

GRCB 04



February 26, 2006

Mr. James Valdez, Management Analyst
New Mexico Environment Department
Hazardous Waste Bureau
2905 Rodeo Park Dr. East BLDG 1
Santa Fe, New Mexico 87502



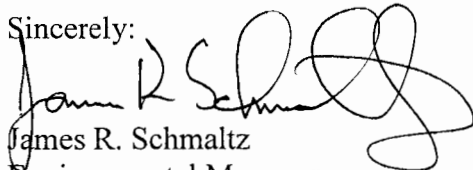
Via: Certified Mail 7004 2510 0005 1642 9624

Dear Mr. Valdez

Please find enclosed a diskette and a hard copy containing Giant Refining Company's Bloomfield refinery 2005 Biennial Hazardous Waste Report.

If you have questions about this report, please contact me at (505) 632-4171.

Sincerely:


James R. Schmaltz
Environmental Manager
Giant Refining Company – Bloomfield

Enclosure

Cc-w/o enclosure: Chad King
Ed Riege

<p>MAIL THE COMPLETED FORM TO: The Appropriate EPA Regional or State Office</p>	<p>United States Environmental Protection Agency</p> <p>RCRA SUBTITLE C SITE IDENTIFICATION FORM</p>			
<p>1. Reason for Submittal and Status of Information Supplied (see instructions on page 9)</p> <p>MARK ALL BOX(ES) THAT APPLY</p>	<p>A. Reason for Submittal:</p> <p><input type="checkbox"/> To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities).</p> <p><input type="checkbox"/> To provide subsequent notification (to update site identification information).</p> <p><input type="checkbox"/> As a component of a First RCRA Hazardous Waste Part A Permit Application.</p> <p><input type="checkbox"/> As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment # _____).</p> <p><input checked="" type="checkbox"/> As a component of the Hazardous Waste Report.</p>			
<p>2. Site EPA ID Number (see instructions on page 10)</p>	<p>EPA ID Number: NMD089416416</p>			
<p>3. Site Name (see instructions on page 10)</p>	<p>Name: GIANT REFINING COMPANY - BLOOMFIELD</p>			
<p>4. Site Location Information (see instructions on page 10)</p>	<p>Street Address: #50 COUNTY ROAD 4990</p>			
	<p>City, Town, or Village: BLOOMFIELD</p>		<p>State: NM</p>	
	<p>County Name: SAN JUAN</p>		<p>Zip Code: 87413-</p>	
<p>5. Site Land Type (see instructions on page 10)</p>	<p>Site Land Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>			
<p>6. North American Industry Classification System (NAICS) Code(s) for the Site (see instructions on page 10)</p>	<p>A. 324110</p>		<p>B.</p>	
	<p>C.</p>		<p>D.</p>	
<p>7. Site Mailing Address (see instructions on page 11)</p>	<p>Street or P.O. Box: P.O. BOX 159</p>			
	<p>City, Town, or Village: BLOOMFIELD</p>		<p>State: NM</p>	
	<p>Country:</p>		<p>Zip Code: 87413-</p>	
<p>8. Site Contact Person (see instructions on page 11)</p>	<p>First Name: JAMES</p>		<p>MI: R</p>	<p>Last Name: SCHMALTZ</p>
	<p>Phone Number: (505) 632-4171 Extension:</p>			<p>Email: rschmaltz@giant.com</p>
<p>9. Legal Owner and Operator of the Site (see instructions on pages 11 and 12)</p>	<p>A. Name of Site's Operator: SAN JUAN REFINING CO.</p>		<p>Date Became Operator (mm/dd/yyyy): 10/06/1995</p>	
	<p>Operator Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>			
	<p>B. Name of Site's Legal Owner: SAN JUAN REFINING COMPANY</p>		<p>Date Became Owner (mm/dd/yyyy): 10/06/1995</p>	
	<p>Owner Type: <input checked="" type="checkbox"/> Private <input type="checkbox"/> County <input type="checkbox"/> District <input type="checkbox"/> Federal <input type="checkbox"/> Indian <input type="checkbox"/> Municipal <input type="checkbox"/> State <input type="checkbox"/> Other</p>			

