

TO: Mr. Aiken
FROM: Robert Grumbles

March 23, 1987

VISTA

Mr. Robert M. Aiken
Vice President - Petrochemicals
E. I. DuPont de Nemours and Company
1007 Market Street, Suite N6404
Wilmington, DE 19898

Mr. A. W. Dunham
Executive Vice President
Petroleum Products, North America
Conoco Inc.
P.O. Box 2197
Houston, TX 77252

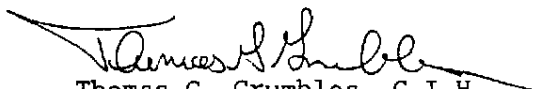
Gentlemen:

Pursuant to Section 15.1, Section 15.5, and Section 12.5 of the Asset Purchase Agreement dated as of July 20, 1984, among E. I. DuPont de Nemours and Company, Conoco Inc., and Vista Chemical Company, we hereby provide notice of an intended communication by Vista which could lead to the filing of an Environmental Claim.

Vista has determined the necessity of filing of Toxic Substances Control Act, Section 8(e) Notification of Substantial Risk based on recently obtained data from the Lake Charles VCM plant groundwater investigation. A draft of the notification letter is attached.

This issue has been discussed with H. J. Neeld at Conoco and we will continue to coordinate with him. Please contact me if you have questions regarding this issue.

Sincerely,


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

ajo
.1

cc N. C. Frost
W. L. McClain
B. I. Raffle
H. J. Neeld
J. A. DeBernardi
R. A. Conrad
M. G. Hayes
E. R. Taylor

VVV 000001004

500100000 AAA

P25 8136147
T. G. Grumbles
RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED—
NOT FOR INTERNATIONAL MAIL
(See Reverse)

SENT TO A. W. Dunham - Conoco STREET AND NO. P.O. Box 2197 P.O. STATE AND ZIP CODE Houston, TX 77252		POSTAGE CERTIFIED FEE SPECIAL DELIVERY RESTRICTED DELIVERY SHOW TO WHOM AND DATE DELIVERED SHOW TO WHOM DATE AND ADDRESS OF DELIVERY SHOW TO WHOM AND DATE DELIVERED WITH RESTRICTED DELIVERY SHOW TO WHOM DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY		CONSULT POSTMASTER FOR FEES	
TOTAL POSTAGE AND FEES		POSTMASTER'S DATE		ADDITIONAL SERVICES	

PS Form 3800, Apr. 1976

● **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.

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

3. Article Addressed to:
Mr. A. W. Dunham
Executive Vice President
Petroleum Products, North America
Conoco Inc.
P.O. Box 2197
Houston, TX 77252

4. Article Number
P25 8136147

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

Always obtain signature of addressee or agent and **DATE DELIVERED**.

5. Signature - Addressee
X

6. Signature - Agent
X *Olis Joseph*

7. Date of Delivery
MAR 25 1977

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

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

PS Form 3800, Apr. 1976

SENT TO
R. M. Aiken - DuPont
STREET AND NO.
1007 Market Street
P.O. STATE AND ZIP CODE
Wilmington, DE 19898

POSTAGE
CERTIFIED FEE
SPECIAL DELIVERY
RESTRICTED DELIVERY
DATE DELIVERED
SHOW TO WHOM AND ADDRESS OF DELIVERY
SHOW TO WHOM DATE AND ADDRESS OF DELIVERY
SHOW TO WHOM DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY
SHOW TO WHOM DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY

CONSULT POSTMASTER FOR FEES

OPTIONAL SERVICES
RETURN RECEIPT SERVICE

TOTAL POSTAGE AND FEES

ADDITIONAL SERVICES
REGISTERED
CERTIFIED
EXPRESS MAIL
INSURED
COD

(See Reverse)

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3. Article Addressed to:
Mr. Robert M. Aiken
V.P. - Petrochemicals
E.I. DuPont de Nemours and Company
1007 Market St., Suite N6404
Wilmington, DE 19898

4. Article Number
P25 8136146

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

Always obtain signature of addressee or agent and **DATE DELIVERED**.

