



**ELTF ELIGIBILITY APPLICATION FOR
UST DECOMMISSIONING/REPLACEMENT**

State Form 57299 (R / 6-24)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

Facility ID
22048

INSTRUCTIONS: Submit this form when applying for an eligibility determination.

SUBMITTAL INSTRUCTIONS: The completed form, current site map, future site map (if applicable), and supporting documentation if "Other" is selected in Section 3 should be saved as a PDF and emailed to the following: ELTFEligibility@idem.IN.gov

SECTION 1 - APPLICANT INFORMATION (OWNER)

Name of Applicant Good Oil Company Inc		Owner # of Tanks (as billed)	
Mailing Address (Number and Street) 1201 N US Hwy 35		<input type="checkbox"/> 1 to 12 <input checked="" type="checkbox"/> 13-100 <input type="checkbox"/> Over 100	
Mailing Address (Line 2)		City, State, Zip Code Winamac, IN 46996	
Applicant Contact Dean Good		Contact Title Sec Treas	
Contact E-mail Address deangood@goodoilcompany.com		Contact Telephone Number (with Area Code) 574-946-4863	

SECTION 2 - SITE INFORMATION

Name of Facility MSB Petroleum Inc	# of USTs currently on site 4
Facility Address (Number and Street) 7860 N St Rd 23	City, State, ZIP Code Walkerton, IN 46574

SECTION 3 - PROPOSED USTs FOR DECOMMISSIONING

UST#	Install Date	Capacity	Substance	Lined Steel	First Generation Fiberglass	> 30 years	Other
1	10/20/1991	10,000	Gasoline	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2	10/20/1991	10,000	Gasoline	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3	10/20/1991	10,000	Diesel	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4	10/20/1991	4,000	Kerosene	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 4 - PROPOSED REINSTALLATION OF REGULATED TANKS

TANK #	Compartment 1 Capacity	Compartment 2 Capacity	Compartment 3 Capacity	Compartment 4 Capacity
1	12,000			
2	6,000	5,000		
3				
4				
5				

SECTION 5 - SIGNATURE OF OWNER OF THE TANK(S) OR ATTORNEY-IN-FACT

I understand that pursuant to Indiana Code 13-23-9-6, I may be subject to criminal prosecution for submitting false and/or inaccurate information on this application. Please check the box below and submit proper documentation if signing under a Power of Attorney for the owner.

Signature of Owner of the Tanks or <input type="checkbox"/> Attorney-in-Fact <i>Dean Good</i>		Date Signed (mm/dd/yyyy) 10/29/2024	
Mr./Ms. MR.	Print Name Dean Good	Title Sec Treas.	Company Good Oil Company Inc.



Figure 1
MSB Petroleum, Inc.
FID #22048
7860 IN-23
Walkerton, IN

Not to scale
Source: Google Earth

Tennis, Morgan L (IDEM)

From: Carla Gill <carla@sescogroup.com>
Sent: Thursday, October 31, 2024 8:36 AM
To: IDEM ELTF Eligibility
Subject: 56553 Form_FID22048_10-31-2024
Attachments: 56553 Form_FID22048_10-31-2024.pdf

Categories: ELTF 50% Reimbursement

EXTERNAL EMAIL: This email was sent from outside your organization. Exercise caution when clicking links, opening attachments or taking further action, before validating its authenticity.

Please see attached.

Thank you,
Carla

Carla J. Gill, CHMM
Director of Remediation Services



SESCO Group
5154 E 65th Street
Indianapolis, IN 46220
sescogroup.com

Carla's Cell: [317-519-0792](tel:317-519-0792)

Let's connect: www.linkedin.com/in/carla-gill-5793a423/

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