

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



# Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received (For Official Use Only)

R.V. 1/27/92

New

### I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

<input checked="" type="checkbox"/> A. First Notification	<input type="checkbox"/> B. Subsequent Notification (complete item C)
---	---

C. Installation's EPA ID Number	UN15986682714
---------------------------------	---------------

### II. Name of Installation (Include company and specific site name)

PHILLIPS Petroleum Co SS#27245

### III. Location of Installation (Physical address not P.O. Box or Route Number)

8614 Central SE

Street (continued)

Albuquerque NM 87108

Bernalillo

### IV. Installation Contact (Person to be contacted regarding waste activities at site)

Street or P.O. Box P.O. Box 2400

City or Town Bartlesville OK 74005

Name (Last, First) KOSSEL THOMAS

Job Title Env. Rep Phone Number (area code and number) 918-661-7439

### V. Installation Contact Address (See Instructions)

A. Contact Address Location  B. Street or P.O. Box  P.O. Box 2400

City or Town Bartlesville OK 74005

### VII. Ownership (See Instructions)

#### A. Name of Installation's Legal Owner

PHILLIPS Petroleum Company

#### Street, P.O. Box, or Route Number

P.O. Box 2400

City or Town Bartlesville OK 74005

Phone Number (area code and number)	B. Land Type	C. Owner Type	D. Change of Owner Indicator	(Date Changed) Month Day Year
918-661-7439	P	P	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	



RECEIVED  
AUG 18 1992

For Official Use Only

RCRA PROGRAMS  
BRANCH

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity		B. Used Oil Fuel Activities	
<input type="checkbox"/> 1. Generator (See Instructions)	<input type="checkbox"/> 3. Treater, Storer, Disposer (at installation)	<input type="checkbox"/> 1. Off-Specification Used Oil Fuel	
<input type="checkbox"/> a. Greater than 1000kg/mo (2200 lbs.)	Note: A permit is required for this activity. See instructions.	<input type="checkbox"/> a. Generator Marketing to Burner	
<input checked="" type="checkbox"/> b. 100 to 1000 kg/mo (220 - 2200 lbs.)		<input type="checkbox"/> b. Other Marketer	
<input type="checkbox"/> c. Less than 100 kg/mo (220 lbs.)		<input type="checkbox"/> c. Burner - Indicate device(s)	
Transporter (Indicate Mode in boxes 1-5 below)	<input type="checkbox"/> 4. Hazardous Waste Fuel	Type of Combustion Device	
<input type="checkbox"/> a. For own waste only	<input type="checkbox"/> a. Generator Marketing to Burner	<input type="checkbox"/> 1. Utility Boiler	
<input type="checkbox"/> b. For commercial purposes	<input type="checkbox"/> b. Other Marketers	<input type="checkbox"/> 2. Industrial Boiler	
Mode of Transportation	<input type="checkbox"/> c. Burner - Indicate device(s)	<input type="checkbox"/> 3. Industrial Furnace	
<input type="checkbox"/> 1. Air	Type of Combustion Device		
<input type="checkbox"/> 2. Rail	<input type="checkbox"/> 1. Utility Boiler		
<input type="checkbox"/> 3. Highway	<input type="checkbox"/> 2. Industrial Boiler		
<input type="checkbox"/> 4. Water	<input type="checkbox"/> 3. Industrial Furnace		
<input type="checkbox"/> 5. Other - specify	<input type="checkbox"/> 5. Underground Injection Control		
		<input type="checkbox"/> 2. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification	

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

<input checked="" type="checkbox"/> 1. Ignitable (D001)	<input type="checkbox"/> 2. Corrosive (D002)	<input type="checkbox"/> 3. Reactive (D003)	<input checked="" type="checkbox"/> 4. Toxicity Characteristic (D000)	(List specific EPA hazardous waste number(s) for the Toxicity Characteristic contaminant(s))
X			X	0018

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring an I.D. number. See instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

Signature <i>R. Strayton</i>	Name and Official Title (type or print) Randy J. Strayton Retail Projects Coordinator	Date Signed 8/11/92
---------------------------------	---	------------------------

XI. Comments

Comments area with multiple blank lines for text entry.