GR-I-149-2

UNION CARBIDE

INTERNAL CORRESPONDENCE

RECEIVED
SEP 12 1972
R. N. WHEELER, JR

CHEMICALS AND PLASTICS •

SOUTH CHARLESTON PLANT P. O. BOX 8004, SOUTH CHARLESTON, W. VA. 25303

To (Name) Mr. D.E. Deese
Division Texas City Plant
Location P.O. Box 471
Texas City, Texas 77590

Date September 7, 1972

Originating Dept.

Answering letter date

Subject

Copy to Mr. A.S. Amatangelo
Mr. D.A. Ellwood
Mr. N. H. Ketcham
M. R.G. Lilley
Mr. H. H. McGriff
Mr. R. L. Barker
Mr. R.J. Murphy
Mr. R.N. Wheeler

Dear Don:

It was a pleasure to discuss with you by telephone our Environmental Health Program for monitoring vinyl chloride exposures at the South Charleston plant.

As you requested, attached is the calibration curve of J & W Model 55-P Serial No. 7055234 - calibrated on vinyl chloride 6/15/71.

Presently, the monitoring program for vinly chloride consists of the following procedures.

1. Air dry and water wash autoclaves, (wash with high pressure water then purge for 1 - 2 hrs), before entering.
2. Instigate Master Tag Out Procedure(attached).
3. Issue Hazardous Work Permit (attached).
4. Detect oxygen concentration and combustible level inside autoclave before entering. (1)
5. Detect vinyl chloride concentration(toxicity) inside autoclave with drager gas detector. (2)

To detect lower concentrations ($<$ 100ppm) of vinyl chloride vapor in the working environment. We use the Analytical Instrument Development, Inc. (AID) portable.

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1. No. 505-150-Model GPK - Johnson & Williams Combined Oxygen/ Combustible Gas Indicating Detector.

2. 19/31 - Drager Multi-Gas Detector with No. 100/a Vinyl Chloride Detector Tube. (100-3,000ppm) . Chromatograph. This instrument is capable of detecting vinyl chloride concentrations in the parts per billion range.

Very truly yours,

B. L. Murray

BLM/us

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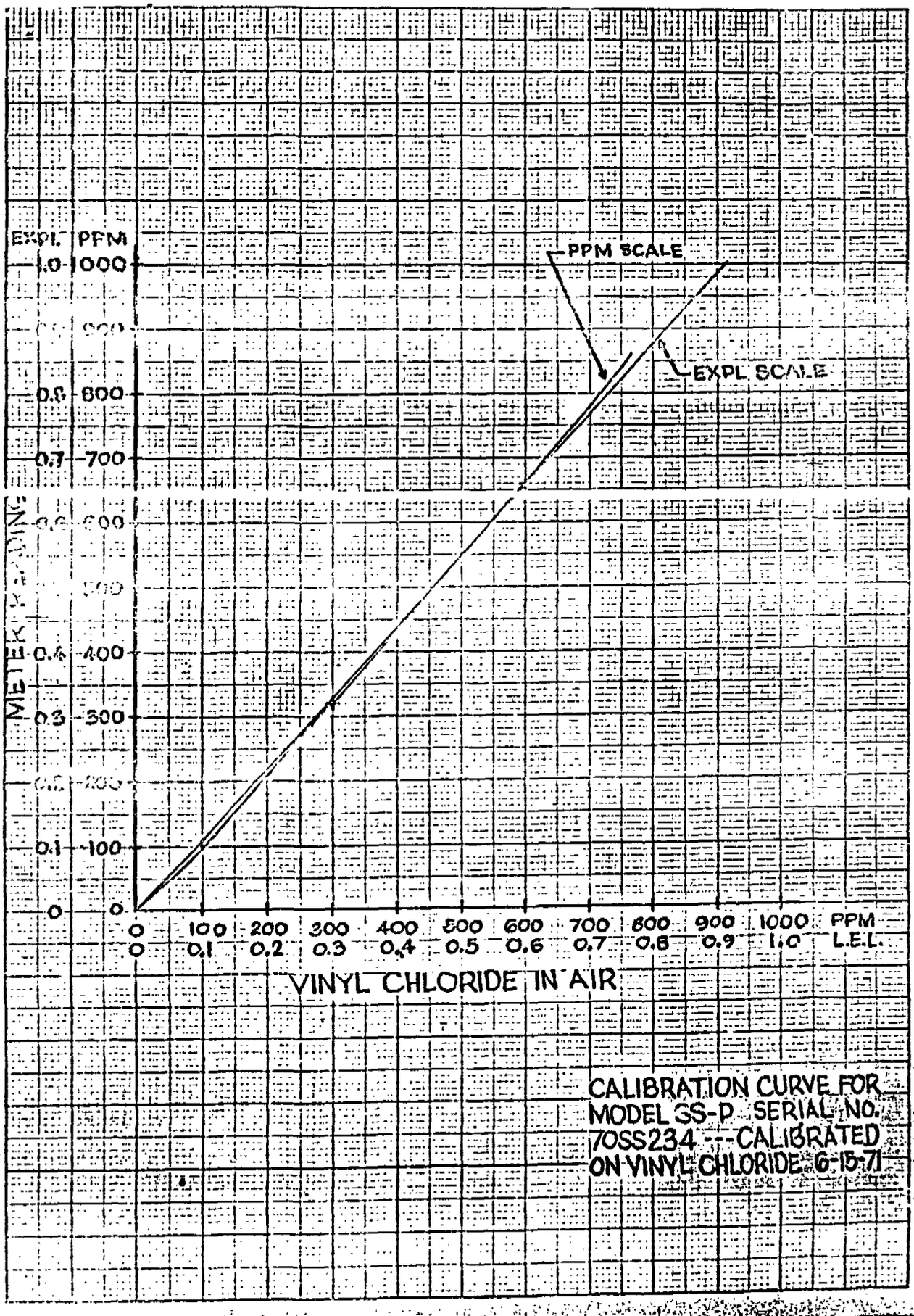

