

January 7, 2014

Wiley Osborn PECO FOODS 625 South ALLEN St Batesville, AR 72503

## RE: Complaint Investigation (Independence Co) AFIN: 32-00009 NPDES Permit No.: ARR00A369

Dear Mr. Osborn:

On December 30, 2013, I performed a routine compliance inspection of the PECO FOODS processing facility in response to a complaint. The complaint alleged that an eighteen wheeler had over turned and leaked oil in a location likely to cause pollution to the White River. This inspection was performed in accordance with the provisions of the Federal Clean Water Act, the Arkansas Water and Air Pollution Control Act, and the regulations promulgated thereunder. This inspection revealed the following violation:

It was confirmed that on December 26, 2013 an eighteen wheeler had over turned and leaked oil in a location that potentially could cause pollution to the facility's stormwater discharge stream and then into the White River. At the time of the investigation, the oil had not been cleaned up or removed. **This is a violation of Part 4.6.6.2 of your permit.** 

The above item requires your immediate attention. Please submit a written response to these findings to the Water Division Inspection Branch of this Department. This response should be mailed to the address at the bottom of the first page of the letter or e-mailed to <u>Water-Inspection-report@adeq.state.ar.us</u>. This response should contain documentation describing the course of action taken to correct each item noted. This corrective action should be completed as soon as possible, and the written response with all necessary documentation (i.e. photos and receipts) is due by January 21, 2014.

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If I can be of any assistance, please contact me at <u>saunders@adeq.state.ar.us</u> or 870-424-3322.

Sincerely,

1------

Sean Saunders District 11 Field Inspector Water Division

| \$∋EPA  |   |  |            |             |        |        |                           |   | Form Approved<br>OMB No. 2040-0003       |                         |    |  |  |
|---|---|--|------------|-------------|--------|--------|---------------------------|---|--|-------------------------|----|--|--|
| UNITED STATES ENVIRONMENTAL PROTECTION AGENCY   |   |  |            |             |        |        |                           |   |  |                         |    |  |  |
| Washington, D.C. 20460<br>NPDES Compliance Inspection Report  |   |  |            |             |        |        |                           |   |  |                         |    |  |  |
| Section A: National Data System Coding  |   |  |            |             |        |        |                           |   |  |                         |    |  |  |
| Transaction Code       NPDES         1       N       2       5       3       A       R       R       0       0       A       3  | <b>6 9</b> 11   | 12   |            |             |        |        | 17                        | Ins<br>18                                   | Inspector Fac. Type   B R 19 S 20 2      |                         |    |  |  |
| A   F   I   N   -   3   2   -   0   0   0     Inspection Work Days  | 09  | Remarks<br>BI  | QA         |             |        |        |                           |   | <u> </u>                                 | Reserve                 |    |  |  |
| 67 69 70 <b>2</b>   | 71  | N  | 72 N       | 73          |        |        | 74                        | 75  |  |                         | 80 |  |  |
| Section B: Facility Data  |   |  |            |             |        |        |                           |   |  |                         |    |  |  |
| Name and Location of Facility Inspected (For industrial users disc<br>include POTW name and NPDES permit number)<br>PECO FOODS INC./ARK   | Entr  | Entry Time/Date  |            |             |        |        |                           | Permit Effective Date<br><b>«Effective»</b> |  |                         |    |  |  |
| 625 S. Allen St.<br>Batesville, AR 72501<br>Independence County   | Exit  | Exit Time/Date   |            |             |        |        |                           | Permit Expiration Date<br><b>«Expires»</b>  |  |                         |    |  |  |
| Wiley Osborn, Human Resource/ Safety Supervisor, (870)793-1508  |   |  |            |             |        |        |                           |   | ner Facility Data<br>t. <b>35.764399</b> |                         |    |  |  |
| Name, Address of Responsible Official/Title/Phone and Fax Numl<br>Mark Marsh<br>PECO FOODS<br>P.O. Box 2277<br>Batesville, AR 72503-2277  |   |  |            |             |        |        | ng91.649009<br>IS# 075436 |   |  |                         |    |  |  |
|   | Section C: Areas Evaluated During Inspection<br>(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated) |  |            |             |        |        |                           |   |  |                         |    |  |  |
| N       Permit       N       Flow Measurement       U       Operations & Maintenance       N  |   |  |            |             |        |        |                           | Ν   | Sampling                                 |                         |    |  |  |
| N Records/Reports U Self-Monitoring I   | Program   | Ν  | Sludge H   | landli      | ng/Di  | isposa | վ                         |   | U  |                         |    |  |  |
| U Facility Site Review N Compliance Sche  | dules   | Pretreat   | etreatment |             |        |        |                           | Ν   | Multimedia                               |                         |    |  |  |
| U Effluent/Receiving Waters N Laboratory U St   |   |  |            | orm Water N |        |        |                           |   |  | Other:                  |    |  |  |
| Section D: Summary  | of Findings/Con   | iments (   | (Attach a  | dditio      | onal s | heets  | if nec                    | essary                                      | y)                                       |                         |    |  |  |
| It was confirmed that on December 26, 2013 an eighteen wheeler had over turned and leaked oil in a location that potentially could cause pollution to the facility's stormwater discharge stream and then into the White River. At the time of the investigation, the oil had not been cleaned up or removed. |   |  |            |             |        |        |                           |   |  |                         |    |  |  |
| Name(s) and Signature(s) of Inspector(s)  | AR Dept. of E   | Agency/Office/Telephone/Fax<br>AR Dept. of Environmental Quality<br>Mountain Home Field Office |            |             |        |        |                           |   | Date<br>Janua                            | Date<br>January 6, 2014 |    |  |  |
|   | 2   |  |            |             |        |        |                           |   |  |                         |    |  |  |
| Signature of Reviewer<br>Kerri M <sup>S</sup> Cuby<br>Kerri McCabe  | and Fax N<br>3 <b>2-0642</b>  | d Fax Numbers<br><b>0642</b>   |            |             |        |        | Date<br>January 7, 2014   |   |  |                         |    |  |  |



