



**TEXAS COMMISSION ON ENVIRONMENTAL QUALITY
PRODUCT STORAGE TANK
OPERATION, MONITORING, AND PERFORMANCE REPORT (OMPR)**

GENERAL INFORMATION		
LPST ID No.:	Facility ID No.:	Report Date:
Responsible Party:		
Facility Address:		
Facility City:	County:	

SECTION I: OPERATION AND MAINTENANCE DATA	
Type of remediation system (Check all that apply): <input type="checkbox"/> groundwater extraction <input type="checkbox"/> soil vapor extraction <input type="checkbox"/> air sparging <input type="checkbox"/> bioventing <input type="checkbox"/> dual-phase extraction <input type="checkbox"/> in-situ bioremediation <input type="checkbox"/> natural attenuation <input type="checkbox"/> thermal desorption <input type="checkbox"/> other	
Dates this reporting period covers: From: _____ To: _____	
Total number of site visits this period (including PSH recovery): _____	
Date CAP was approved by TCEQ: _____	
Date system was initially activated: _____	
If the system has been enhanced with an additional remedial method, please explain modification and dates the system modifications were installed: _____	
Number of days system has been actively operated this period: _____	
Please explain any non-operational periods greater than 24 hours: _____	
Were there any major repairs performed this reporting period:	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain: _____	
Have the risk-based target cleanup goals been determined?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, please explain how and when they will be determined: _____	

If yes, please indicate the method used: <input type="checkbox"/> Plan A <input type="checkbox"/> Plan B <input type="checkbox"/> Other		
Please provide the target soil concentrations (ppm) for :	Benzene:	Toluene:
Ethylbenzene:	Xylenes:	<input type="checkbox"/> No soil contamination
Please provide the target groundwater concentrations (ppm) for:	Benzene:	Toluene:
Ethylbenzene:	Xylenes:	<input type="checkbox"/> No soil contamination
If any other chemicals of concern are present, please provide the chemical name and target concentration (ppm) in soil and/or groundwater as appropriate:		
Potential groundwater beneficial use category (I-IV):	TDS (ppm):	

SECTION II: PHASE-SEPARATED HYDROCARBONS (PSH) RECOVERY DATA	
Are phase-separated hydrocarbons (PSH) present: <input type="checkbox"/> Yes <input type="checkbox"/> NO If no, go to Section III	
Number of wells affected by PSH:	Number of wells with greater than 0.01ft. of PSH:
Maximum PSH thickness (ft):	Well with greatest PSH thickness (currently):
PSH recovery method(s) (excluding total fluid recovery): <input type="checkbox"/> Continuous <input type="checkbox"/> Manual	
Total volume of PSH recovered this reporting period (gallons):	
Total volume of PSH recovered to date (gallons):	
Method of PSH management/disposal:	

SECTION III: GROUNDWATER RECOVERY DATA	
Are dissolved-phase hydrocarbons present: <input type="checkbox"/> Yes <input type="checkbox"/> No If no, go to Section IV	
Number of wells affected by dissolved-phase:	Well with the maximum benzene concentration:
Primary purpose(s) of groundwater recovery: (Check all that apply.) <input type="checkbox"/> Groundwater depression <input type="checkbox"/> Groundwater treatment <input type="checkbox"/> Plume containment <input type="checkbox"/> Other, please specify:	
Method(s) of groundwater recovery: (Check all that apply.) <input type="checkbox"/> Direct pumping <input type="checkbox"/> Vacuum enhanced pumping <input type="checkbox"/> Other, please specify:	
Is groundwater recovery: <input type="checkbox"/> Continuous <input type="checkbox"/> Pulsed <input type="checkbox"/> Other, please specify:	
Number of groundwater recovery wells:	

Has a groundwater recovery trench been installed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please indicate length (ft.):			
Depth (ft):		Approximate Location:	
Design groundwater flow rate (gpm):		Observed groundwater flow rate (gpm):	
If the design flow rate is different from the observed flow rate, please explain:			
Total volume of groundwater recovered during this reporting period (gal.):			
Total volume of groundwater recovered to date (gal.):			
Maximum influent groundwater concentrations this reporting period (ppm):		Benzene:	BTEX:
TPH:		Other(s):	
Are influent groundwater concentrations less than the permitted discharge concentrations: <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please explain why groundwater treatment is necessary:			
Recovered groundwater treatment method(s): <input type="checkbox"/> Air stripping <input type="checkbox"/> Air sparging <input type="checkbox"/> Carbon adsorption <input type="checkbox"/> Other(s), please specify:			
Maximum effluent groundwater concentrations this reporting period (ppm):	Benzene:	BTEX:	TPH:
Other(s), please specify:			
How is the recovered/treated groundwater managed/discharged?			
Are any permits required for discharge?		<input type="checkbox"/> Yes <input type="checkbox"/> NO	
If yes complete the following:			
Type(s) of permit(s):		Date(s) issued:	
Permitting authority:			
Permit(s) expiration date(s):			
Is groundwater reinjection or infiltration in use? <input type="checkbox"/> Yes <input type="checkbox"/> No If no go to Section IV.			

