Transboundary Spill NPDES CA0108928 Order No. R9-2014-0009, Amended by R9-2014-0094

Type ____A __x___ B **(CAL OES 1-800-852-7550)**

Name of Person Reporting Spill__ Steven Smullen_____

Telephone No. of Person Reporting_____619-662-7600 X 240_____

Spill Location/Name_____Tijuana River at the International Border_____

GPS Coordinates_32.32.30 N, 117.2.18 W_____

Spill Reached: ____Drainage Channel ___Drainage Structure __x__Surface Water

Spill Reached: ____MS4 MS4 Owner_____

Vol Spill to MS4_____**Vol Recovered from MS4**_____

Estimate Spill Volume from All Sources___0.72 million gallons (MG)_____

Volume That Reached: Surface Water, Drainage Channel, Not Recovered from MS4___0.72 MG___

Total Recovered Volume_____0_____

Number of Spill Appearance Points ___1_____

Appearance Descriptions_____Slightly cloudy water _____

Spill Flow: Start Date 1/23/16___**Start Time** __0100_____

Notification: Date ____1/25/16_____ **Time** ___0830_(Steve Smullen - IBWC)___

Operator Arrival: Date __NA_____ **Time** _NA_____

Spill Flow: End Date ___1/23/16____**End Time**___1200_____

Cleanup Completed: Date __N/A_____ **Time**_____

Probable Cause of Spill _____Pump Station CILA capacity exceeded_____

Notification of CAL OES Date___1/25/16_____ **Time** __1400_____

CAL OES Control Number __16-0491 (M. Duddy)

Description of Spill Flow Destination ____Tijuana River Channel _____

Spill Flow Cause _____Pump Station CILA capacity exceeded_____

Spill Flow Failure Point CILA Pump Station___

Spill Flow Storm Event ___N/A____

Spill Corrective Actions _____none_____

Spill Flow Response Actions _____none_____

Spill Flow Completion Date___1/23/16_____

Investigation _____N/A____ **Reasons** _____ **Completion Date**_____

Health Warnings Posted _____ Yes ___x____No

Name of Beaches Impacted: _____None_____

Surface Water Impacted: _____Tijuana River_____

Location and No. Of Samples Collected (Type A) _____N/A_____ **Number**_____

Parameters Tested_____N/A_____

Regulatory Agencies Receiving Results _____N/A_____

Methodology for Spill Volume Estimate _____Calculated from 15 min gage data USIBWC gage_____

Amount of Spill Recovered _____None_____

Certifying Official _Steven Smullen_____ Steven J Smullen

Title _____Area Operations Manager_____ **Date** __1/25/16__1400_____

Spill CILA Pump Station 1/23/16

Date	Time	Gage Height	Flow cms	Flow, MG
1/23/2016	12:00	11.924	0.02	0.004755
1/23/2016	11:45	11.924	0.02	0.004755
1/23/2016	11:30	11.924	0.02	0.004755
1/23/2016	11:15	11.924	0.02	0.004755
1/23/2016	11:00	11.924	0.02	0.004755
1/23/2016	10:45	11.924	0.02	0.004755
1/23/2016	10:30	11.924	0.02	0.004755
1/23/2016	10:15	11.924	0.02	0.004755
1/23/2016	10:00	11.924	0.02	0.004755
1/23/2016	9:45	11.924	0.02	0.004755
1/23/2016	9:30	11.924	0.02	0.004755
1/23/2016	9:15	11.924	0.02	0.004755
1/23/2016	9:00	11.924	0.02	0.004755
1/23/2016	8:45	11.924	0.02	0.004755
1/23/2016	8:30	11.924	0.02	0.004755
1/23/2016	8:15	11.924	0.02	0.004755
1/23/2016	8:00	11.924	0.02	0.004755
1/23/2016	7:45	11.924	0.02	0.004755
1/23/2016	7:30	11.924	0.02	0.004755
1/23/2016	7:15	11.924	0.02	0.004755
1/23/2016	7:00	11.928	0.07	0.016643
1/23/2016	6:45	11.928	0.07	0.016643
1/23/2016	6:30	11.928	0.07	0.016643
1/23/2016	6:15	11.928	0.07	0.016643
1/23/2016	6:00	11.928	0.07	0.016643
1/23/2016	5:45	11.928	0.07	0.016643
1/23/2016	5:30	11.928	0.07	0.016643
1/23/2016	5:15	11.928	0.07	0.016643
1/23/2016	5:00	11.928	0.07	0.016643
1/23/2016	4:45	11.928	0.07	0.016643
1/23/2016	4:30	11.928	0.07	0.016643
1/23/2016	4:15	11.932	0.12	0.028531
1/23/2016	4:00	11.932	0.12	0.028531
1/23/2016	3:45	11.932	0.12	0.028531
1/23/2016	3:30	11.932	0.12	0.028531
1/23/2016	3:15	11.932	0.12	0.028531
1/23/2016	3:00	11.932	0.12	0.028531
1/23/2016	2:45	11.932	0.12	0.028531
1/23/2016	2:30	11.932	0.12	0.028531
1/23/2016	2:15	11.936	0.16	0.038041
1/23/2016	2:00	11.936	0.16	0.038041
1/23/2016	1:45	11.936	0.16	0.038041
1/23/2016	1:30	11.936	0.16	0.038041

1/23/2016	1:15	11.936	0.16	0.038041
1/23/2016	1:00	11.932	0.12	0.028531
			Total	0.725151