quality Management District
375 Beale Street, Suite 600
San Francisco, CA 94105

**SUBJECT: Title V Semi-Annual Monitoring Report
Marathon's Martinez Renewable Fuels Facility (Plant ID B2758) and Amorco Terminal
(Plant IDs B2759 and E1200)
Reporting Period: January 1 to June 30, 2024**

Dear Mr. Gove:

Pursuant to the requirements outlined in Section I, Standard Conditions, Part F of the Tesoro Refining & Marketing Company LLC Title V Permit (issued January 11, 2016), and the Tesoro Logistics Operations LLC Title V Permit (issued August 5, 2013), the attached document includes information for deviations reported to have occurred during the reporting period. The Semi-Annual Monitoring Report consists of four parts. The first part summarizes all the Inoperative Monitors and emissions exceedances reported for the reporting period; the second part summarizes the sources where source testing and audits were scheduled; the third part summarizes all the Title V deviations reported for the reporting period; and the fourth part summarizes all RMP deficiencies during the reporting period. This Title V Semi-Annual Monitoring Report contains the signature of the Refinery's responsible official as required by Regulation 2-6-502, and by 40 CFR Part 70.6.

If you have any questions, please contact me at (925) 323-9207 or CVLyon@marathonpetroleum.com.

Sincerely,

Connor Lyon
Environmental Specialist

Attachment


ecc: Kevin Cordes, BAAQMD
Anais Tournier, BAAQMD

Read File No. 8598

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2024\1H2024 Cover Letter.docx


**Marathon's Tesoro Martinez Renewable Fuels Facility and Amorco Terminal
Reportable Compliance Activity (RCA): Inoperative Monitors
Reporting Period: 01/01/2024 to 06/30/2024**

Inoperative Monitors as defined by BAAQMD Regulations 1-522 and 1-523
for the reporting period are summarized below:

Date	IMF ID#	Unit	Pollutant / Parameter
2/7/2024		Waterfront Road GLM (ID 2351 and 2251)	H2S and SO2
2/24/2024		Cogen NOx CEMS	NOx
<p><u>Certification Statement</u></p> <p>I certify under penalty of law that based on the information and belief formed after reasonable inquiry, the statements and information in this document and in all attachments and other materials are true, accurate and complete.</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">  <hr/> <p align="center">Signature of Responsible Official</p> <p align="center">Donald C. Staats, General Manager</p> <hr/> <p align="center">Name and Title</p> </div> <div style="width: 35%; text-align: center;"> <p>7/24/2024</p> <hr/> <p>Date</p> </div> </div>			

**Marathon's Tesoro Martinez Renewable Fuels Facility and Amorco Terminal
Reportable Compliance Activity (RCA): Excess Emissions or Excursions
Reporting Period: 01/01/2024 to 06/30/2024**

Inoperative Monitors as defined by BAAQMD Regulations 1-522.7 and 1-523.3
for the reporting period are summarized below:

Date	IMF ID#	Unit	Pollutant / Parameter
1/6/2024		5 Gas Plant Mixpot H2S CEMS	H ₂ S
5/28/2024		FWS TO SO2 CEMS	SO2
6/6/2024		Pacheco Slough GLM (ID 2356)	H ₂ S
6/25/2024		FWS TO SO2 CEMS	SO2
<p>Certification Statement</p> <p>I certify under penalty of law that based on the information and belief formed after reasonable inquiry, the statements and information in this document and in all attachments and other materials are true, accurate and complete.</p> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 60%;">  <p>_____ Signature of Responsible Official</p> <p>Donald C. Staats, General Manager</p> </div> <div style="width: 35%; text-align: right;"> <p><u>7/24/2024</u> Date</p> </div> </div>			

**Marathon's Tesoro Martinez Renewable Fuels Facility and Amorco Terminal
Source Tests and Audits
Reporting Period: 01/01/2024 to 06/30/2024**

The following is a list of the sources that were operated during the reporting period in which source tests and cylinder gas audits were scheduled as required. Sources not listed were not included during the reporting period.


Source ID	Source Description
S952	No. 1 Gas Plant Engine, M1
S953	No. 1 Gas Plant Engine, M2
S1525	Non Retail Service Station
S1517	Coker Flare
S854	East Air Flare
S1012	West Air Flare
S992	Emergency Flare
S933	F33 Hydrocracker Reactor Heater (CEMS also used for F28 through F32)
S934	F34 Hydrocracker Stabilizer Reboiler
S937	F37 Hydrogen Plant Heater
S973	F55 No. 3 HDS Recycle Gas Heater
S1511	F78 Hot Oil Heater
S1526	No. 5 Gas Plant 100-lb Fuel Gas Mix Pot

Certification Statement

I certify under penalty of law that based on the information and belief formed after reasonable inquiry, the statements and information in this document and in all attachments and other materials are true, accurate and complete.



Signature of Responsible Official



Date

Donald C. Staats, General Manager

Name and Title

**Marathon's Tesoro Martinez Renewable Fuels Facility and Amorco Terminal
Semi-Annual Title V Deviation Summary**

Reporting Period: 01/01/2024 to 06/30/2024

Facility Address:

150 Solano Way

City: Martinez State: CA Zip: 94553

Mailing Address:

150 Solano Way

City: Martinez State: CA Zip: 94553

Contact:

Connor Lyon

Title:

Environmental Specialist

Phone:

(925) 323-9207

Application Regulation / Permit Condition / Other:

40 CFR 60.104(a)(1)

Date Event Date Event

Started: Stopped:

1/6/2024 1/6/2024 Source (S#): S-1526 Abatement Device (A#): N/A Emission Point (E#): N/A

Event Description:

H2S from the 5 Gas Plant 100-lb Fuel Gas Mix Pot (S-1526) exceeded 162 ppm (3-hour average). The peak value was 167 ppm (3-hour average).

Probable Cause:

Excessive H2S in the propane caused breakthrough after the caustic wash and subsequently caused high H2S in the fuel gas.

Corrective Action or Preventative Steps Taken:

Operations made adjustments to decrease the H2S in the fuel gas, including decreasing flows to the 5 Gas Plant and proceeding to drain caustic for a caustic wash changeout.

Application Regulation / Permit Condition / Other:

BAAQMD 6 Rule 1 Section 301

Date Event Date Event

Started: Stopped:

3/14/2024 3/14/2024 Source (S#): Abatement Device (A#): A-2000 Emission Point (E#): N/A

Event Description:

Visible emissions from the Foul Water Stripper Thermal Oxidizer (A-2000) potentially exceeding No.1 on the Ringlemann chart for more than 3 minutes in an hour.

Probable Cause:

Emulsion sent to from the 3HDO unit caused hydrocarbon to carry over into the the thermal oxidizers feed resulting in smoking.

Corrective Action or Preventative Steps Taken:

Feed was removed from the thermal oxidizer and moves are being made to stop producing emulsion in the 3DHO unit

Application Regulation / Permit Condition / Other:

Condition 27591 (12) (BAAQMD Reg 2-2-208)

Date Event Date Event

Started: Stopped:

5/28/2024 6/20/2024 Source (S#): S-1600 Abatement Device (A#): A-2000 Emission Point (E#): N/A

Event Description:

The foul water stripper (FWS) thermal oxidizer (TO) began seeing high SO₂ levels with the CEMS analyzer out of maintenance mode on 5/28/24 around 13:30. The high SO₂ was determined, through analytical recieved on 6/18/24, to be due to methyl mercaptan and dimethyl disulfide compounds coming through the FWS adsobers.

Probable Cause:

The mechanism of generation of methyl mercaptan and dimethyl disulfide compounds is not fully understood currently. Troubleshooting is ongoing.

Corrective Action or Preventative Steps Taken:

Corrective actions have included sampling and analysis, nitrogen purging, changing out adsorber media, removing the FWS and TO from service and placing the unit back online. A 5-why investigation will be completed and provided to BAAQMD.

Application Regulation / Permit Condition / Other:
BAAQMD 8-5-322.5

Date Event Date Event

Started: Stopped:

6/6/2024 6/7/2024 Source (S#): S33 Abatement Device (A#): N/A Emission Point (E#): N/A

Event Description:

The secondary seal on external floating roof tank Tank A-33 (S-33) was found to have a gap exceeding 0.06" during a seal inspection performed on 6/6/2024.

Probable Cause:

During regular use of the tank the floating roof moves up and down and since tank shells are not perfectly round from one shell course to the next and have both horizontal and vertical weld seams that protrude out into the tank, gaps can form the secondary seal wiper tip and the shell of the tank.

Corrective Action or Preventative Steps Taken:

The gap was sealed on 6/7/2024 by making mechanical adjustments to the secondary wiper.

Application Regulation / Permit Condition / Other:
BAAQMD 9-2-301

Date Event Date Event

Started: Stopped:

6/6/2024 6/6/2024 Source (S#): B2758 -
Sitewide Abatement Device (A#): N/A Emission Point (E#): N/A

Event Description:

A 3-minute average H2S excess was observed at the Pacheco Slough ground level monitor (GLM ID 2356) for 2 minutes at 62.6 and 61.1 ppb. The monitored excess was reported as RCA #200383.

Probable Cause:

Wind speed and direction show that the Pacheco Slough GLM was downwind of Tract 3. At the time of the exceedance, the closest non-routine activity was the Bio-Oxidation Pond dredge project. No offsite odors were reported during the excess, and no odors were detected during the Tract 3 tank inspections occurring on the same day.