9. Legal Owner (Continued) Address	Street or P.O. Box: P.O. BOX 159
	City, Town, or Village: BLOOMFIELD
	State: NM Zip Code: 87413- Country:

10. Type of Regulated Waste Activity
 Mark 'X' in the appropriate boxes. Mark "Yes" or "No" for each choice. (See instructions on pages 13 to 16)

A. Hazardous Waste Activities
 Complete all parts for Items 1 through 6.

For Items 2 through 6, check all that apply:

- Y N **1. Generator of Hazardous Waste**
 If "Yes" choose only one of the following - a,b, or c.
- a. LQG: Greater than 1,000 kg/mo (2,200 lbs.) of non-acute hazardous waste; or
 - b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs.) of non-acute hazardous waste; or
 - c. CESQG: Less than 100 kg/mo of non-acute hazardous waste

- Y N **2. Transporter of Hazardous Waste**
- Y N **3. Treater, Storer, or Disposer of Hazardous Waste (at your site)** Note: A hazardous waste permit is required for this activity
- Y N **4. Recycler of Hazardous Waste (at your site)**
 Note: A hazardous waste permit may be required for this activity.

In addition, indicate other generator activities (check all that apply)

5. Exempt Boiler and/or Industrial Furnace

- Y N d. United States Importer of Hazardous Waste
- Y N e. Mixed Waste (hazardous and radioactive) Generator

- Y N a. Small Quantity On-site Burner Exemption
- Y N b. Smelting, Melting, Refining Furnace Exemption

- Y N **6. Underground Injection Control**

B. Universal Waste Activities

1. Large Quantity Handler of Universal Waste (accumulate 5,000 KG or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste generated and/or accumulated at your site. (check all boxes that apply)

	<u>Generated</u>	<u>Accumulated</u>
a. Batteries	<input type="checkbox"/>	<input type="checkbox"/>
b. Pesticides	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermostats	<input type="checkbox"/>	<input type="checkbox"/>
d. Lamps	<input type="checkbox"/>	<input type="checkbox"/>
e. Other _____	<input type="checkbox"/>	<input type="checkbox"/>
f. Other _____	<input type="checkbox"/>	<input type="checkbox"/>
g. Other _____	<input type="checkbox"/>	<input type="checkbox"/>

- Y N **2. Destination Facility for Universal Waste**
 Note: A hazardous waste permit may be required for this activity.

C. Used Oil Activities - Mark all boxes that apply

- Y N **1. Used Oil Transporter**
 If "Yes", mark each that applies.
 - a. Transporter
 - b. Transfer Facility
- Y N **2. Used Oil Processor and/or Re-refiner -**
 If "Yes", mark each that applies.
 - a. Processor
 - b. Re-refiner
- Y N **3. Off-Specification Used Oil Burner**
- Y N **4. Used Oil Fuel Marketer**
 If "Yes", mark each that applies.
 - a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner
 - b. Marketer Who First Claims the Used Oil Meets the Specifications

11. Description of Hazardous Wastes (see instructions on page 17)

A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

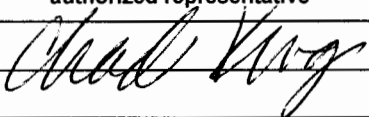
D018	F037	K170				

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed for waste codes.

12. Comments (see instructions on page 17)

rschmaltz@giant.com

13. Certification. 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 persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (see instructions on page 17)

Signature of owner, operator, or an authorized representative	Name and Official Title (type or print)	D. Date Signed (mm-dd-yyyy)
	CHAD KING REFINERY MGR.	02/15/2006

SITE NAME
 GIANT REFINING COMPANY - BLOOMFIELD
 #50 COUNTY ROAD 4990
 BLOOMFIELD, NM 87413
 EPA ID NO: NMD089416416



U.S. ENVIRONMENTAL
 PROTECTION AGENCY
 2005 Hazardous Waste Report

**FORM
 GM**

**WASTE GENERATION
 AND MANAGEMENT**

Sec. 1	A. Waste BOTTOM SLUDGE FROM REFINERY MAIN COLUMN, IGNITABILITY, Description PETROLEUM SOLID		
B. EPA Hazardous Waste Code K170		C. State Hazardous Waste Code	
D. Source Code G13 Management Method code for Source code G25	E. Form Code W609	F. Quantity Generated in 2005 1,000.00	G. UOM 1 Density 0.00 lb./gal.