| From:        | Wiley Osborn                                  |  |  |  |  |  |  |
|--------------|---|--|--|--|--|--|--|
| To:          | Water-Inspection-Report                       |  |  |  |  |  |  |
| Cc:          | <u>Mark Marsh (E-mail)</u>                    |  |  |  |  |  |  |
| Subject:     | Response to Compliance Inspection (Peco Foods |  |  |  |  |  |  |
| Date:        | Friday, January 17, 2014 2:36:21 PM           |  |  |  |  |  |  |
| Attachments: | Manifest for disposal.pdf                     |  |  |  |  |  |  |
|              | photo 1.JPG                                   |  |  |  |  |  |  |
|              | photo 2.JPG                                   |  |  |  |  |  |  |

To Whom It May Concern:

AFIN: 32-00009

NPSDES Permit No: ARR00A369

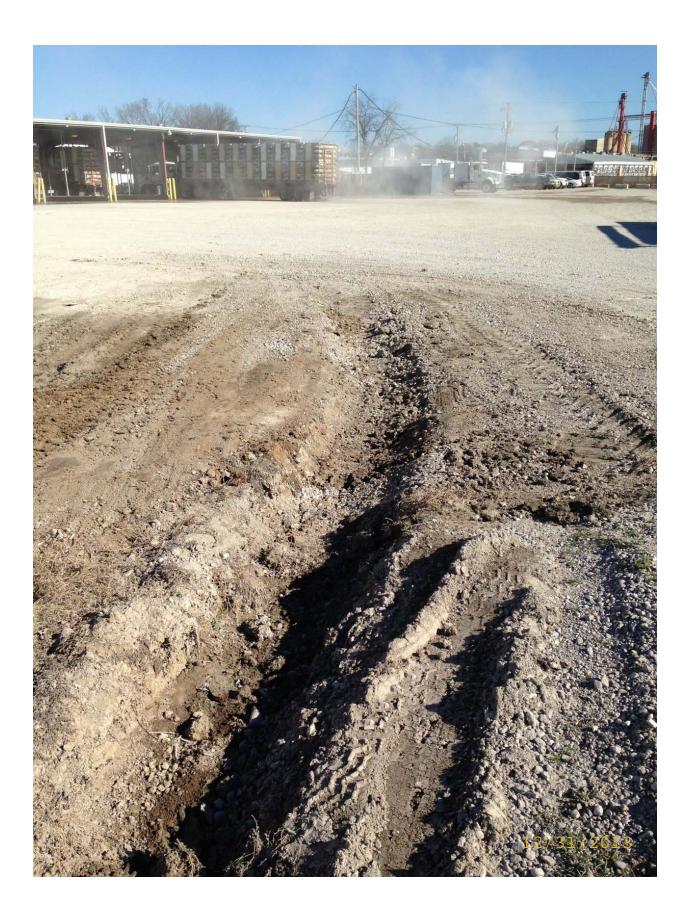
In regard to the findings of the routine compliance inspection of Peco Foods on December 30, 2013, the following actions were taken to correct the permit violation. An absorbent granule had been applied to the affected area at the time of the spill to prevent any immediate contamination of the nearby stream. The area containing the spill was dug up and the soil was disposed of. I am attaching photos of he cleaned area as well as the disposal documentation. Please let me know if you have any questions.