Corrective Action or Preventative Steps Taken:

After the excess was identified, maintenance walked the area to investigate and found nothing noteworthy. Additionally, the temporary bathrooms in place for the dredge project were moved further from the GLM.

Application Regulation / Permit Condition / Other:
BAAQMD 8-5-305.5

Date Event Date Event

Started: Stopped:

6/7/2024 Ongoing Source (S#): S-601 Abatement Device (A#): N/A Emission Point (E#): N/A

Event Description:

A stain and liquid puddle <1/16" deep was discovered on the internal floating roof of Tank 601 (S-601).

Probable Cause:

The cause of the stain/ puddle is not yet fully understood. Investigations are ongoing.

Corrective Action or Preventative Steps Taken:

The contents of the tank were tested to evaluate liquid composition. The results indicated the contents were mostly water at the time the stain was found. The stain was monitored each shift until the inspections team could perform a detailed visual assessment of the floating roof seal with a remote camera. No evidence of an active leak was identified by the visual assessment of the stain or inspection of the roof using the remote camera. The standing puddle was cleaned, without making entry onto the roof, on 6/19/2024. Further verification that the stain remained dry was made on 7/2/2024. Entry was made onto the floating roof on 7/19/2024 to complete an inspection of the tank seals and roof integrity. The results of this investigation will be provided to BAAQMD. A 5-why investigation will be completed and provided to BAAQMD.

Application Regulation / Permit Condition / Other:

BAAQMD 8-5-402.1

Date Event Date Event

Started: Stopped:

6/17/2024 7/19/2024 Source (S#): S-601 Abatement Device (A#): N/A Emission Point (E#): N/A

Event Description:

The 10-year internal floating roof (IFR) primary seal inspection for Tank 601 (S-601) was found to be overdue. Date of last inspection of this kind was April 2013.

Probable Cause:

The inspection was likely missed due to the failure to transfer the regulatory requirement for 10-year IFR primary seal inspections to the new inspection system used to track regular inspections such as this.

Corrective Action or Preventative Steps Taken:

Plans were made to safely perform the 10-year IFR primary seal inspection. The inspection took place on 7/19/24. The dates of the last and next 10-year IFR primary seal inspections were confirmed for each of the other IFR tanks to verify no other inspections were overdue.

Application Regulation / Permit Condition / Other:
Condition 27591 (12) (BAAQMD Reg 2-2-208)

Date Event Date Event

Started: Stopped:

6/25/2024 6/25/2024 Source (S#): S-1600 Abatement Device (A#): A-2000 Emission Point (E#): N/A

Event Description:

The foul water stripper (FWS) thermal oxidizer (TO) analyzer began to peg past 100 ppmv on 6/25/2024 at 18:01.

Probable Cause:

It is suspected that sulfur-containing compounds made it through the H₂S adsorber that was in service. The means through which this happened is not fully understood.

Corrective Action or Preventative Steps Taken:

Feed to the FWS was stopped (i.e. the unit was placed in hot standby) at 18:19 resulting in the SO₂ levels to decrease and the analyzer to stop pegging at 18:39. Further corrective action included changing out adsorber media in the lag adsorber. The unit remained in hot standby until 7/4/2024 at 00:07. A 5-why investigation will be completed and provided to BAAQMD.

Certification Statement:

I certify under penalty of law that based on the information and belief formed after reasonable inquiry, the



Donald C.
Staats

General Manager,
Martinez Refinery

7/04/2024

Signature of Responsible Official

Print Name

Title

Date

**Marathon's Tesoro Martinez Renewable Fuels Facility and Amorco Terminal
RMP Deficiencies**

Reporting Period: 01/01/2024 to 06/30/2024

RMP Deficiencies are defined by Marathon Petroleum Corporation Corporate HES&S Standards (PSM5008) and are summarized below:

Audit Findings from RMP or PSM Compliance Audits

PSI-1: Inadvertent mixing tables had not been developed for individual covered processes per requirements of Process Safety Management Appendix D (PSM 1070 Appendix D, Rev. 5). Also, chemicals listed on the site-wide inadvertent mixing table were not consistent with the site-wide CERSID HAZMATERIAL chemical listing. Lastly, the site's inadvertent mixing table did not contain information for utility systems or several vendor supplied treatment chemicals used in each covered process.

PSI-2: Discrepancies were noted on both sampled P&IDs from the No. 5 Gas unit (003-DA-004-011, Rev. 22 and 003-DA-004-017, Rev. 27). The discrepancies included:

- pressure indication shown on the P&IDs were not installed in the field,
- the P&ID showed a two-inch line off the bottom of V-133 with a locked-closed valve, but the line was not installed in the field
- a permanent slip blind was installed downstream of a different isolation valve than shown on the P&ID, and
- the P&ID showed a two-inch blinded nozzle on the side of V-133, but the nozzle had a plugged isolation valve installed in the field.

PSI-3: This audit team noted five instances where car seals or locks were not installed on isolation valves indicated as car sealed or locked on the P&IDs. Specifically, the inlet isolation valves for PSV-5188, PSV-5192, PSV-0199, and PSV-1539, and the drain valve downstream of LV-0056 (P&ID 003-DA-004-017, Rev. 27) were shown to be car sealed or locked on the P&IDs, but no car seal or lock was installed in the field.

PSI-4: A review of a flare study completed in May 2022 had several observations and recommendations for which there was no documented follow-up or assessment. One recommendation was to perform an assessment to evaluate a possible slug-flow scenario related to pressure

relief valve A076-PSV-4600. Also, approximately 190 unranked/unresolved observations were from the most recent Smith and Burgess relief device study. While interviews indicated these 190 items had been vetted and were not considered significant, they still need to be fully resolved.

PSI-5: A review of the Damage Mechanism Review document for Unit 039, LPG Facility, performed in 2019 recommended brittle fracture assessments be made for corrosion loops LPGCL001 and LPGCL001 to determine the minimum allowable metal temperature and critical exposure temperatures of the associated vessels and piping. Interviews indicated these assessments had not been made at the time of this audit.

PSI-6: A review of piping inspection isometric drawings showed that some had not been updated since the conversion to a renewables facility. One example was the piping around P-8805 in the 3HDO, which was shown to be carbon steel, although there was a significant amount of stainless steel piping in this system.

PHA-1: The June 23, 2022, A067 1 HDO PHA, the January 14, 2022, A003 5Gas PHA, and the November 4, 2021, A076 3 HDO PHA each had recommendations misclassified as 'improvement ideas' that were not being tracked to closure.

PHA-2: The January 14, 2022, A003 5Gas PHA had eight PHA/LOPA recommendations of which six were not in Intellex and being tracked to closure.

PHA-3: The January 14, 2022, A003 5Gas PHA study was past the five-year revalidation cycle from the previous July 21, 2016, PHA.

OP-1: The site management system for process area sign-in/sign-out was not effectively used to ensure support personnel signing into a process area also signs out upon exiting the area and that operators initial the area sign-in log to acknowledge personnel were entering the process area.

OP-2: The site management system for energy isolation was not effectively used to ensure blinds were verified to be installed and blind list signed off by both the owning department and servicing group before work began to open process equipment (exchanger work in #PTO unit on exchangers E-5620/5621/5623/5626/5627).

OP-3: This audit team identified discrepancies on six of thirty safe work permits reviewed where safe work permits did not have the signature of the operations person involved to reflect the close-out of the permit at the end of work.

MI-1: None of the five sampled instrumented systems identified as IPLs (i.e., 003-FV-0409, 003-PT-5481, 39-XS-3005, No. 1 HDO Trim Heater ESD, and 067-TD-3951) had assigned ITPM activities in SAP at the time of this audit.

MI-2: Documented evidence of recurring tasks to validate pressurized/purged cabinets and panels in the No. 3 HDO unit was not available at the time of this audit. Also, the No. 1/No. 3 HDS FOS building was not adequately pressurized based on its magnehelic gauge reading of less than 0.1-inch water column.

MI-3: Interviews indicated there were no documented operator tasks being performed to monitor the pressure in the interstitial spaces between rupture disks and associated pressure relief valves as required by MPC document Pressure Protection and Disposal (Doc. No. RSP-1131-000, Rev. 11) § 2.6.2. 2. Those instances noted were for the following rupture disks:

- 076-PSE-3204
- 004-PSE-1413
- 004-PSE-1414
- 004-PSE-1616

- 048-PSE-6167
- 048-PSE-6176
- 048-PSE-6183
- 048-PSE-6185
- 067-PSE-1921
- 067-PSE-1923
- 067-PSE-1924
- 120-PSE-388
- 120-PSE-389

MI-4: Interviews indicated intervals for approximately 372 pressure relief valves had been extended without documented and approved deferrals being in place as required by API 510 §6.7 and API 570 §7.13. Also, many of these extensions were greater than the maximum of six months as allowed by site procedure Safety Relief Devices – Service and Testing (Doc. No. 14-03-03, Rev. 2019).

MI-5: Interviews and a records review indicated buried piping and soil-to-air interfaces did not have inspection plans in place as required by API 570 §5.1.2. Also, while some cathodic protection systems were present, documentation could not be provided to show they had been monitored since early 2020, and at that time, a significant amount of the CP systems (approximately 40%) were “not meeting criteria.” Thus, these systems should not be considered effective when establishing inspection plans.