If yes, how many injection or infiltration points are in use?			
Method(s) of groundwater reinjection: <input type="checkbox"/> Injection well <input type="checkbox"/> Infiltration gallery <input type="checkbox"/> Other, please specify:			

Design groundwater reinjection rate (gpm):	Observed groundwater reinjection rate (gpm):
If the design reinjection rate is different from the observed rate, please explain:	
Location(s) of injection point(s):	

SECTION IV: VAPOR RECOVERY DATA	
Is vapor recovery/treatment being performed? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, go to Section V	
Method(s) of vapor recovery: <input type="checkbox"/> Soil vapor extraction <input type="checkbox"/> Dual-phase vacuum extraction <input type="checkbox"/> Vacuum enhanced vapor extraction <input type="checkbox"/> other, please specify:	
Number of vapor recovery points:	Extraction point with maximum vapor concentrations:
Design vapor flowrate (ft ³ /min):	Observed vapor flowrate (ft ³ /min):
If the design vapor flowrate is different from the observed flowrate, please explain:	
Is in-situ air sparging in use? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, how many sparging points are in use:	
Design air injection flowrate (ft ³ /min):	Observed air injection pressure (psi):
If the design air injection rate at any well is different from the observed pressure at that well, please explain:	
Maximum influent vapor concentrations this reporting period (ppm):	Benzene:
BTEX:	TPH:
Other(s) please specify:	
Is vapor treatment required? <input type="checkbox"/> Yes <input type="checkbox"/> NO If no, Please go to Section V	

Please indicate any operating temperature and/or pressure ranges of the above equipment, if applicable:	
Optimal operating temperature range:	Observed temperature range:

Optimal operating pressure range:		Observed pressure range:	
If the optimal operating parameter(s) is/are different from the observed, please explain:			
Maximum effluent vapor concentrations this reporting period (ppm):		Benzene:	BTEX:
TPH:	Other, please specify:		
Are any permits required for discharge? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please complete the following.			
Type(s) of Permit(s):		Date(s) Issued:	
If yes, how much longer is it anticipated that vapor treatment will be necessary:			
If the vapor treatment unit is no longer in use, has it been decommissioned? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please provide:	The date the unit was last used:	The date the unit was decommissioned:	
If the vapor treatment unit is no long in use, but has not been decommissioned, are there any plans to reactivate the unit in the near future? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:			

SECTION V: PERFORMANCE EVALUATION DATA

Estimated time remaining to achieve the target cleanup goals (months/years):		
Total estimated mass of hydrocarbons present at the time of system startup (lb) by phase ¹ .		
<input type="checkbox"/> PSH:	<input type="checkbox"/> Vapor:	<input type="checkbox"/> Dissolved-phase:
Total estimated mass of hydrocarbons remaining (lb) by phase.		
<input type="checkbox"/> PSH:	<input type="checkbox"/> Vapor:	<input type="checkbox"/> Dissolved-phase:
What were the projected hydrocarbon removal rates (lb/hr) at time of system startup ¹ .		
<input type="checkbox"/> PSH:	<input type="checkbox"/> Benzene:	<input type="checkbox"/> BTEX
<input type="checkbox"/> Other(s), Please specify:		
What are the current observed hydrocarbon removal rates (lb/hr):		
<input type="checkbox"/> PSH:	<input type="checkbox"/> Benzene:	<input type="checkbox"/> BTEX
<input type="checkbox"/> Other(s), Please specify:		
Total mass of hydrocarbons recovered this reporting period (lb) by phase:		
<input type="checkbox"/> PSH:	<input type="checkbox"/> Vapor:	<input type="checkbox"/> Dissolved-phase:
Total mass of hydrocarbons recovered to date (lb) by phase:		
<input type="checkbox"/> PSH:	<input type="checkbox"/> Vapor:	<input type="checkbox"/> Dissolved-phase:
Are the projected hydrocarbon recovery rates being met? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain why not and what will be done to correct the problem:		

The average cost per pound of hydrocarbons removed by the system (\$/lb) ² :

¹ The TCEQ is aware that this information may not be available for all existing systems. Therefore, this information should be provided if possible for existing systems but is not mandatory unless otherwise directed by this Office.