CALIBRATION CURVE FOR MODEL SS-P SERIAL NO. 70SS234 --- CALIBRATED ON VINYL CHLORIDE 6-15-71

MASTER TAG NO. _____ BACK

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TAG NO.	LOCATION OF TAG	TAG PLACED ON EQUIPMENT		TEMPORARY RELEASE FOR TESTING		TEST COMPLETE		TAG REMOVED FROM EQUIPMENT	
		DATE	FOREMAN	TIME DATE	FOREMAN	TIME DATE	FOREMAN	DATE	FOREMAN
305	Main Sw. Ft.	8/15	[illegible]					8/15	[illegible]
306	Chg Line	8/15	[illegible]					8/15	[illegible]
C31	Stm Line	8/15	[illegible]					8/15	
25	[illegible]	8/15	[illegible]					8/15	

(Back)

514-701-W

HAZARDOUS WORK PERMIT

DESCRIPTION

☐ Major Project ☐ Interdepartmental ☑ Departmental

Describe the work to be done and the location of the equipment. [illegible]

Starting at 10 30 a.m. p.m. to 3 a.m. p.m. on Date 8/15/77

HAZARDS

☐ Electric tools, drills, saws, etc.
☐ Electrical work
☑ Entry of operating equipment
☐ Entry of sewers
☐ Flame
☐ Hot solder, lead, or roofing tar
☐ Internal combustion engine
☐ Pneumatic tools, jack or chipping hammer, etc.
☐ Radioactive materials
☐ Sandblasting
☐ Welding, electric
☐ Other

Requested By [illegible] Conditions Specified By S.O.P.

PREPARATION

☑ Empty equipment, drain lines
☑ Blank or disconnect lines
☑ Clean or wash
☐ Steam for ______ hours
☑ Purge with [illegible]
☑ Ventilate
☑ Lock out electrical equipment
☐ Make safe radioactive source
☑ Tag
☑ Other

Foregoing preparations have been completed. Signed [illegible] Operations

PRECAUTIONS

☐ Charged fire hose
☐ Face mask
☑ Fresh air blower
☐ Fresh air mask
☑ Life lines
☐ Proper hand extinguishers
☐ Protective clothing
☐ Radiation dosimeter
☑ Tests: Indicate, in blocks below, frequency in hours or "S" for start only. Record starting results on lines.
☐ Safety monitor (continuous)
☑ Safety monitor (spot check)
☐ Spark resistant tools
☐ Special goggles
☐ Water for wetting area
☐ Other

	Acetylides	Combustibles	Oxygen	
Inside Equipment	☐	☐ [illegible]	☐ 20	☐ [illegible]
Ouside Area	☐	☐	☐	☐

Foregoing precautions are understood and will be carried out. Signed [illegible] Operations

______ Maintenance or Construction

[illegible signature] Safety Monitor [illegible]

Completed at 12 45 a.m. p.m. on Date 8/15 Signed [illegible] Job Foreman

Approved for return to service by [illegible] Operations on Date [illegible]

White copy must be in hands of job foreman before work is started. It must be signed and returned to the Operating Department Head at completion of work or when permit expires.

Pink copy to be retained by operations personnel approving permit, and passed on to relief at shift change.

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MASTER TAG NO. 1099 **FRONT**

EQUIPMENT DESCRIPTION: C-36 [illegible] **SHOP ORDER NO.** ______

		Date	Time
Outage Requested By:	[illegible]	8/15/72	9[illegible]
Out of Service By Operations Foreman:	[illegible]	8/15/72	10[illegible]

Reason For Outage: [illegible]

Tag Numbers: (See Reverse Side)

MEN WORKING ON EQUIPMENT								
Signed On			Signed Off					
			Job Not Completed			Job Completed		
Name	Date	Time	Name	Date	Time	Name	Date	Time
Mccallister	8 15	1045				Mccallister	8 15	1245

	Date	Time
Equipment Repaired and Ready For Service by Maintenance: ______ (Maintenance Foreman's Signature)		
Back in Service and All Tags Removed Operations Foreman: [illegible] (Operations Foreman's Signature)	8/15/[illegible]	12[illegible]

Remarks: ______

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