MI-6: Interviews and a records review indicated the piping inspection program had not been updated since the facility was converted from a tank terminal to a renewables facility. Many piping systems which were no longer in service were shown to be active. Numerous active deadlegs were not being inspected for localized corrosion, such as those in the 3HDO feed system which were identified in the Damage Mechanism Review as being potentially susceptible to deadleg corrosion, did not have inspection plans in place to address this mechanism. Mixing points identified in the Damage Mechanism Review as potentially susceptible to fatigue cracking, such as the shell side bypass around E4658 in the 3HDO, did not have inspection plans to address this mechanism. Evidence of inspection for corrosion to process piping dummy leg attachments was unavailable.

MI-7: A review of the process hose management system indicated many process hoses had been identified. However, except for dock hoses, no PMs had been developed for testing/replacing hoses. It was also noted that the hoses for the new rail car loading facility and burner hoses for the SMR heater had not been included in the management system as required by MPC document PSM/RMP Mechanical Integrity (Doc. No. RSP-1308, Rev. 14).

MI-8: A review of the temporary repair program indicated of the seven existing temporary repairs, only two had schedules in place to perform inspections periodically as required by MPC document Management of Minor Leaks and Clamp/Wrap Life Cycle Management (Doc. No. RSP-1150-40, Rev. 3) § 3.10.3.

MI-9: In 2016, the facility's structural steel and fireproofing were evaluated, identifying numerous issues. Interviews indicated that while some repairs had been made, many more needed to be completed, but there were no documented plans in place to do so.

MI-10: Interviews indicated that the current practice was to replace most critical check valves in-kind rather than inspect them. API 570 §5.13 requires all critical check valves to be periodically inspected. Even when being replaced, critical check valves need to be inspected to verify that the inspection/replacement interval is appropriate for the service.

MI-11: A review of the inspection recommendation documented in Meridium-APM indicated eight recommendations were overdue.

MI-12: As of this audit, four MEDs were past the assigned "expected completion date" without approved extensions.

MI-13: A brief survey of the main and turnaround/project warehouses indicated PMI was conducted on most alloy components. However, the following discrepancies were noted:

- Main warehouse – the following items had no indication of having been PMI'd:
 - o One 6-inch stainless steel check valve
 - o One 2-inch socket-weld 9% Chrome check valve (mixed in with some carbon steel components)
 - o Two 2-inch x approximately 10 feet long stainless steel braided metal hoses
- Turnaround/project warehouse – the following items did not indicate having been PMI'd –
 - o Approximately 12 ¾-inch flanged 1500-pound 317 stainless steel flanges
 - o Two 3-inch CF8M (316 stainless steel) flanged check valves
 - o Two 2-inch CF8M (316 stainless steel) flanged check valves
 - o Six 2-inch CF8M (316 stainless steel) flanged gate valves
 - o One ¾-inch 5% Chrome flanged gate valves
 - o Three 1-inch 5% Chrome flanged gate valves

HW-1: This audit team identified discrepancies on sixteen of thirty hot work permits reviewed as a part of this audit. Permit issues included the mid-shift gas test results not being recorded on permits and the designated fire watch not signing on or off permits.

MOC-1: A bay of 3 HDO fractionator bottoms fin fans (E-4678/9) was blinded and put back into service and an upgraded demister was put into 1 HDO "A" 67V161 without associated MOCs.

MOC-2: MOC 128918 (Install a clamp on 8-inch downstream of E-4321) had no attached clamp form and clamp had been removed approximately 5 months ago but the MOC had not been closed.

MOC-3: At the time of this audit, there were 57 overdue post-startup action items, all associated with renewable fuels project changes to PSI and MI programs.

II-1: The investigations for two of the incidents reviewed, 290892 and 344567, were not started until after 48 hours from the time of the incidents.

II-2: The investigation team leaders for 321053 and 367322 were not TapRoot® trained and the investigation team members for 336314 and 369020 were not listed in the investigation documentation. Additionally, the investigation team for 406247 did not include an hourly member as required by corporate and site procedures.

II-3: Two incidents, 369020 and 336314, were not completed within their specified timelines and did not have approved extensions. Two additional incidents, 344567 and 394493, became overdue before their extensions were developed and approved.

II-4: Three incident investigations, 369020, 321053, and 285353, had recommendations that had been closed after they were due without approved extensions. Additionally, at the time of this audit, 20 investigation recommendations were open and overdue.

EPR-1: Five emergency response team members who had been in this role for the past three years were randomly selected and the dates for their previous three medical surveillances were reviewed. None were found to be compliant with the requirement to have medical surveillance every 12 months

EPR-2: The nine fixed diesel fire water pumps were not being run weekly for at least 30 minutes as required by NFPA 25 Chapter 8.

CA-1: Ten findings from this audit were the same or very similar to those identified during the 2021 audit. Specifically, 2021 findings PSI-1, MI-1, MI-4, MI-5, MI-6, MI-8, II-1, II-2, MOC-3, and IMP-1 were the same or very similar to findings identified during this audit.

EP-1: Document 01-13, § 21 required the facility to select individuals from a list of United Steelworkers (USW) pre-identified employees to participate in PHA, MOC, and select other PSM/RMP/ISO-related activities. This audit team noted some MOCs completed within the past three years did not include one or more of the employees pre-identified by the USW.

SPM-1: The document Rules and Standing Instructions Revision, Approval, and Distribution (R&SI 02, last revised June 6, 2022) stated that the review cycle for RS&Is cannot be longer than three years from the date of the last revision. However, this audit team noted multiple RS&Is that were not reviewed within three years of the last revision date.

Examples included:

- R&SI 9-8, Contractor Work Rules-next review date was 7/7/2021
- R&SI 4-3, Management of Organizational Change-next review date was 9/8/2021
- R&SI 10-4, Request for Training-next review date was 6/5/2022
- R&SI 14-04, Process Hazards Analysis-Initial Unit Revalidation-Next Review Date was 11/27/2023
- R&SI 8-0, Entering Operating Units-next review date was 11/24/2023
- R&SI 08-05-01, Safe Entry Into Inert Atmosphere-next review date was 9/3/23
- R&SI 04-01, Guidelines for Operating Procedures and Work Instructions-next review date was 12/17/2022
- R&SI 01-13, Employee Participation (PSM, RMP, ISO)-next review date was 9/8/2023
- R&SI 14-08, Human Factors Review-next review date was 9/18/2023
- R&SI 20-2, Deferral Process for Recommendations, Action Items, and ITPM Tasks-next review date was 10/27/2023
- R&SI 20-3, Rejection/Modification Process for Recommendations, Action Items-next review date was 11/17/2023

- R&SI 1-33, Trade Secrets-next review date was 8/17/2023
- R&SI 05-03, Unsafe Situation Program (Eagle Eye)-next review date was 9/3/2023
- R&SI 04-01, Guidelines for Operating Procedures and Work Instructions-next review date: 12/17/2022

Also, some R&SIs had next review tasks tracked in Intelex at five year intervals versus the three year requirement stated in R&SI 02.

Specifically, R&SI 04-01, R&SI 7-3-B, and R&SI 14-04 had five-year review frequencies assigned in Intelex.

PSM or RMP Agency Inspection Findings and/or Citations Related to an RMP Covered Process



Contra Costa Health - Hazardous Materials Programs

4585 Pacheco Blvd., Suite 100, Martinez, CA 94553

Telephone: (925)655-3200 Fax: (925)646-2073

WWW.CCHEALTH.ORG/HAZMAT

Hazmat.Arpteam@cchealth.org

NICOLE A. HEATH, DIRECTOR OF HAZARDOUS MATERIALS PROGRAMS



CalARP/ISO INSPECTION REPORT

California Code of Regulations (CCR), Title 19, Division 2, Chapter 4.5 SS2735 et seq

Contra Costa County Code, Title 4, Division 450, Chapter 450-8 et. Seq

Richmond Municipal Code, Article VI, Chapter 6.43 et. seq

FACILITY INFORMATION

BUSINESS NAME:	MARTINEZ RENEWABLE FUELS	CUPA FACILITY ID:	719277
BUSINESS ADDRESS:	150 SOLANO WY MARTINEZ, CA 94553	CERS ID:	10153029
BUSINESS PHONE:	(925)228-1220	FACILITY ID:	FA0031878
BUSINESS OWNER:	MARTINEZ RENEWABLES LLC	SENT TO:	HAZMAT.ARPTeam@CCHEALTH.ORG
BUSINESS OPERATOR:	TESORO REFINING MARKETING COMPANY LLC DBA MARATHON MARTINEZ REFINERY		

INSPECTION INFORMATION

DATE OF INSPECTION:	JUNE 06, 2024	INSPECTOR:	MIKE DOSSEY
INSPECTION TYPE:	CALARP/ISO ON-SITE AUDIT ACTIVITY	TITLE:	CALARP ENGINEER
PROGRAM:	CALARP RMP	CONTACT:	(925)655-3237
SERIAL NUMBER:	DADNTKXT7		MICHAEL.DOSSEY@CCHEALTH.ORG

GENERAL OBSERVATIONS

FINAL INSPECTION REPORT

CONTRA COSTA HEALTH HAZARDOUS MATERIALS PROGRAM (CCHMP) CONDUCTED A LIMITED REVIEW OF TOPICS FOR THIS INSPECTION, AND THIS IS THE FINAL INSPECTION REPORT THAT CONTAINS THE FINDINGS. CCHMP CONDUCTED THIS INSPECTION FROM AUGUST 23, 2023, TO SEPTEMBER 8, 2023, AND HAD A CLOSING MEETING ON SEPTEMBER 18, 2023. THIS FINAL INSPECTION REPORT INCORPORATES RESPONSES TO COMMENTS RECEIVED FROM MARTINEZ RENEWABLE FUELS ON OCTOBER 26, 2023, ON THE ADMINISTRATIVE DRAFT INSPECTION REPORT THAT WAS ISSUED ON OCTOBER 18, 2023.