² Please note that this value should be obtained by dividing the sum of the system installation cost, and the total operation and maintenance cost since system activation by the total pounds by hydrocarbons removed to date. The graph of the average cost per unit pound of hydrocarbons removed should also be attached to this form.

Note: Wherever necessary, assume the specific gravity of gasoline to be 0.75 and the weight of 1 gallon of gasoline to be 6.25 lbs. If values other than these are used, please specify what values are being used and reference the source used.

Were the plans and specifications for the remediation system for this site properly sealed by a professional engineer licensed by the Texas State Board of Registration for Professional Engineers? <input type="checkbox"/> Yes <input type="checkbox"/> No
Was the installation and/or construction of the remediation system for this site performed under the supervision of a professional engineer licensed by the Texas State Board of Registration for Professional Engineers? <input type="checkbox"/> Yes <input type="checkbox"/> No

Based upon available site data and TCEQ rules and guidance documents, I certify that to the best of my knowledge, the information presented in this form is accurate and that the work was conducted in accordance with accepted industry standards and practices. I also certify that the remedial system is achieving its intended purpose. I certify that I am aware that misrepresentation of the above claims constitutes a violation of 30 TAC 334.453(b)(1)(E) and that this violation may result in disciplinary actions set forth in 30 TAC 334.453 and/or 334.463 and 334.465.

Company:	RCAS #:
Corrective Action Specialist Representative:	
Signature:	Date:
Registered Corrective Action Project Manager:	CAPM #:
Company:	
Signature:	Date:
Telephone #:	Fax #:
By my signature below, I certify that I have reviewed this report for completeness.	
Responsible Party:	Company:
Signature:	Date:
Telephone No.:	Fax No.:
If the remediation system was evaluated this reporting period by a Professional Engineer, please complete the following.	
Name:	P.E. Registration No.:
Signature:	Date:
Telephone #:	Fax #:

ATTACHMENTS

The following information must be submitted with this document. All tables and graphs should contain up to date information:

- Site diagram with well locations, system components, and groundwater gradient
- Cumulative graph of hydrocarbon removal rate (lb/hr) for PSH, vapor phase, dissolved-phase, and total
- Cumulative graph of mass (lbs) of hydrocarbons recovered for PSH, vapor phase, dissolved-phase, and total
- Cumulative graph of cost per mass of hydrocarbons removed
- Cumulative table of estimated mass of hydrocarbons remaining
- Cumulative table of groundwater elevations from each monitor well
- Cumulative table of groundwater analytical data/PSH thickness from each monitor well
- Graph of system operational periods
- Graph of performance target goals
- Graph of cumulative decline rate for each well

The following information is technology specific and should be submitted when applicable. All tables and graphs should contain up to date information.

PSH Recovery

- * Cumulative table of recovery rate from each recovery well
- * Cumulative table of total PSH removed

Groundwater Extraction

- * Cumulative table of flow rate from each recovery well
- * Cumulative table of dissolved-phase influent concentrations from each recovery well
- * Cumulative table of dissolved-phase effluent concentrations
- * Cumulative table of total fluid recovered to date by month or recovery event
- * Site diagram with calculated area of influence
- * Cumulative table of groundwater discharged by month or discharge event
- * Table of depth to groundwater under static conditions, depth to groundwater under pumping conditions, and depth to pump intake for each recovery well

Groundwater Injection

- * Cumulative table of injection rate for each injection well
- * Cumulative table of dissolved-phase concentrations for each injection well
- * Cumulative table of total fluid injected

Soil Vapor Extraction (SVE)/Bioventing

- * Cumulative table of flow rate from each vapor extraction well
- * Cumulative table of vapor influent concentrations from each extraction well
- * Cumulative table of vapor effluent concentrations
- * Site diagram with calculated area of influence
- * Cumulative table of vapor discharged
- * Cumulative table of vacuum pressure at each well
- * Cumulative table of pore volume exchange rate (show sample calculation)

Sparging/Biosparging

- * Cumulative table of injection rate in each sparging well
- * Cumulative table of sparge pressure at each sparging well
- * Cumulative table of dissolved oxygen concentration in each sparging well
- * Site diagram with calculated area of influence

Ex-Situ Biodegradation

- * Cumulative table of sample analysis results with sample locations and dates

Please note that tables and graphs may be combined as long as the information requested above is presented in a clear and concise manner.