Sec. 2	Was any of this waste managed on-site? NO		
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site process system type	Quantity treated, disposed, or recycled on-site in 2005	On-site process system type	Quantity treated, disposed, or recycled on-site in 2005

Sec. 3	A. Was any of this waste shipped off site in 2005 for treatment, disposal, or recycling? Yes		
Site #	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code shipped to	D. Total quantity shipped in 2005
1	NVD980895338	H141	1,000.00

Comments	Main column bottom sludge
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SITE NAME
GIANT REFINING COMPANY - BLOOMFIELD
#50 COUNTY ROAD 4990
BLOOMFIELD, NM 87413
EPA ID NO: NMD089416416



U.S. ENVIRONMENTAL
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2005 Hazardous Waste Report

FORM
GM

WASTE GENERATION
AND MANAGEMENT

Sec. 1	A. Waste Description OIL SOAKED PIPE INSULATION, BENZENE, PETROLEUM CONTAINING SOLIDS		
B. EPA Hazardous Waste Code		D018	
C. State Hazardous Waste Code			
D. Source Code	G31	E. Form Code	W409
Management Method code for Source code G25		F. Quantity Generated in 2005	220.00
		G. UOM 1	0.00
		Density	lb./gal.

Sec. 2	Was any of this waste managed on-site?		NO
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site process system type	Quantity treated, disposed, or recycled on-site in 2005	On-site process system type	Quantity treated, disposed, or recycled on-site in 2005

Sec. 3	A. Was any of this waste shipped off site in 2005 for treatment, disposal, or recycling?			Yes
Site #	B. EPA ID No. of facility to which waste was shipped	C. Off-site Management Method code shipped to	D. Total quantity shipped in 2005	
1	NVD980895338	H141	220.00	

Comments	oil soaked pipe insulation
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SITE NAME

GIANT REFINING COMPANY - BLOOMFIELD
 #50 COUNTY ROAD 4990
 BLOOMFIELD, NM 87413

EPA ID NO: NMD089416416



U.S. ENVIRONMENTAL
 PROTECTION AGENCY
 2005 Hazardous Waste Report

**FORM
 GM**

**WASTE GENERATION
 AND MANAGEMENT**

Sec. 1	A. Waste Description VACUUM TRUCK SLUDGE, LISTED WASTE, PETROLEUM SLUDGE		
B. EPA Hazardous Waste Code F037		C. State Hazardous Waste Code	
D. Source Code G13 Management Method code for Source code G25	E. Form Code W609	F. Quantity Generated in 2005 300.00	G. UOM 1 Density 0.00 lb./gal.
Sec. 2	Was any of this waste managed on-site? NO		
ON-SITE PROCESS SYSTEM 1		ON-SITE PROCESS SYSTEM 2	
On-site process system type		Quantity treated, disposed, or recycled on-site in 2005	On-site process system type Quantity treated, disposed, or recycled on-site in 2005
Sec. 3	A. Was any of this waste shipped off site in 2005 for treatment, disposal, or recycling? Yes		
Site # 1	B. EPA ID No. of facility to which waste was shipped NVD980895338	C. Off-site Management Method code shipped to H141	D. Total quantity shipped in 2005 300.00
Comments vacuum truck sludge			



U.S. ENVIRONMENTAL
PROTECTION AGENCY
2005 Hazardous Waste Report

SITE NAME

GIANT REFINING COMPANY - BLOOMFIELD
COUNTY ROAD 4990
BLOOMFIELD NM 87413

EPA ID NO: NMD089416416

**FORM
OI**

**OFF-SITE
IDENTIFICATION**

Form 1	A. EPA ID No. of off-site installation or transporter NVD980895338	B. Name of off-site installation or transporter 21ST CENTURY EMI
C. Handler Type N Generator N Transporter Y TSDR		D. Address of off-site installation Street 2095 EAST NEWLANDS DRIVE City FERNLEY State NV Zip 89408-

Form 2	A. EPA ID No. of off-site installation or transporter CAD063547996	B. Name of off-site installation or transporter philip trans & remediatio
C. Handler Type N Generator Y Transporter N TSDR		D. Address of off-site installation Street City State Zip -