5. Signature - Addressee
X

6. Signature - Agent
X *J. L. Ciccone*

7. Date of Delivery
3/20/80

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

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.

1987
30 MAR
F.N.



PENALTY FOR PRIVATE
USE, \$300

**RETURN
TO**

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

Thomas G. Grumbles

P.O. Box 19029

Houston, TX 77224

**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.
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Endorse article "Return Receipt Requested" adjacent to number.



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TO**

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Thomas G. Grumbles

P.O. Box 19029

Houston, TX 77224

☆ GPO: 1979 302-875

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. **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.

**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).
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9001000000 AAA

T. C. Grumbles
P25 8136150

RECEIPT FOR CERTIFIED MAIL

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

SENT TO A. W. Dunham - Conoco STREET AND NO. P.O. Box 2197 P.O. STATE AND ZIP CODE Houston, TX 77252		POSTAGE		CERTIFIED FEE		SPECIAL DELIVERY		RESTRICTED DELIVERY		SHOW TO WHOM AND DATE DELIVERED		SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY		SHOW TO WHOM AND DATE DELIVERED 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

● **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.

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Mr. A. W. Dunham
Executive Vice President
Petroleum Products, North America
Conoco Inc.
P.O. Box 2197
Houston, TX 77252

4. Article Number

P25 8136150

Type of Service:

☒ Registered
☒ Certified
☐ Express Mail

☐ Insured
COD

Always obtain signature of addressee or agent and **DATE DELIVERED**.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAR 26 1987

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

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

● **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.

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Vice President - Petrochemicals
E. I. DuPont de Nemours and Co.
1007 Market Street, Suite N6404
Wilmington, DE 19898

4. Article Number

P25 8136149

Type of Service:

☐ Registered
☒ Certified
☐ Express Mail

☐ Insured
COD

Always obtain signature of addressee or agent and **DATE DELIVERED**.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

3/30/87

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

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

PS Form 3800, Apr. 1976

POSTMARK OR DATE

SENT TO
R. M. Aiken - DuPont
STREET AND NO.
1007 Market St. S. N6404
P.O. STATE AND ZIP CODE
Wilmington, DE 19898

POSTAGE

CERTIFIED FEE

SPECIAL DELIVERY

RESTRICTED DELIVERY

SHOW TO WHOM AND DATE DELIVERED

SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY

SHOW TO WHOM AND DATE DELIVERED WITH RESTRICTED DELIVERY

SHOW TO WHOM, DATE AND ADDRESS OF DELIVERY WITH RESTRICTED DELIVERY

OPTIONAL SERVICES

RETURN RECEIPT SERVICE

CONSULT POSTMASTER FOR FEES

TOTAL POSTAGE AND FEES

RECEIPT FOR CERTIFIED MAIL

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

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

CERTIFICATE

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)

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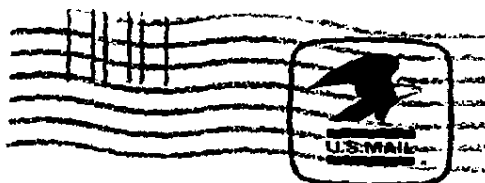
Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in Item 1 of Form 3811.

Save this receipt and present it if you make inquiry.

GPO: 1979 302-878

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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.



PENALTY FOR PRIVATE USE, \$300

RETURN TO

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

Thomas G. Grumbles

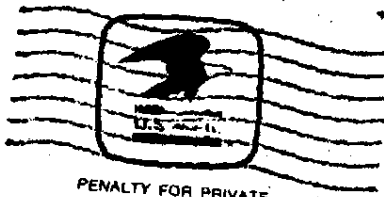
P.O. Box 19029

Houston, TX 77224



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