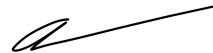


**72 HOUR FOLLOW-UP NOTIFICATION REPORT FORM
CONTRA COSTA HEALTH SERVICES HAZARDOUS MATERIALS
PROGRAMS**

For CCHSHMP Use Only:

Received By: 
Date Received: 12/20/23
Incident Number: 23121701
Copied To: _____
Event Classification Level: 1

INSTRUCTIONS: A hardcopy and an electronic copy of this report is to be submitted for all Public Health Advisory – Level 2 and Public Protective Actions Required – Level 3 incidents or when requested by CCHSHMP. See Attachment B-1 for suggestions regarding the type of information to be included in the report. Attach additional sheets as necessary. Forward the completed form to:

ATTENTION:
Hazardous Materials Programs Director
Contra Costa Health Services Hazardous Materials Programs
4585 Pacheco Boulevard, Suite 100
Martinez, CA 94553

PERSON TO CONTACT FOR ADDITIONAL INFORMATION

Michael Marlowe Phone number (925) 313-3705

I. SUMMARY OF EVENT:

On 12/17/2023, flaring occurred at the Clean Fuels area ground flare while the refinery re-started equipment that was shut down during the operational incident on 12/15/2023. The flare caused a brush fire, and visible smoke was observed from both the flaring and the brush fire. Facility personnel responded and the brush fire was promptly contained, and subsequently extinguished.

All appropriate agencies were notified. MRC submitted the following timely alerts to the Contra Costa County Community Warning System (CWS). On 12/17 intermittent flaring began at approximately 16:07 and facility personnel put a CWS for flaring in at 16:15. Upon investigating the visible smoke, facility personnel identified a subsequent brush fire in the area of the active ground flare and put a CWS in for the brush fire at 16:26. Smoke was observed from the flare and burning brush at approximately the same time, and the smoke from the flare ended at 16:19. MRC personnel noted the brush fire at 16:15 and put in a CWS Level 1 at 16:26 for the brush fire. Facility personnel responded to the brush fire immediately and extinguished the brush fire at 16:55. Response personnel remained in the area to ensure no further smoldering or fires in the brush reignited.

II. AGENCIES NOTIFIED, INCLUDING TIME OF NOTIFICATION:

CCHSD – See CWS Alerts above.

Date	Time	Agency	Party #
17-Dec	4:41 PM	CCHSD	925-812-7515
17-Dec	4:45 PM	CCHSD	925-812-7515
17-Dec	5:01 PM	CCHSD	925-812-7515

17-Dec	5:12 PM	CCHSD	925-812-7515
17-Dec	5:16 PM	CCHSD	925-812-7515
17-Dec	5:21 PM	BAAQMD	415-793-6649

III. **AGENCIES RESPONDING, INCLUDING CONTACT NAMES AND PHONE NUMBERS:**

None.

IV. **EMERGENCY RESPONSE ACTIONS:**

Facility personnel responded immediately and began applying water streams to the fire when safe. The brush fire was extinguished at approximately 16:55.

V. **IDENTITY OF MATERIAL RELEASED AND ESTIMATED OR KNOWN QUANTITIES:**

Unknown.

VI. **METEOROLOGICAL CONDITIONS AT TIME OF EVENT** including wind speed, direction, and temperature:

MRC-East	12/17/2023	1800	4.8 ENE 69
MRC-Wes	12/17/2023	1800	7.9 E 80
MRC-East	12/17/2023	1700	5 NE 56
MRC-Wes	12/17/2023	1700	6.5 E 88
MRC-East	12/17/2023	1600	4.4 NNE 33
MRC-Wes	12/17/2023	1600	5.5 ENE 72
MRC-East	12/17/2023	1500	3.1 NE 37
MRC-Wes	12/17/2023	1500	3.8 E 81

VII. **DESCRIPTION OF INJURIES:**

None

VIII. **COMMUNITY IMPACT** including number of off-site complaints, air sampling data during event, etc.:

Visible dark smoke generated from flare and brush for approximately 13 minutes. Intermittent grey smoke generated from the brush fire until approximately 16:55. Two community calls have been received.

IX. **INCIDENT INVESTIGATION RESULTS**

Is the investigation of the incident complete at this time? _____ Yes No

If the answer is no, submit a 30 day final or interim report.

If the answer is yes, complete the following:

X. **SUMMARIZE INVESTIGATION RESULTS BELOW OR ATTACH COPY OF REPORT:**

NA – Investigation Incomplete

XI. **SUMMARIZE PREVENTATIVE MEASURES TO BE TAKEN TO PREVENT RECURRENCE INCLUDING MILESTONE AND COMPLETION DATES FOR IMPLEMENTATION:**

NA – Investigation Incomplete