FINAL OBSERVATIONS

ON AUGUST 23, 2023, CCHMP INITIATED AN INSPECTION AT MARTINEZ RENEWABLE FUELS ALONG WITH ADVISORS FROM THE AIR DISTRICT AND THE CONTRA COSTA COUNTY FIRE PROTECTION DISTRICT (CON FIRE) IN REACTION TO CONCERNS RELATED TO FLARING RAISED BY THE COMMUNITY AND THE FACILITY'S EMERGENCY RESPONSE CAPABILITIES. THE AIR DISTRICT FINDINGS ARE NOT PART OF THIS REPORT AS THEY HAVE THEIR OWN INSPECTION AUTHORITY. THE OBSERVATIONS FROM CON FIRE WILL BE MENTIONED IN THIS REPORT AND WILL BE TRANSMITTED SEPARATELY TO THE FACILITY. THE CLOSING MEETING FOR THIS INSPECTION TOOK PLACE ON SEPTEMBER 18, 2023.

IN THE PAST, THE REFINERY PROCESSED CRUDE OILS. IN 2020, THE REFINERY CLOSED MOST OPERATIONS AND CONTINUED TO CONDUCT OTHER PERMITTED ACTIVITIES (INCLUDING LOADING AND UNLOADING OF PRODUCT, VAPOR RECOVERY, WASTEWATER TREATMENT, AND OPERATION OF FLARES OR THERMAL OXIDIZER). IN 2022, THE REFINERY BEGAN CONVERTING OPERATIONS TO PROCESS RENEWABLE FUELS. ONCE COMPLETE, THE REFINERY WILL NOT PROCESS CRUDE OILS. THE FACILITY BEGAN CONVERTING PROCESS UNITS IN PHASES, WITH EACH PHASE ADDING ADDITIONAL PROCESSING UNITS AND COMPLEXITY.

(CONTINUED ON NEXT PAGE)

CalARP/ISO INSPECTION REPORT (CONTINUED)

BUSINESS NAME: MARTINEZ RENEWABLE FUELS
DATE OF INSPECTION: JUNE 06, 2024
INSPECTION TYPE: CALARP/ISO ON-SITE AUDIT ACTIVITY

CUPA FACILITY ID: 719277
CERS ID: 10153029
SERIAL NUMBER: DADNTKXT7

(GENERAL OBSERVATIONS CONTINUED FROM PREVIOUS PAGE)

PHASE 1 PROCESSES STARTED OPERATING ROUGHLY IN FEBRUARY 2023. PHASE 2 PROCESSES STARTED OPERATING ROUGHLY IN JUNE 2023. PHASE 3 IS EXPECTED TO BEGIN OPERATION IN NOVEMBER 2023. CCHHMP'S INSPECTION TOOK PLACE WHILE THE FACILITY WAS IN PHASE 2.

GENERAL OBSERVATIONS

CCHHMP INTERVIEWED SELECT MEMBERS OF LEADERSHIP, SUBJECT MATTER EXPERTS (SMES), AND OPERATORS. THESE DISCUSSIONS WERE INITIALLY FOCUSED ON FLARING ACTIVITIES OVER THE LAST YEAR AND EMERGENCY RESPONSE CAPABILITIES AT THE SITE. DISCUSSIONS ON RECENT FLARING INCLUDED REPORTING FLARING EVENTS THROUGH THE COMMUNITY WARNING SYSTEM (CWS) AS WELL AS REQUIREMENTS FOR SUBMITTING FLARE CAUSAL REPORTS TO THE AIR DISTRICT. CCHHMP DID NOT FIND ANY FLARING ISSUES THAT WARRANTED FURTHER INVOLVEMENT SO WILL DEFER TO THE AIR DISTRICT ON PAST FLARING.

EMERGENCY RESPONSE CAPABILITIES FOR THE SITE WERE DISCUSSED WITH CON FIRE AND CCHHMP. THROUGH THESE DISCUSSIONS, CON FIRE DEVELOPED A LIST OF OBSERVATIONS RELATED TO THE SITE'S EMERGENCY RESPONSE TEAM, FIRE PROTECTION AND MUTUAL AID AGREEMENTS, AND AUTHORITY HAVING JURISDICTION AS THE FIRE OFFICIAL. CON FIRE'S OBSERVATIONS WERE SUMMARIZED IN A REPORT THAT WILL BE SHARED WITH THE FACILITY. CCHHMP ALSO REVIEWED SELECT EMERGENCY OPERATIONS AND EMERGENCY PROCEDURES AND THOSE OBSERVATIONS ARE LISTED FURTHER BELOW IN THIS REPORT. CCHHMP PLANS TO PERIODICALLY CHECK THE STATUS OF THE FOLLOWING OBSERVATIONS MADE BY CON FIRE: 1) ACHIEVING 100 TRAINED EMERGENCY RESPONSE TEAM MEMBERS VERSUS THE 62 LISTED AT THE TIME OF THIS INSPECTION, AND 2) CONFIRMATION ON WHETHER CON FIRE OR THE OFFICE OF THE STATE FIRE MARSHAL FOR CALIFORNIA WILL BE THE AUTHORITY HAVING JURISDICTION (AHJ) TO ENFORCE FIRE CODE REGULATIONS AND REQUIREMENTS FOR THE SITE.

DURING CONVERSATIONS WITH LEADERSHIP AND OPERATORS, CCHHMP BECAME AWARE THAT SHIFT SCHEDULES WERE DIFFERENT BETWEEN THE RENEWABLE FUELS OPERATION (RFO) AND PRODUCT CONTROL OPERATIONS (PCO). RFO OPERATORS WERE DESCRIBED TO WORK A ROTATION OF SIX SHIFTS ON AND THREE SHIFTS OFF AND PCO OPERATORS WORK FOUR SHIFTS ON AND FOUR SHIFTS OFF. EACH SHIFT IS 12 HOURS IN LENGTH. CCHHMP ALSO BECAME AWARE THAT ONE OF THE REASONS RFO OPERATORS WERE WORKING THESE SHIFTS WAS ONE OF THE FOUR CREWS WAS LEADING THE TRAINING FOR NEWLY HIRED EMPLOYEES. THE FACILITY WAS IN THE PROCESS OF HIRING MORE STAFF FOR RFO. CCHHMP FOUND THAT RFO OPERATORS WERE BEING TRAINED ON CONSOLE OR BOARD OPERATIONS DURING OVERTIME HOURS. INTERVIEWS WITH OPERATORS AT BOTH PCO AND RFO DESCRIBED THEIR CURRENT NORMAL DUTIES AS BEING MORE TAXING AND DEMANDING THAN PREVIOUSLY WHEN THE FACILITY WAS ONLY PROCESSING PETROLEUM, AS WELL AS EXPRESSED CONCERN THAT THERE WERE FEWER OPERATORS TO PERFORM TASKS NOW THAN WHAT THEY HAD PREVIOUSLY. THE FOLLOWING ARE SELECT EXAMPLES:

- PCO OPERATORS IDENTIFIED AS A PETROLEUM REFINERY THERE WERE TWO BOARD OPERATORS AND NOW THERE IS ONE.
• RFO BOARD OPERATORS IDENTIFIED THAT AS A PETROLEUM REFINERY, THERE WERE TWO BOARD OPERATORS AND THREE FIELD OPERATORS OPERATING JUST ONE UNIT, THE HYDROCRACKER, AND CURRENTLY THAT IS THE FULL COMPLEMENT OF OPERATORS AT RFO TO MANAGE ALL OPERATIONS, WHICH INCLUDES A REPURPOSED HYDROCRACKER, HYDROGEN PLANT, GAS PLANT, A PRE-TREATMENT UNIT, AND A HOT OIL PROCESSING PLANT.
• RFO BOARD OPERATORS WERE OBSERVED WATCHING 16 DISTRIBUTED CONTROL SYSTEM (DCS) SCREENS TO MONITOR PROCESS OPERATIONS. CCHHMP HAS VISITED OTHER REFINERIES WITHIN THE COUNTY AND IS NOT AWARE OF ANY OTHER BOARD STATION WHERE MANAGEMENT HAS INSTALLED THIS MANY SCREENS FOR ONE OPERATOR TO MONITOR. ALTHOUGH THERE IS A BENEFIT IN HAVING MULTIPLE SCREENS TO MINIMIZE CLICKING INTO VARIOUS PROCESS LAYERS, CCHHMP WOULD EXPECT A STUDY OR ANALYSIS MAY BE PERFORMED TO OPTIMIZE THIS. THE CONCERN HERE IS THAT TOO MUCH INFORMATION COULD INCREASE THE AMOUNT OF TIME VIEWING EACH SCREEN.

