

Vista Chemical Company

15990 N. Barker's Landing Rd.
Post Office Box 19029

Houston, Texas 77224
Phone (713) 531-3200

Handwritten: Notice Letters

March 3, 1987

Mr. B. I. Raffle
Supervising Counsel
Environmental & Engineering Group
Conoco Legal Department
P.O. Box 2197
Houston, TX 77252

Certified Mail
Return Receipt Requested

VISTA

Mr. H. J. Neeld
Director, Environmental Programs
Environmental Conservation
Conoco Inc.
P.O. Box 2197
Houston, TX 77252

Certified Mail
Return Receipt Requested

RE: U.S. v. Conoco

Gentlemen:

Pursuant to the Asset Purchase Agreement dated as of July 20, 1984, among E.I. Du Pont de Nemours and Company, Conoco Inc., and Vista Chemical Company, and the Consent Decree entered in the above action, we hereby provide notice of recently-discovered information which may lead to the filing of an Environmental Claim.

On March 2, 1987, the Vista VCM plant experienced an incinerator bypass which resulted in VC emissions above the reportable quantity. The appropriate state and federal agencies were notified. Please contact me if you have any questions regarding this matter.

Sincerely,


Thomas G. Grumbles, C.I.H.
Environmental Quality Manager

ajo
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cc W. L. McClain
M. G. Hayes
R. A. Conrad

VVV 000023409

VV 000023410

**STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE,
CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)**

1. If you want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, leaving the receipt attached, and present the article at a post office service window or hand it to your rural carrier. (no extra charge)
2. If you do not want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, date, detach and retain the receipt, and mail the article.
3. If you want a return receipt, write the certified-mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.
4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse **RESTRICTED DELIVERY** on the front of the article.
5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in Item 1 of Form 3811.
6. Save this receipt and present it if you make inquiry.

☆ GPO: 1979 302-878

**UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS
SENDER INSTRUCTIONS**

Print your name, address, and ZIP Code in the space below.
Complete items 1, 2, 3, and 4 on the reverse.
Attach to front of article if space permits, otherwise affix to back of article.
Endorse article "Return Receipt Requested" adjacent to number.

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

USE \$300 PENALTY FOR PRIVATE

U.S. MAIL

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Houston, TX 77009
P.O. Box 19009
T. Gumbles

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PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

7. Date of Delivery *MAR 5 1987*

6. Signature - Agent *[Signature]*

5. Signature - Addressee *[Signature]*

8. Addressee's Address (ONLY if requested and fee paid)

Always obtain signature of addressee or agent and DATE DELIVERED.

Type of Service: ☐ Registered ☐ Certified ☐ Express Mail ☐ Insured ☐ COD

4. Article Number *PAS-8136143*

3. Article Addressed to: *BI RAFFLE - CONOCO P.O. BOX 2197 HOUSTON, TX 77252*

1. ☒ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery.

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

7. Date of Delivery *MAR 4 1987*

6. Signature - Agent *[Signature]*

5. Signature - Addressee *[Signature]*

8. Addressee's Address (ONLY if requested and fee paid)

Always obtain signature of addressee or agent and DATE DELIVERED.

Type of Service: ☐ Registered ☐ Certified ☐ Express Mail ☐ Insured ☐ COD

4. Article Number *PAS 8136143*

3. Article Addressed to: *H.J. NEED - CONOCO P.O. BOX 2197 HOUSTON, TX 77252*

1. ☒ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery.

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

PS Form 3800, Apr. 1976

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED - NOT FOR INTERNATIONAL MAIL (See Reverse)

SENT TO *H.J. Need - Conoco*

STREET AND NO. *P.O. BOX 2197*

P.O. STATE AND ZIP CODE *HOUSTON, TX 77252*

POSTAGE

CONSULT POSTMASTER FOR FEES	
OPTIONAL SERVICES	
RETURN RECEIPT SERVICE	
SPECIAL DELIVERY	
RESTRICTED DELIVERY	
SHOW TO WHOM AND DATE DELIVERED	
SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY	
SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY	
TOTAL POSTAGE AND FEES	\$
POSTMARK OR DATE	

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED - NOT FOR INTERNATIONAL MAIL (See Reverse)

SENT TO *BI RAFFLE - CONOCO*

STREET AND NO. *P.O. BOX 2197*

P.O. STATE AND ZIP CODE *HOUSTON, TX 77252*

POSTAGE \$

CONSULT POSTMASTER FOR FEES	CERTIFIED FEE	
	SPECIAL DELIVERY	
OPTIONAL SERVICES	RESTRICTED DELIVERY	
	RETURN RECEIPT SERVICE	
	SHOW TO WHOM AND DATE DELIVERED	
	SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY	
	SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY	
TOTAL POSTAGE AND FEES		\$
POSTMARK OR DATE		

PS Form 3800, Apr. 1976

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