Thank you,

Wiley G. Osborn Jr. Human Resource/Safety Supervisor Peco Foods, Inc. Phone: (870) 793-1508 Fax: (870) 793-1580 wosborn@pecofoods.com

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|             | 12-31-13; 12: 36PM;  | ON-                                     | HAZA                  | R             | n                     | us  |   | 583 376   |   | <b>*</b>   | 1/                  |  |  |  |  |
|-------------|--|---|-----------------------|---------------|-----------------------|---|---|---|---|------------|---------------------|--|--|--|--|
| Γ           |  | . Generator's l                         |                       |               | nifest Doc            |   | 2. Page 1   |   | LU  |            |                     |  |  |  |  |
|             |  | Company of Charles I.                   |                       |               |                       |   | 1   |   |   |            |                     |  |  |  |  |
|             | 3. Generator's Mailing Address;  | Generator's Site Add<br>PACO PROCESSING |                       | ferent than m | ailing};              |   | est Number  |   |   |            |                     |  |  |  |  |
|             | HATFIELD READY MIX, INC.<br>PO BOX 2850<br>588 RAMSAY STREET                                   |   |                       |               |                       | h.  | the second se |   |   | ber»       |                     |  |  |  |  |
|             | BATESVILLE, AR 72503   | BATESVILLE, AR 72                       | 2501                  |               |                       | B. State Generator's ID   |   |   |   |            |                     |  |  |  |  |
|             | 4. Generator's Phone 870-793-  |   |                       |               | N.                    | . NA  |   |   |   |            |                     |  |  |  |  |
|             | 5. Transporter 1 Company Name  | 6. L                                    | JS EPA ID             | Number        |                       |   |   |   |   |            |                     |  |  |  |  |
|             | Natheld Heady Mix,   |   |                       |               |                       | C. State Transporter's ID 1595699<br>D. Transporter's Phone 870-293-502-2 |   |   |   |            |                     |  |  |  |  |
|             | 7. Transporter 2 Company/Name 8. US EPA ID Number  |   |                       |               |                       |   |   |   |   |            |                     |  |  |  |  |
|             |  |   |                       |               |                       |   |   | E. State Transporter's ID<br>F. Transporter's Phone |   |            |                     |  |  |  |  |
|             | 9. Designated Facility Name and Site Add   | dress                                   | 10.                   | US EPA II     | ) Number              |   |   |   |   |            |                     |  |  |  |  |
|             | TWO PINE LANDFILL<br>100 TWO PINE DRIVE  |   |                       |               |                       |   | G. State Facility ID  |   |   |            |                     |  |  |  |  |
|             | N. LITTLE ROCK, AR 72117   |   | the second second     | 1             |                       |   | H. State Facility Phone 501-982-7336  |   |   |            |                     |  |  |  |  |
| G           |  |   |                       |               |                       |   |   |   |   |            |                     |  |  |  |  |
| E           | 11. Description of Waste Materials   |   |                       |               | 12. Coi<br>No.        | tainers<br>Type   | 13. Total<br>Quantity   | 14. Unit<br>Wt./Vol.                                | I. Misc. Comments                               |            |                     |  |  |  |  |
| N<br>E      | a. DIESEL FUEL IMPACTED SOIL AND   | OR DEBRIS                               |                       |               |                       |   | Quantity  |   |   |            |                     |  |  |  |  |
| R           |  |   |                       |               |                       | 17  |   |   |   |            |                     |  |  |  |  |
| A           | b.   | # 993134AF                              | [                     |               | - E                   |   |   |   |   |            |                     |  |  |  |  |
| 0           |  |   |                       |               |                       |   |   |   |   |            |                     |  |  |  |  |
| R           | R WM Profile #   |   |                       |               |                       | NE STOR   |   |   |   | 12-27-12-2 | N. N. M.            |  |  |  |  |
|             | C.   |   |                       |               |                       |   |   | <u>,</u>  |   |            | <u> Yan de bere</u> |  |  |  |  |
|             | WMP  | rofile #                                |                       |               | <u>स्ति हत्त्वस्त</u> |   | e 017 1 1995, 985   |   |   |            |                     |  |  |  |  |
|             | d.   |   |                       |               | tel e trigleis        | <u>altheas a she a</u>  | <u>. Ti decherva</u>  | <u>Baltyten (</u>                                   | <u> 18 18 18 18 18 18 18 18 18 18 18 18 18 </u> |            |                     |  |  |  |  |
|             |  |   |                       |               |                       |   |   |   |   |            |                     |  |  |  |  |
|             | WM P<br>J. Additional Descriptions for Materials   |   |                       |               |                       |   |   |   |   |            |                     |  |  |  |  |