CCHHMP ACKNOWLEDGES THAT THE FORMER OPERATIONS AT THE FACILITY WERE DIFFERENT FROM THE CURRENT OPERATIONS. FOR EXAMPLE, SOME EQUIPMENT NOW BEING OPERATED IS NEW COMPARED TO BEFORE, SOME EQUIPMENT IS NOW BEING OPERATED DIFFERENTLY THAN BEFORE, AND SOME EQUIPMENT IS NO LONGER BEING OPERATED. NEVERTHELESS, GIVEN THE AMOUNT OF DETAIL PROVIDED TO CCHHMP DURING THIS INSPECTION, CCHHMP DEVELOPED CONCERNS ABOUT THE OPERATIONAL JOB DUTIES DURING NORMAL AND EMERGENCY SITUATIONS AND WHETHER JOB ROLES WERE PROPERLY EVALUATED TO ENSURE ALL NECESSARY TASKS CAN BE ACCOMPLISHED WITH THE REDUCTION IN STAFFING FROM THE PREVIOUS REFINERY OPERATIONS. AS A RESULT OF THE INFORMATION PROVIDED TO CCHHMP, THE SCOPE OF THIS INSPECTION WAS EXPANDED TO INCLUDE THE FOLLOWING TOPICS: MANAGEMENT OF ORGANIZATIONAL CHANGE (MOOC), FATIGUE MANAGEMENT, AND REVIEW OF EMERGENCY OPERATIONS. EACH OF THESE TOPICS IS DISCUSSED BELOW.

IT SHOULD ALSO BE NOTED THAT CCHHMP FOCUSED MOST OF ITS REVIEW ON RFO. IT SHOULD ALSO BE NOTED THAT MARTINEZ RENEWABLE FUELS PROVIDED COMMENTS THAT THE RFO BOARD 1 OPERATORS ARE EXPECTED TO ACTIVELY MONITOR 8 OVERVIEW SCREENS. A TOTAL OF 12 SCREENS/MONITORS WERE INITIALLY PROVIDED TO RFO BOARD 1 OPERATORS AND AN ADDITIONAL 4 SCREENS WERE REQUESTED BY THE OPERATORS AND WERE PROVIDED.

MANAGEMENT OF ORGANIZATIONAL CHANGE (MOOC)

CCHHMP REVIEWED A MOOC THAT WAS DATED 11/16/2021, THAT WAS DEVELOPED FOR THE MARTINEZ RENEWABLE FUELS FACILITY TO ASSESS IMPACTS

CalARP/ISO INSPECTION REPORT (CONTINUED)

BUSINESS NAME: MARTINEZ RENEWABLE FUELS
DATE OF INSPECTION: JUNE 06, 2024
INSPECTION TYPE: CALARP/ISO ON-SITE AUDIT ACTIVITY

CUPA FACILITY ID: 719277
CERS ID: 10153029
SERIAL NUMBER: DADNTKXT7

FOR HOURLY OPERATIONS, MAINTENANCE, AND LABORATORY ASSIGNMENTS. THE REVIEW TEAM WAS COMPRISED OF TEN REPRESENTATIVES AND INCLUDED THOSE FROM PROCESS SAFETY MANAGEMENT, LAB REPRESENTATIVES, FOUR OPERATIONS REPRESENTATIVES, TWO MAINTENANCE REPRESENTATIVES AND THE HESS (HEALTH ENVIRONMENTAL, SAFETY AND SECURITY) MANAGER. CCHHMP WAS UNABLE TO CONFIRM THAT ANY OF THE FOUR OPERATIONS REPRESENTATIVES HAD KNOWLEDGE ON RENEWABLE FUELS OPERATIONS. THE ANALYSIS CULMINATED IN 27 RECOMMENDATIONS, PREDOMINANTLY CENTERED ON THE EVALUATION AND DELINEATION OF RESPONSIBILITIES ACROSS VARIOUS ROLES. REVIEWING THESE RECOMMENDATIONS IN MORE DETAIL, CCHHMP NOTED THAT 15 OF THESE RECOMMENDATIONS WERE SPECIFIC TO THE TERMINAL OR PRODUCT CONTROL OPERATIONS (PCO), 7 RECOMMENDATIONS WERE MORE ADMINISTRATIVE IN NATURE, AND ONLY 5 RECOMMENDATIONS WERE SPECIFIC TO THE RENEWABLE FUELS OPERATIONS (RFO). CCHHMP ALSO FOUND THAT THE MOOC INCLUDED 11 OPERATIONAL SUGGESTIONS, OF WHICH 6 WERE SPECIFIC TO PCO, 4 TO RFO, AND 1 SPECIFIC TO MAINTENANCE. IN REVIEWING THE MOOC, CCHHMP FOUND RFO RECOMMENDATIONS INCLUDED THE DEVELOPMENT OF RFO OPERATING PROCEDURES AND RFO RESPONSIBILITIES. BASED ON SME INTERVIEWS, THIS DOCUMENT SERVED AS A CATALYST FOR DELIBERATIONS REGARDING THE SPECIFIC DUTIES OF EACH ROLE. HOWEVER, THERE WAS A NOTICEABLE ABSENCE OF DETAILED TASK DOCUMENTATION OR EXPLICIT REASSIGNMENT OF TASKS FROM THE PHASED-OUT ROLES TO THE NEW ONES.

CCHHMP WAS INFORMED THAT THE SITE CONDUCTED A STAFFING STUDY APPROXIMATELY ONE YEAR AFTER THE RFO MOOC WAS COMPLETED THAT SUPPORTED THE PROPOSED RFO STAFFING LEVELS. CCHHMP FOUND NO STAFFING LEVELS LISTED IN THE MOOC NOR ANY MENTION OF TASK ANALYSES PERFORMED TO BETTER UNDERSTAND STAFFING LEVELS NEEDED. IN ADDITION, A STAFFING STUDY CONDUCTED THIS LONG AFTER THE MOOC DOES NOT HAVE ANY BEARING ON THE ADEQUACY OF THE MOOC. FURTHERMORE, CCHHMP WAS UNABLE TO REVIEW ANY DOCUMENTED ANALYSIS ASSOCIATED WITH THE MOOC BEFORE BEGINNING RENEWABLE FUELS OPERATION TO SUBSTANTIATE THE PROPOSED STAFFING LEVELS, ESPECIALLY WHEN COMPARED WITH PRIOR STAFFING CONFIGURATIONS. IT SHOULD BE NOTED THAT THE DOCUMENTATION THAT IS MAINTAINED FOR MOOCS NEED TO SUPPORT THAT THE STUDY WAS COMPLETED PROPERLY. THE MOOC FORMS IN THE COUNTY'S GUIDANCE THAT WERE USED IN THIS STUDY ARE A GUIDE. IF THE CHANGE IS COMPLEX (LIKE RFO), ADDITIONAL ITEMS LIKE TASK ANALYSES OR TIME STUDIES SHOULD HAVE BEEN PERFORMED TO BETTER UNDERSTAND THE DEMANDS OF THE ROLES.

MOOC-1: MOOC(S) SHOULD BE REDONE OR AMENDED FOR PERMANENT STAFFING CHANGES AT THE SITE RELATED TO POSITIONS IN OPERATIONS, MAINTENANCE, HEALTH AND SAFETY, AND EMERGENCY RESPONSE. THIS APPLIES SITEWIDE AND SHOULD INCLUDE TASK ANALYSES. [ISO 450-8.016(B)(1) (F) AND SECTION B, CHAPTER 7 OF THE SAFETY PROGRAM GUIDANCE DOCUMENT]

MOOC-2: MOOC(S) SHOULD CLEARLY IDENTIFY THE DUTIES FOR EACH ROLE THAT USED TO BE PERFORMED AND THOSE DUTIES THAT ARE TO BE PERFORMED IN THE CURRENT ROLES. THE MOOC DOCUMENTATION SHOULD BE CLEAR FOR EACH ROLE THE NUMBER OF PERSONNEL THAT FILLED THEM IN THE PAST COMPARED TO THE PRESENT OR PROPOSED. THE MOOC(S) SHOULD ALSO IDENTIFY WHICH TASKS WERE NO LONGER PERFORMED AND ANY TASKS THAT WERE AUTOMATED. [SECTION B, CHAPTER 7 OF THE SAFETY PROGRAM GUIDANCE DOCUMENT]

MOOC-3: MOOC(S) SHOULD INCLUDE HOW IMPACTS ON SAFETY AND HEALTH WERE ASSESSED AND HOW NEGATIVE IMPACTS, IF IDENTIFIED WERE MITIGATED. [SECTION B, CHAPTER 7 OF THE SAFETY PROGRAM GUIDANCE DOCUMENT]

FATIGUE

CCHHMP WAS INFORMED THAT THE FACILITY HAS TWO OPERATING UNITS: PRODUCTION CONTROL OPERATIONS (PCO) AND RENEWABLE FUELS OPERATIONS (RFO). OPERATORS WORKING IN RFO HAVE BEEN WORKING SIX 12-HOUR SHIFTS IN A ROW AND ARE SUPPOSED TO BE OFF FOR THREE SHIFTS BEFORE STARTING THEIR NEXT ROTATION. OPERATORS IN PCO WORK FOUR 12-HOUR SHIFTS IN A ROW AND ARE OFF FOUR SHIFTS BEFORE STARTING THEIR NEXT ROTATION. CCHHMP WAS INFORMED THAT THE CURRENT RFO STAFFING SCHEDULE IS TEMPORARY UNTIL ADDITIONAL STAFF CAN BE TRAINED AND ULTIMATELY THE STAFFING SCHEDULE IS TO BE FOUR (12-HOUR) SHIFTS ON AND FOUR SHIFTS OFF. CCHHMP REVIEWED PRESENTATION SLIDES THAT SUMMARIZED A STAFFING STUDY THAT WAS COMPLETED WHEN THE FACILITY WAS IN PHASE 1 OF ITS RFO CONVERSION. THE PRESENTATION SLIDES SUMMARIZED THE WORKLOADS OF THE RFO OPERATORS. ONE OF THE ITEMS IDENTIFIED IN THE PRESENTATION SLIDES WAS THAT THE AMOUNT OF OVERTIME HAS CREATED A HIGH LEVEL OF ACCUMULATED AND ONGOING FATIGUE RESULTING IN LOW MORALE. THE PRESENTATION SLIDES ALSO SUMMARIZED SHORT-TERM AND MID-TERM RECOMMENDATIONS ALONG WITH A SUMMARY OF ISSUES AND CONCERNS. CCHHMP REVIEWED THESE RECOMMENDATIONS WITH REFINERY LEADERSHIP AND FOUND THE FACILITY IS MAKING PROGRESS ON THE ITEMS IDENTIFIED. IT SHOULD BE NOTED THAT AFTER THE INSPECTION CCHHMP BECAME AWARE THAT THE FACILITY CONDUCTED A STAFFING STUDY FOR PCO OPERATORS ALTHOUGH THAT STUDY WAS NOT REVIEWED.

