

B. MAINT BN

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39

RTTUZYUW RUEPDOA8553 3301843-UUUU--RULSSUU.

ZNR UUUUU

R 261843Z NOV 79

FM CG MGB CAMP LEJEUNE NC

TO CMC WASHINGTON DC

COGARD MSC WILMINGTON NC

COGDFIVE PORTSMOUTH VA

EPA REGION IV ATLANTA GA

INFO LANTNAVFACENGCOM NORFOLK VA

CG SECOND FSSG

BT

UNCLAS //MC6280//

FOR CMC CODE LFF-2; COGDFIVE CODE MEP

OIL SPILL REPORT, REPORT SYMBOL MC 6280-1

1. DATE: 19 NOV 1979 TIME: 1515

2. SOURCE: MOGAS TANKER

3. LOCATION: BLDG S-1813 CAMP LEJEUNE NC

4. AMOUNT: 100 GALLONS

5. TYPE: MOGAS

6. SAMPLES: NONE

7. SLICK DESCRIPTION: NONE

8. ACTION TAKEN:

A. PRODUCT WAS CONTAINED NEAR THE SPILL SITE.

B. PRODUCT WAS CLEANED UP BY BASE MAINT AND MILITARY PERSONNEL.

9. ON-SCENE WEATHER: CLEAR

10. OIL SPILL MOVEMENT: NONE

11. DAMAGE: NEGLIGIBLE

12. POTENTIAL DANGER: NEGLIGIBLE

13. CAUSE OF SPILL: EQUIPMENT MALFUNCTION

14. ASSISTANCE REQUIRED: NONE

15. TELEPHONE REPORT TO NRC WAS NOT MADE; HOWEVER, A REPORT WAS MADE TO EPA AND USCG ON 20 NOV 1979.

BT

#8553

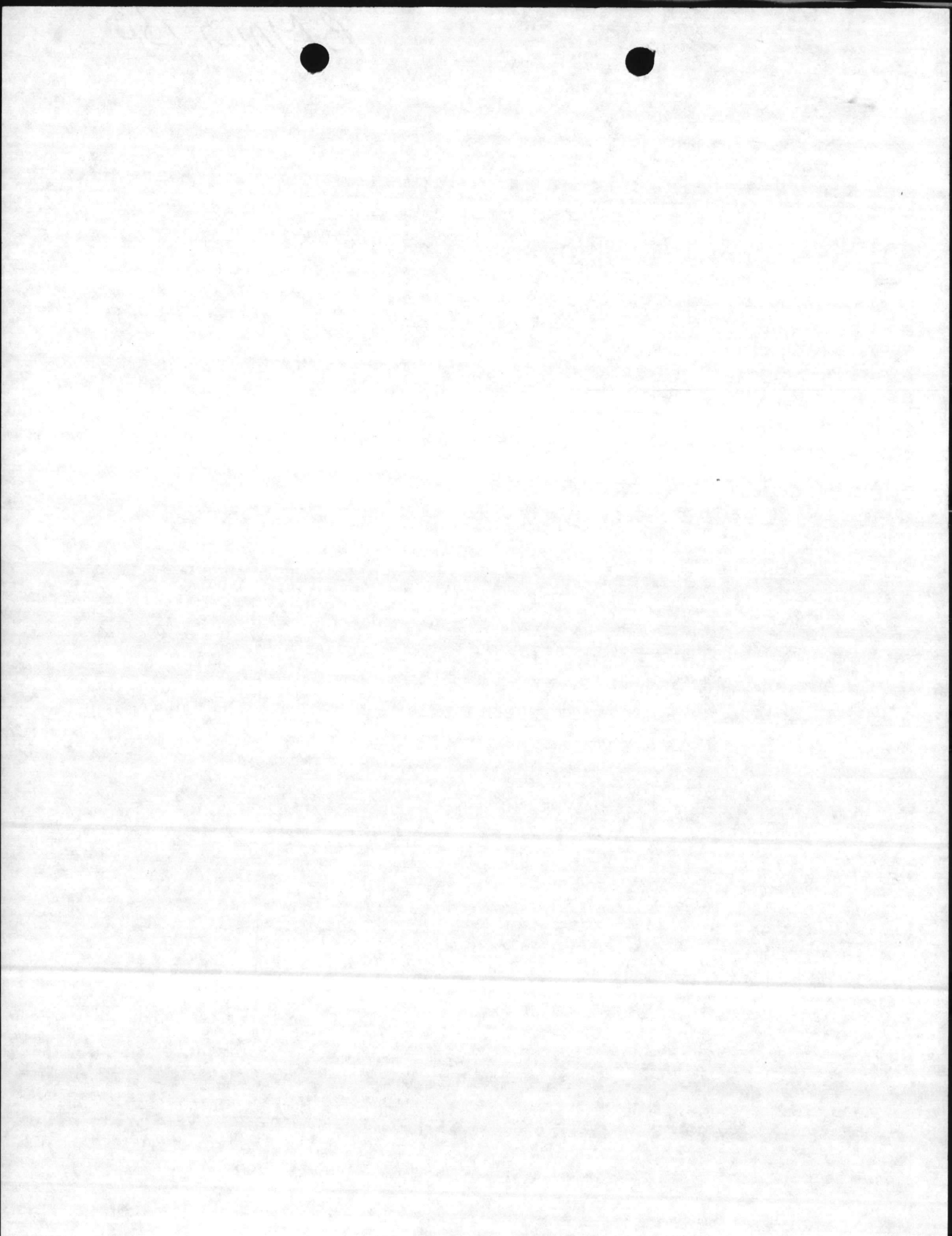
TOD: 270339Z NOV 79/33

REL: J.R. FRIDELL C/S

DISTR: MAIN, FAC, SJA

NNNN

TOD 10
0339Z 27



JOINT MESSAGEFORM

SECURITY CLASSIFICATION

UNCLASSIFIED

| | | | | | | | | | | |
|------------|--------------------------|------------|------|-----|-------|-----|---|-------|----|--|
| PAGE | DRAFTER OR RELEASER TIME | PRECEDENCE | | LMF | CLASS | CIC | FOR MESSAGE CENTER/COMMUNICATIONS CENTER ONLY | | | |
| | | ACT | INFO | | | | DATE - TIME | MONTH | YR | |
| X 01 OF 02 | | RR | RR | | UUUU | | | | | |