|             | 3. Additional Descriptions for Materials   |   | K. Disposal Location  |               |                       |   |   |   |   |            |                     |  |  |  |  |
|             |  |   |                       | Ĺ             | Cell<br>Grid          |   |   |   | Level   |            |                     |  |  |  |  |
|             | 15. Special Handling Instructions and Additional Information                                   |   |                       |               |                       |   |   |   |   |            |                     |  |  |  |  |
|             |  |   |                       |               |                       |   |   |   |   |            |                     |  |  |  |  |
|             | Purchase Order # 596325  |   | EMERGEN               | ICY CONT      | ACT / PHO             | NE NO.:   | SUZANNE   | HATFIELD 8  | 70-793-50                                       | 070        |                     |  |  |  |  |
|             | 16. GENERATOR'S CERTIFICATE:   |   |                       |               |                       |   |   |   |   |            |                     |  |  |  |  |
|             | I hereby certify that the above-described r<br>accurately described, classified and packag     | naterials are ne<br>ted and are in t    | ot hazardous wastes a | is defined    | by CFR Pa             | rt 261 or ar  | iy applicable   | state law, ha                                       | ve been ful                                     | y and      |                     |  |  |  |  |
|             | Printed Name   | /                                       | Signature "O          | n behalf c    | of" non               |   | il II.  |   | Month   | Day        | Year                |  |  |  |  |
| т           | 17. Transporter 1 Acknowledgement of Re  | -                                       | ialo                  |               | 1/1l                  | nall 1  | HEFIL   | C   | 12  | 31         | 13                  |  |  |  |  |
| RA          | Printed Name / // //   | Cope of Marel                           | Signature             | ~ ^           | ,                     | 1 11  |   |   | Manual  |            |                     |  |  |  |  |
| N<br>S<br>P | Michael Hathold  |   |                       |               | dial                  | No  | Thild   | /   | Month Day Year                                  |            |                     |  |  |  |  |
| R           | 18. Transporter 2 Acknowledgement of Receipt of Materials                                      |   |                       |               |                       |   | 1.00  |   |   | 10-        |                     |  |  |  |  |
| T           | Printed Name Signature   |   |                       |               |                       | , e   |   |   | Month   | Day        | Year                |  |  |  |  |
| R           | 19. Certificate of Final Treatment/Disposal  |   |                       |               |                       |   |   |   |   |            |                     |  |  |  |  |
| FA          | I certify, on behalf of the above listed treat<br>applicable laws regulations permits and list |   | hat to the bast of my | koowlada      | a the sha             |   |   |   |   |            |                     |  |  |  |  |
| 1 -         | approduce in its, reputations, permits and it  | enses on the t                          | lates listed above.   |               |                       |   | ed waste wa   | s managed in  | compliance                                      | with all   |                     |  |  |  |  |
|             | 20. Facility Owner or Operator: Certificatio   | on of receipt of                        |                       | rials cove    | red by this           | manifest.   |   |   |   |            |                     |  |  |  |  |
| Ŷ           | Printed Name   |   | Signature             | m·            | i ſ                   | 11.1  | 1.11  |   | Month Day Year                                  |            |                     |  |  |  |  |
|             | White- TREATMENT, STORAGE, DISPOSAL FACILITY COPY Blue- GENÉRATOR #                            |   |                       |               |                       | Nat   | lold  | OUL CENTER -  | 12  | 31         | 13                  |  |  |  |  |
|             | Pink- FACILITY USE ONLY  |   | Gold- TRANSP          |               |                       | 1   | reli  | ow-GENERAT  | OK #1 COP                                       |            |                     |  |  |  |  |
|             |  |   |                       |               |                       |   |   |   |   |            |                     |  |  |  |  |







February 3, 2014

Wiley Osborn PECO FOODS 625 South ALLEN St Batesville, AR 72503

## RE: Response to Complaint Investigation (Independence Co) AFIN: 32-00009 NPDES Permit No.: ARR00A369

Dear Mr. Osborn:

I have reviewed the response pertaining to my December 30, 2013 inspection of the PECO FOODS facility. The information provided sufficiently addresses the violations referenced in my inspection report. At this time, the Department has no further comment concerning this particular inspection. Acceptance of this response by the Department does not preclude any future enforcement action deemed necessary at this site or any other site.

If we need further information concerning this matter, we will contact you. Thank you for your attention to this matter. Should you have any questions, feel free to contact me at 870-424-3322 or you may e-mail me at saunders@adeq.state.ar.us.

Sincerely,

Sean Saunders District 11 Field Inspector Water Division