CCHHMP CONFIRMED THAT THE FACILITY HAS POLICIES AND PROCEDURES THAT FOLLOW API RP 755 FOR FATIGUE MANAGEMENT. THE FACILITY HAS LIMITS FOR WORK HOURS AND WORK SETS DURING ROUTINE OPERATIONS AND DURING TURNAROUND ACTIVITIES. BETWEEN THE PERIOD OF 02/25/23 TO 08/26/23, THE FACILITY GENERATED A TOTAL OF 69 EXCEPTION REPORTS. CCHHMP FOUND THAT THE EXCEPTION REPORTS WERE ISSUED CONSISTENT WITH THE REASONS LISTED IN THE FACILITY'S FATIGUE MANAGEMENT PROCEDURE. MOST IF NOT ALL OF THE EXCEPTION REPORTS WERE ISSUED FOR THE RENEWABLE FUEL OPERATION. BASED ON SME INTERVIEWS, ONCE AN EXCEPTION REPORT IS ISSUED LOCAL SUPERVISION IS INSTRUCTED TO IMPLEMENT A MITIGATION PLAN FOR THE OPERATOR THAT INCLUDES SUPERVISOR MONITORING. CCHHMP NOTES THAT THERE IS NO SPECIFIC PROTOCOL IN PLACE TO ENSURE THAT THE MITIGATION PLAN IS CONSISTENTLY FOLLOWED.

CCHHMP WAS INFORMED THAT THE SHIFT SCHEDULING SYSTEM IS DESIGNED TO FLAG WHEN AN EXCEPTION REPORT MUST BE DEVELOPED. SHIFT SUPERVISION UPDATES THE SHIFT SCHEDULE MANUALLY AND IS EXPECTED TO HAVE ANY LAST-MINUTE CHANGES TO THE SCHEDULE UPDATED WHEN CHANGES TAKE PLACE OR NO LATER THAN BY THE END OF THE SHIFT. AS SUCH, THERE IS A POTENTIAL THAT SUPERVISION WAS NOT AWARE OR ADVISED TO INCREASE MONITORING OF AN OPERATOR WORKING UNDER AN EXCEPTION UNTIL MOST OF THE OPERATOR'S SHIFT IS OVER.

CalARP/ISO INSPECTION REPORT (CONTINUED)

BUSINESS NAME: MARTINEZ RENEWABLE FUELS
DATE OF INSPECTION: JUNE 06, 2024
INSPECTION TYPE: CALARP/ISO ON-SITE AUDIT ACTIVITY

CUPA FACILITY ID: 719277
CERS ID: 10153029
SERIAL NUMBER: DADNTKXT7

FATIGUE-1: A FATIGUE MONITORING AWARENESS TRAINING PROGRAM SHOULD BE CREATED, AND ALL EMPLOYEES ROUTINELY TRAINED IN IT.
FATIGUE-2: FATIGUE MONITORING PROTOCOLS SHOULD BE CREATED, AND A PROCESS DEVELOPED TO ENSURE THAT ALL EMPLOYEES ARE PROPERLY ASSESSED FOR THE DURATION OF EACH SHIFT THEY WORK WHEN ONCE TRIGGERED.
FATIGUE-3: ANOTHER STAFFING STUDY SHOULD BE COMPLETED FOR EACH OPERATING ROLE (RENEWABLE FUELS AND PRODUCTION CONTROL) AND SHARED WITH THE WORKFORCE. RESOLUTIONS SHOULD BE DEVELOPED FOR ANY NEGATIVE FINDINGS FROM SUCH A STUDY AND EXPEDITED.

EMERGENCY OPERATIONS AND EMERGENCY PROCEDURES

CCHHMP WAS INFORMED THAT 6 OF THE 7 SHIFT POSITIONS AT PCO AND 2 OF THE 5 SHIFT POSITIONS AT RFO WOULD BE RELEASED IF THERE WAS AN EMERGENCY AT THE FACILITY. ALTHOUGH THE FACILITY HAS MANAGEMENT STAFF AND MAINTENANCE STAFF THAT CAN RESPOND TO EMERGENCIES, THE RESPONSE IS TO THE EMERGENCY, NOT THE PCO OR RFO UNITS TO ASSIST WITH OPERATIONS. CCHHMP WAS INFORMED THAT SINCE THE FACILITY DOES NOT STAFF FOR EMERGENCIES THE REMAINING OPERATORS AT PCO AND RFO WOULD NEED TO OPERATE THEIR UNITS WITHOUT ADDITIONAL SUPPORT.

ACCORDING TO INTERVIEWS WITH MANAGEMENT AND A REVIEW OF STANDARD OPERATING PROCEDURE (SOP) POLICY 04-01 (LAST REVIEWED ON DECEMBER 17, 2019), THE FACILITY HAS ESTABLISHED EMERGENCY PROCEDURES. THESE PROCEDURES ARE CLASSIFIED INTO TWO CATEGORIES: EMERGENCY OPERATIONS AND EMERGENCY SHUTDOWN. EMERGENCY OPERATIONS ARE USED DURING PREDEFINED EMERGENCIES THAT DON'T REQUIRE A SHUTDOWN. THE AIM IS TO STABILIZE THE UNIT SAFELY. EMERGENCY SHUTDOWN ARE DESIGNED TO SHUT DOWN THE UNIT TO A PREDETERMINED SAFE CONDITION, SUCH AS RECIRCULATION.


BOARD OPERATORS ARE REQUIRED TO MEMORIZE THE STEPS FOR "SAFEING THE UNIT," A KEY PART OF THE EMERGENCY SHUTDOWN PROCEDURE. HOWEVER, CCHHMP HAS CONCERNS ABOUT THE FEASIBILITY OF MEMORIZING THESE STEPS DUE TO THE DIVERSE CONDITIONS AND THE NUMBER OF PROCESS UNITS THAT NEED TO BE OPERATED BY EACH BOARD OPERATOR.

ANOTHER ISSUE OF CONCERN IS THE FACILITY'S ABILITY TO EFFECTIVELY EXECUTE EMERGENCY OPERATIONS AND EMERGENCY SHUTDOWN WHICH OFTEN REQUIRES THE SIMULTANEOUS PRESENCE OF BOARD AND FIELD OPERATORS. CURRENT STAFFING LEVELS AND THE ABSENCE OF BACKUP PERSONNEL POSE A RISK OF DELAYED EXECUTION OF THESE CRITICAL PROCEDURES. DURING SAMPLE COLLECTION AND LAB DELIVERY TASKS, FIELD OPERATORS MAY NOT BE PRESENT IN THEIR PRIMARY AREAS, FURTHER INCREASING THE PROCESS RISKS.

CCHHMP ALSO NOTES THAT THERE IS NOT ENOUGH FIELD PERSONNEL TO RELIABLY EXECUTE MORE THAN ONE EMERGENCY PROCEDURE AT A TIME. FOR EXAMPLE, FIELD OPERATOR POSITION RF3 SERVES BOTH BOARD OPERATOR 1 (5 GAS, MU COMP) AND BOARD OPERATOR 2 (H2 PLANT), CREATING AMBIGUITY IN PRIORITY DURING SIMULTANEOUS EMERGENCIES.

EO-1: APPROPRIATE RESPONSE AND IMPLEMENTATION TIMES FOR EMERGENCY OPERATIONS AND SHUTDOWNS SHOULD BE ESTABLISHED FOR EACH ASSOCIATED PROCEDURE. ONCE THIS IS ACCOMPLISHED, THE FACILITY SHOULD DETERMINE IF ADDITIONAL STAFFING IS NEEDED.

CONSENT: VERBAL AND OR WRITTEN CONSENT INCLUDES INSPECTING HAZARDOUS MATERIAL/WASTE HANDLING AREAS, TAKING PHOTOGRAPHS, REVIEWING AND COPYING DOCUMENTS, QUESTIONING PERSONNEL AND SAMPLING ACTIVITIES TO DETERMINE COMPLIANCE WITH APPLICABLE LAWS AND REGULATIONS.



MIKE DOSSEY, CALARP ENGINEER



State of California
Department of Industrial Relations
Division of Occupational Safety and Health
Process Safety Management Unit - North
1855 Gateway Blvd, Suite 350
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Phone: (925) 602-2665 Fax: (925) 602-2668

Inspection #: 1711945
Inspection Dates: 11/19/2023 - 05/16/2024
Issuance Date: 05/16/2024
CSHO ID: Q2693
Optional Report #: 004-24



Citation and Notification of Penalty

Company Name: Tesoro Refining & Marketing Company LLC
Establishment DBA:
and its successors
Inspection Site: 150 Solano Way
Martinez, CA 94553

Citation 1 Item 1 Type of Violation: **General**

T8CCR 5189(d): Process Safety Information. The employer shall develop and maintain a compilation of written safety information to enable the employer and the employees operating the process to identify and understand the hazards posed by processes involving acutely hazardous, flammable and explosive material before conducting any process hazard analysis required by this regulation. The employer shall provide for employee participation in this process. Copies of this safety information shall be made accessible and communicated to employees involved in the processes, and include:

Prior to and during the course of the investigation, including, but not limited to, November 19, 2023, the employer failed to establish and maintain Process Safety Information meeting the minimum requirements of the above standard so to enable and provide its affected employees when operating the 2HDO Furnace F20 the information to identify and understand the hazards associated with operating outside of safe operating parameters as well as consequences when deviating from safe operating parameters prior to allowing them to work in the unit.