MESSAGE HANDLING INSTRUCTIONS

FROM: CG MCB CAMP LEJEUNE NC
 TO: CMC WASHINGTON DC
 CO GARD MSO WILMINGTON NC
 CCGDFIVE PORTSMOUTH VA
 EPA REGION FOUR
 THREE FOUR FIVE COURTLAND ST
 ATLANTA GA
 INFO CMDR LANTDIV NAVFACENCOM NORFOLK VA
 CG 2DFSSG

UNCLAS //NO6280//

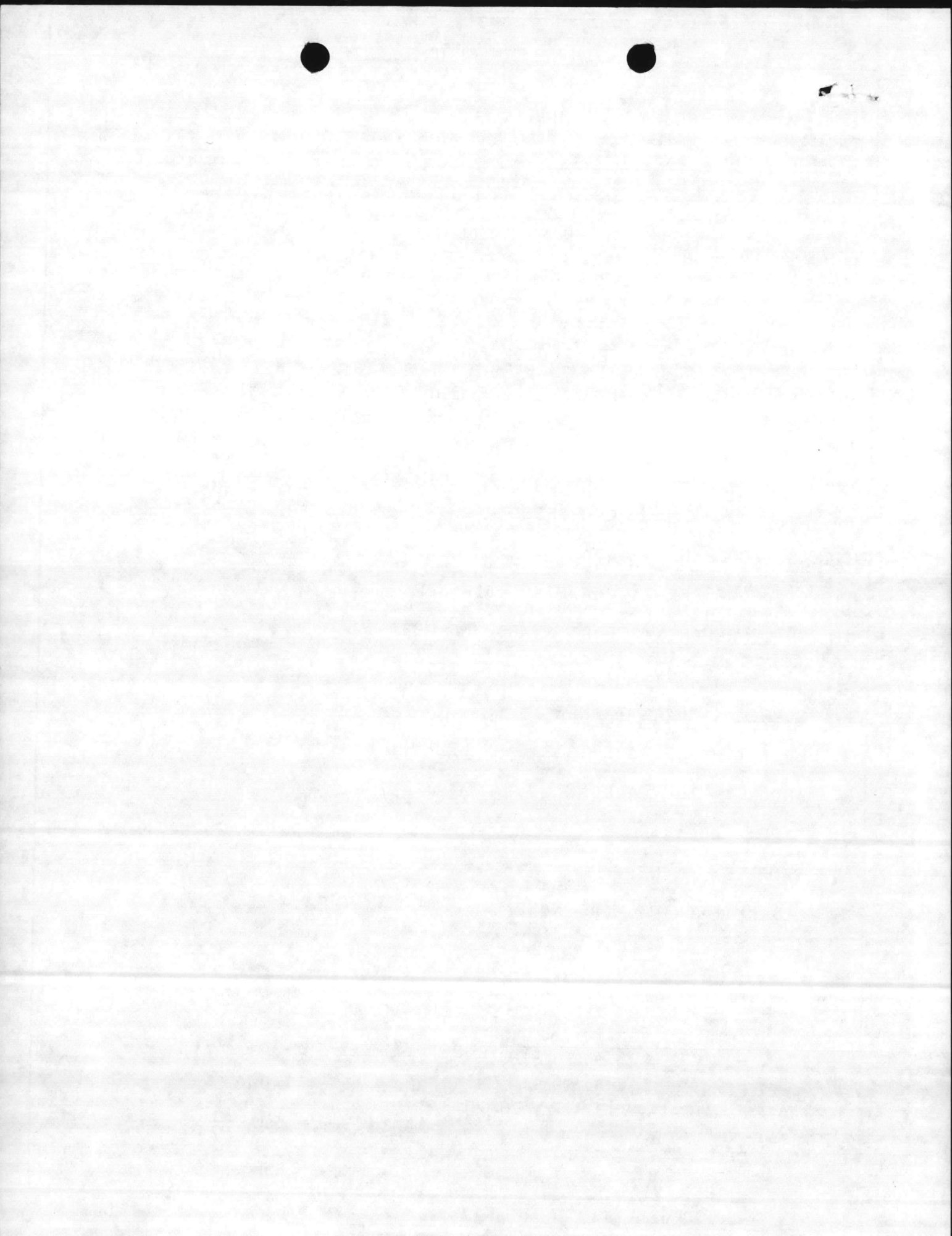
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DISTR:
 MAIN
 FAC
 SJA

| | | | |
|--|-----------|-------------------------|-----------------|
| DRAFTER TYPED NAME, TITLE, OFFICE SYMBOL, PHONE & DATE | | SPECIAL INSTRUCTIONS | |
| <i>J. Wooten</i> J. WOOTEN, NREAD, 5003, 11/20/79 | | BMO _____ | ABMO _____ |
| TYPED NAME, TITLE, OFFICE SYMBOL AND PHONE | | ADMIN _____ | SJA _____ |
| RELEASER | SIGNATURE | SECURITY CLASSIFICATION | DATE TIME GROUP |
| | | UNCLASSIFIED | |



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| 02 | 02 | ACT INFO | | | | DATE - TIME | MONTH | YR |
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| | SIGNATURE | | |