Date By Which Violation Must be Abated:
Proposed Penalty:

Corrected During Inspection
\$1000.00

State of California

Department of Industrial Relations
Division of Occupational Safety and Health
Process Safety Management Unit - North
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Citation and Notification of Penalty

Company Name: Tesoro Refining & Marketing Company LLC

Establishment DBA:

and its successors

Inspection Site: 150 Solano Way
Martinez, CA 94553

Citation 1 Item 2 Type of Violation: **General**

T8CCR 5189(f)(2): Operating Procedures.

(2) A copy of the operating procedures shall be readily accessible to employees who work in or near the process area or to any other person who works in or near the process area.

Prior to and during the course of the investigation, including, but not limited to, November 19, 2023, a copy of the operating procedures was not readily accessible to operator employees working in or near the 2HDO Unit.

Date By Which Violation Must be Abated:
Proposed Penalty:

Corrected During Inspection
\$1000.00

State of California

Department of Industrial Relations
Division of Occupational Safety and Health
Process Safety Management Unit - North
1855 Gateway Blvd, Suite 350
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Inspection #: 1711945
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Citation and Notification of Penalty

Company Name: Tesoro Refining & Marketing Company LLC
Establishment DBA:

and its successors

Inspection Site: 150 Solano Way
Martinez, CA 94553

Citation 1 Item 3 Type of Violation: **General**

T8CCR 5189(g)(3): Training certification. The employer shall ensure that each employee involved in the operation or maintenance of a process has received and successfully completed training as specified by this subsection. The employer, after the initial or refresher training shall prepare a certification record which contains the identity of the employee, the date of training, and the signatures of the persons administering the training.

Prior to and during the course of the investigation, including, but not limited to, November 19, 2023, the employer failed to prepare a certification record which contains the identity of the employee, the date of training, and the signatures of the persons administering the training as specified by this section for each 2HDO Field Operator.

Date By Which Violation Must be Abated:
Proposed Penalty:

Corrected During Inspection
\$1000.00

State of California

Department of Industrial Relations
Division of Occupational Safety and Health
Process Safety Management Unit - North
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Phone: (925) 602-2665 Fax: (925) 602-2668

Inspection #: 1711945
Inspection Dates: 11/19/2023 - 05/16/2024
Issuance Date: 05/16/2024
CSHO ID: Q2693
Optional Report #: 004-24



Citation and Notification of Penalty

Company Name: Tesoro Refining & Marketing Company LLC

Establishment DBA:

and its successors

Inspection Site: 150 Solano Way
Martinez, CA 94553

Citation 2 Item 1 Type of Violation: **Serious**

T8CCR 5189(e)(2): Process Safety Management of Acutely Hazardous Materials.

(e) Process Hazard Analysis.

(2) The hazard analysis shall address

(A) The hazards of the process;

(B) Engineering and administrative controls applicable to the hazards and their relationships;

(C) Consequences of failure of these controls;

(D) Facility Siting;

(E) Human Factors;

(F) A qualitative evaluation of a range of the possible safety and health effects of the failure of controls on facility employees and

(G) The identification of any previous incident which had a likely potential for catastrophic consequences in the workplace.

Prior to and during the course of the investigation, including, but not limited to, November 19, 2023, the Employer failed to address all hazards related to Furnace F-20 on the 2HDO Unit during Process Hazard Analysis (PHA), including, but not limited to, the following instances:

Instance 1: The Employer did not evaluate the range of possible safety and health hazards when the 004-HV-0831 (P&ID 004-DA- 149-004) malfunctioned when it needed to be closed.

Instance 2: The Employer did not address the hazards of administrative controls, such as the operator(s) response to shut the fuel sources in Furnace F-20 manually.

Instance 3: The Employer did not evaluate the consequences of failure of these temperature indicators: TI 130, TI 131, TE 1126, TE 1127, TE 1128, TE 1129, TI 1271, TI 1272, TI 1273, TI 1274 in Furnace F-20.

Date By Which Violation Must be Abated:

May 28, 2024

Proposed Penalty:

\$22500.00

State of California

Department of Industrial Relations
Division of Occupational Safety and Health
Process Safety Management Unit - North
1855 Gateway Blvd, Suite 350
Concord, CA 94520
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Inspection #: 1711945
Inspection Dates: 11/19/2023 - 05/16/2024
Issuance Date: 05/16/2024
CSHO ID: Q2693
Optional Report #: 004-24



Citation and Notification of Penalty

Company Name: Tesoro Refining & Marketing Company LLC

Establishment DBA:

and its successors

Inspection Site: 150 Solano Way
Martinez, CA 94553

Citation 3 Item 1 Type of Violation: **Serious**

5189(e)(3)(A): Process Hazard Analysis.

The process hazard analysis shall be performed by a team with expertise in engineering and process operations, and the team shall include at least one operating employee who has experience and knowledge specific to the process being evaluated. The team shall also include one member knowledgeable in the specific process hazard analysis methodology being used. The final report containing the results of the hazard analysis for each process shall be available in the respective work area for review by any person working in that area.

Prior to and during the course of the investigation, including, but not limited to, November 19, 2023, the Employer failed to include in its process hazard analysis at least one operating employee who had experience and knowledge specific to Furnace F-20 on the 2HDO Unit as configured in Phase 3 of the Renewable Fuels Project.

Date By Which Violation Must be Abated:

May 28, 2024

Proposed Penalty:

\$22500.00

State of California

Department of Industrial Relations
Division of Occupational Safety and Health
Process Safety Management Unit - North
1855 Gateway Blvd, Suite 350
Concord, CA 94520
Phone: (925) 602-2665 Fax: (925) 602-2668

Inspection #: 1711945
Inspection Dates: 11/19/2023 - 05/16/2024
Issuance Date: 05/16/2024
CSHO ID: Q2693
Optional Report #: 004-24



Citation and Notification of Penalty

Company Name: Tesoro Refining & Marketing Company LLC

Establishment DBA:

and its successors

Inspection Site: 150 Solano Way
Martinez, CA 94553

Citation 4 Item 1 Type of Violation: **Serious**

T8CCR 5189(f)(1)(B): Operating Procedures.

(1) The employer shall develop and implement written procedures that provide clear instructions for safely conducting activities involved in each process consistent with the process safety information and shall address at least the following.

(B) Operating limits:

1. Consequences of deviation;
2. Steps required to correct and/or avoid deviation; and
3. Safety systems and their functions.

Prior to and during the course of the investigation, including, but not limited to, November 19, 2023, the Employer failed to implement written procedures that provided clear instructions for safely conducting operations that were consistent with the process safety information of the 5GAS, H2, and 2HDO Plants, including operating limits.

Date By Which Violation Must be Abated:

May 28, 2024

Proposed Penalty:

\$22500.00

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Citation and Notification of Penalty

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Establishment DBA:

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Inspection Site: 150 Solano Way
Martinez, CA 94553

Citation 5 Item 1 Type of Violation: **Serious**

T8CCR 5189(g)(4): Training.

(4) Testing procedures shall be established by each employer to ensure competency in job skill levels and safe and healthy work practices.

Prior to and during the course of the investigation, including, but not limited to, November 19, 2023, testing procedures established by the employer did not ensure competency in job skill levels and safe and healthy work practices. Field operators at the 2HDO, 5GAS and H2 Plants received qualifications on units that were still in the process of being assembled; equipment necessary for unit operations such as, piping, valves and pumps were not in place or installed at the time field operator testing was performed.

Date By Which Violation Must be Abated:

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Citation and Notification of Penalty

Company Name: Tesoro Refining & Marketing Company LLC
Establishment DBA:

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Inspection Site: 150 Solano Way
Martinez, CA 94553

Citation 6 Item 1 Type of Violation: **Serious**

T8CCR 5189(i)(2)(B): Pre-start Up Safety Review.

(2) The pre-start up safety review shall confirm that prior to the introduction of acutely hazardous, flammable, and explosive materials to a process:

(B) Safety, operating, maintenance, and emergency procedures are in place and are adequate.

Prior to and during the inspection, including but not limited to on and about November 19, 2023, the Employer failed to confirm that operating procedures in place for 2HDO Furnace F20 were adequate to protect against acutely hazardous, flammable, and explosive materials. The startup procedure was not specific to Furnace F20 and did not specify that a purge was required prior to starting the furnace.

Date By Which Violation Must be Abated:
Proposed Penalty:

May 28, 2024
\$22500.00

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Optional Report #: 004-24



Citation and Notification of Penalty

Company Name: Tesoro Refining & Marketing Company LLC

Establishment DBA:

and its successors

Inspection Site: 150 Solano Way
Martinez, CA 94553

Citation 7 Item 1 Type of Violation: **Serious**

T8CCR 5189(l)(1): Management Of Change.

(1) The employer shall establish and implement written procedures to manage changes (except for "replacement in kind") to process chemicals, technology, and equipment, and changes to facilities.

Prior to and during the course of the investigation, including, but not limited to, November 19, 2023, the Employer failed to establish and implement Management of Change procedures for the entire scope of the Furnace F-20 project at the 2HDO Unit to manage changes in the furnace's technology and equipment.

Date By Which Violation Must be Abated:

May 28, 2024

Proposed Penalty:

\$22500.00

State of California

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Optional Report #: 004-24

**Citation and Notification of Penalty**

Company Name: Tesoro Refining & Marketing Company LLC

Establishment DBA:

and its successors

Inspection Site: 150 Solano Way
 Martinez, CA 94553

Citation 8 Item 1 Type of Violation: **SERIOUS ACCIDENT RELATED**

T8CCR 5189(d)(2): (d) Process Safety Information. The employer shall develop and maintain a compilation of written safety information to enable the employer and the employees operating the process to identify and understand the hazards posed by processes involving acutely hazardous, flammable and explosive material before conducting any process hazard analysis required by this regulation. The employer shall provide for employee participation in this process. Copies of this safety information shall be made accessible and communicated to employees involved in the processes, and include:

- (2) Information pertaining to the technology of the process. Information concerning the technology of the process shall include at least the following:
 - (A) A block flow diagram or simplified process flow diagram;
 - (B) Process chemistry;
 - (C) Maximum intended inventory;
 - (D) Safe upper and lower limits for process variables such as temperatures, pressures, flows, levels and/or compositions; and,
 - (E) The consequences of deviations, including those affecting the safety and health of employees.

Prior to and during the course of the investigation, the Employer failed to develop and maintain a compilation of written safety information to enable the Employer and employees operating the 2HDO Unit to identify and understand the hazards and consequences of deviations from safe upper and lower limits of process variables of temperature, pressure and flows at the unit. As a result, on or about November 19, 2023, when the temperature of Furnace F-20 in the 2HDO Unit exceeded the safe upper limit, an employee who was attempting to manually shut off a burner on the furnace was seriously injured in an explosion and fire.

Date By Which Violation Must be Abated:
Proposed Penalty:

May 28, 2024
\$25000.00

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CSHO ID: Q2693
Optional Report #: 004-24



Citation and Notification of Penalty

Company Name: Tesoro Refining & Marketing Company LLC

Establishment DBA:

and its successors

Inspection Site: 150 Solano Way
Martinez, CA 94553

Citation 9 Item 1 Type of Violation: **SERIOUS ACCIDENT RELATED**

T8CCR 5189(o): Injury and Illness Prevention Program. The employer's Injury and Illness Prevention Program required by Section 3203 shall include applicable part(s) of this section.

(1) The scheduled and periodic inspections of facilities covered by this section and required by Section 3203(a)(4) shall be conducted by at least one person knowledgeable in the process. Reference T8CCR 3203(a)(6): Effective July 1, 1991, every employer shall establish, implement and maintain an effective Injury and Illness Prevention Program (Program). The Program shall be in writing and, shall, at a minimum:

(6) Include methods and/or procedures for correcting unsafe or unhealthy conditions, work practices and work procedures in a timely manner based on the severity of the hazard:

(A) When observed or discovered; and,

(B) When an imminent hazard exists which cannot be immediately abated without endangering employee(s) and/or property, remove all exposed personnel from the area except those necessary to correct the existing condition. Employees necessary to correct the hazardous condition shall be provided the necessary safeguards.

Prior to and during the course of the investigation, including, but not limited to, November 19, 2023, the Employer's Injury and Illness Prevention Program was ineffective in that the Employer failed to immediately remove exposed employees from imminent hazards created by Furnace F-20 on the 2HDO Unit as required under all subsections of Title 8 CCR Section 3203(a)(6). As a result, an employee was seriously injured in the explosion and fire that occurred at Furnace F-20 at approximately 12:06 a.m. on November 19, 2023.

Date By Which Violation Must be Abated:
Proposed Penalty:

May 28, 2024
\$25000.00

Incident Root Causes

There were no applicable incidents that occurred during the reporting period.

RMP Deficiencies Corrected During the Reporting Period

There were no RMP deficiencies corrected during the reporting period.

Open PSM Audit Corrective Recommendations

Rec No.	Source	Recommendation Title	Person Responsible
316070	Collaborative Audit	Q-Charting Validation	Andrew Garaniel
342930	Regulatory - Required Audit	2024 SPM-1-R-C-2: R&SI review frequencies	Nicole Birchall
342929	Regulatory - Required Audit	2024 SPM-1-R-C-1: Review all past due R&SIs	Nicole Birchall
342928	Regulatory - Required Audit	2024 EP-1-R-C: Periodic validation of USW pre-identified employees	Kenneth Bloch
342927	Regulatory - Required Audit	2024 CA-1-R-C: Investigate closures for 2021 audit findings identified in this audit	Kenneth Bloch
342926	Regulatory - Required Audit	2024 EPR-2-R-C: Fixed diesel firewater pump weekly run methodology	Alex Maiwald
342925	Regulatory - Required Audit	2024 EPR-1-R-C: ERT member 12-month medical surveillance	Rosalyn Moli
342924	Regulatory - Required Audit	2024 II-3-R-C: Investigation timeline tracking	Kenneth Bloch
342923	Regulatory - Required Audit	2024 II-2-R-C: Incidents 321053, 367322, 336314, 369020, and 406247 investigation teams	Kenneth Bloch
342922	Regulatory - Required Audit	2024 II-1-R-C: Incidents 290892/344567 investigation start times	Kenneth Bloch
342921	Regulatory - Required Audit	2024 MOC-3-R-C: Complete overdue post-startup MOC tasks	Michael Bergeson

342920	Regulatory - Required Audit	2024 MOC-2-R-C: MOC 128918 clamp form	Michael Bergeson
342919	Regulatory - Required Audit	2024 MOC-1-R-C: E-4678/9 blinding and 67V161 demister MOC documentation	Michael Bergeson
342918	Regulatory - Required Audit	2024 HW-1-R-C: Hot work permit auditing	Mark Bennett
342917	Regulatory - Required Audit	2024 MI-13-R-C: Alloy component PMI	Adam Warner
342916	Regulatory - Required Audit	2024 MI-12-R-C: Address four MEDs beyond expected completion dates	Chirag Soni
342915	Regulatory - Required Audit	2024 MI-11-R-C: Inspection rec management system	Scott Chestnut
342914	Regulatory - Required Audit	2024 MI-10-R-C: CCV visual internal inspections	Scott Chestnut
342913	Regulatory - Required Audit	2024 MI-9-R-C: Risk assess cooling tower drift zone	Scott Chestnut
342912	Regulatory - Required Audit	2024 MI-8-R-C: Temporary repair inspection tasks	Mike Magee
342911	Regulatory - Required Audit	2024 MI-7-R-C: Hose PMs	Scott Chestnut
342910	Regulatory - Required Audit	2024 MI-6-R-C: Update piping inspection program	Scott Chestnut
342909	Regulatory - Required Audit	2024 MI-5-R-C: Buried Piping/Soil-to-Air Interface inspections	Scott Chestnut
342908	Regulatory - Required Audit	2024 MI-4-R-C: PRV ITPM deferrals	Scott Chestnut

342907	Regulatory - Required Audit	2024 MI-3-R-C: Interstitial space daily monitoring	Blake Barker
342906	Regulatory - Required Audit	2024 MI-2-R-C: Recurring ITPM activity for pressurized/purged cabinets	Sergio Llamas
342905	Regulatory - Required Audit	2024 MI-1-R-C: LOPA IPL ITPM activities	Sergio Llamas
342904	Regulatory - Required Audit	2024 OP-3-R-C: Permit closure auditing	Michael Bergeson
342903	Regulatory - Required Audit	2024 OP-2-R-C: LOTO documentation requirements	Michael Bergeson
342902	Regulatory - Required Audit	2024 OP-1-R-C: Operating Unit entry requirements	Michael Bergeson
342901	Regulatory - Required Audit	2024 PHA-3-R-C: Document reason for past due 5Gas PHA	Andrew Williams
342900	Regulatory - Required Audit	2024 PHA-2-R-C: Review 5Gas PHA/LOPA enter all recs	Andrew Williams
342899	Regulatory - Required Audit	2024 PHA-1-R-C: Review and reassign as needed PHA improvement ideas	Andrew Williams
342898	Regulatory - Required Audit	2024 PSI-5-R-C: Perform brittle fracture assessment	Scott Chestnut
342897	Regulatory - Required Audit	2024 PSI-4-R-C: Risk assess 2022 flare study recs	Caleb Buchanan
342896	Regulatory - Required Audit	2024 PSI-3-R-C: Resolve missing car seals	Blake Barker
342895	Regulatory - Required Audit	2024 PSI-2-R-C: Update No. 5 Gas Plant P&IDs	Caleb Buchanan

342894	Regulatory - Required Audit	2024 PSI-1-R-C: Develop mixing tables	Caleb Buchanan
342645	Regulatory - Required Audit	2024 II-C-S: Close or extend overdue investigation recs and regular communication/review	Kenneth Bloch
342635	Regulatory - Required Audit	2024 MI-C-S: Cathodic protection system program	Scott Chestnut

Certification Statement

I certify under penalty of law that based on the information and belief formed after reasonable inquiry, the statements and information in this document and in all attachments and other materials are true, accurate and complete.

Donald C. Staats
Signature of Responsible Official

7/24/2024
Date

Donald C. Staats, General Manager

Name and Title