BUCKEYE PIPE LINE COMPANY
FACSIMILE and Electronic Mailing

5002 Buckeye Road
Emmaus, Pennsylvania 18049
Tel: (484) 232-4000
Fax: (484) 232-4541

September 16, 2005

Mr. Michael O'Brien
U.S. EPA, Region 1 – New England
One Congress Street – Suite 1100
Boston, MA 02114-2023
Fax: 617.918.0505
Email: NPDES.Generalpermits@epa.gov

Mr. Bob Kubit
MA DEP
Fax: 508.791.4131

RE: Notice of Intent to Discharge (NOI), September 2005
Hydrostatic Pressure Test Water Discharge
Massachusetts General Permit, Permit No. MAG910000
Buckeye Pipe Line Co., LP (Buckeye)
Ludlow Terminal, Ludlow, MA

Dear Sirs,

Enclosed please find a completed NOI form for the above referenced General Permit. Also enclosed please find previous mailing to the USEPA in regard to requests for discharge in the outdated format of an Exclusion Letter. Please expedite the permitting process.

Buckeye intended to start the discharge of Hydrostatic Test Water on or about September 27, 2005. We hope that the NOI will be activated in time to discharge water at that time.

Buckeye has attempted contact with personnel at the U.S. Fish and Wildlife Service to determine the status of the Endangered Species near the discharge point. However, the point of contact will not be available unit Sept. 20, 2005.

Buckeye is also following this correspondence with a mailing to the MA DEP. The subsequent mailing is in regard to the required fee for the Permit Transmittal W068398. A check for the required fee of $385.00 will be enclosed.

Thank you for all of your help. Should you require additional information regarding this matter, please contact me at the letterhead address, via telephone at (484) 232-4427, or via email at pwagner@buckeye.com.

Sincerely,

Pierce W. Wagner, CHMM
Environmental Coordinator

Enclosures

B. Suggested Form for Notice of Intent (NOI) for the Remediation General Permit

MA TRANSMITTAL #
W068398

1. General site information. Please provide the following information about the site:

a) Name of facility/site: Ludlow Terminal - Buckeye Pipe Line Co., LP			Facility/site address: Ludlow Terminal	
Location of facility/site: longitude: 72.4992 latitude: 42.1872	Facility SIC code(s): 4613		Street: Tank Farm Rd	
b) Name of facility/site owner: Buckeye Pipe Line Co., LP			Town: Ludlow	
Email address of owner: pwagner@buckeye.com			State: MA	Zip: 01056 / County: Hampden
Telephone no.of facility/site owner: 484-232-4000				
Fax no. of facility/site owner: 484-232-4549			Owner is (check one): 1. Federal ___ 2. State/Tribal ___ 3. Private X 4. other, if so, describe:	
Address of owner (if different from site): Buckeye Pipe Line Co., LP				
Street: PO Box 368				
Town: Emmaus	State: PA	Zip: 18049	County: Lehigh	
c) Legal name of operator: Buckeye Pipe Line Co., LP	Operator telephone no: 484-232-4000			
	Operator fax no.: 484-232-4549		Operator email: pwagner@buckeye.com	
Operator contact name and title: Pierce W. Wagner, Env. Coord.				
Address of operator (if different from owner):	Street:			
Town:	State:	Zip:	County:	

d) Check "yes or no" for the following:

1. Has a prior NPDES permit exclusion been granted for the discharge? Yes XX No ___ if "yes," number: Letter Dated 4/16/96
2. Has a prior NPDES application (Form 1 & 2C) ever been filed for the discharge? Yes XX No , if "yes," date and tracking #: Cancelled Permit MA0034614
3. Is the discharge a "new discharge" as defined by 40 CFR No X
4. For sites in Massachusetts, is the discharge covered under the MA Contingency Plan (MCP) and exempt from state permitting? Yes ___ No X

e) Is site/facility subject to any State permitting or other action which is causing the generation of discharge? Yes___ No X___ If "yes," please list: 1. site identification # assigned by the state of NH or MA: 2. permit or license # assigned: 3. state agency contact information: name, location, and telephone number:	f) Is the site/facility covered by any other EPA permit, including: 1. multi-sector storm water general permit? Y___ N XX if Y, 2. phase I or II construction storm water general permit? Y___ N XX , if Y, number: 3. individual NPDES permit? Y___ Nxxx, if Y, number: 4. any other water quality related permit? Y___ N_xxx__, if Y,

2. Discharge information. Please provide information about the discharge, (attaching additional sheets as needed) including:

a) Describe the discharge activities for which the owner/applicant is seeking coverage:

Discharge of Pipeline and Tank Hydrostatic Test Water. Petroleum impacted waters will be filter though GAC System prior to discharge.

b) Provide the following information about each discharge:	1) Number of discharge points: 1	2) What is the **maximum and average flow rate** of discharge (in cubic feet per second, ft3/s)? Max. flow 1 cuft / sec Average flow 300 gpm Is maximum flow a **design value?** y - Nxxx For average flow, include the units and appropriate notation if this value is a design value or estimate if not available. ESTIMATED

3) Latitude and longitude of each discharge within 100 feet: pt 1 Long. :72.4992 , lat. 42.1872

4) If hydrostatic testing, total volume of the discharge (gals): 1.68 Million Gallons Est.	5) Is the discharge intermittent X or seasonal ___ 9 Is discharge ongoing Yes ___ No ___ 9

c) Expected dates of discharge (mm/dd/yy): start end Start 9/27/05 END 10/10/05

d) Please attach a line drawing or flow schematic showing water flow through the facility including:
1. sources of intake water, 2. contributing flow from the operation, 3. treatment units, and 4. discharge points and receiving waters(s).

N/A N/A Attached Attached

3. Contaminant information. In order to complete this section, the applicant will need to take a minimum of one sample of the untreated water and have it analyzed for all of the parameters listed in Appendix III. Historical data, (i.e., data taken no more than 2 years prior to the effective date of the permit) may be used ifobtained pursuant to: i. Massachusetts' regulations 3 10 CMR 40.0000, the Massachusetts Contingency Plan ("Chapter 21E"); ii. New Hampshire's Title 50 RSA 485-A: Water Pollution and Waste Disposal or Title 50 RSA 485-C: Groundwater Protection Act; or iii. an EPA permit exclusion letter issued pursuant to 40 CFR 122.3, provided the data was analyzed with test methods that meet the requirements of this permit. Otherwise, a new sample shall be taken and analyzed.

a) Based on the analysis of the sample(s) of the untreated influent, the applicant must check the box of the sub-categories that the potential discharge falls within.

Gasoline Only	VOC Only	Primarily Metals	Urban Fill Sites	Contaminated Sumps	Mixed Contaminants	Aquifer Testing
Fuel Oils (and Other Oils) only	VOC with Other Contaminants	Petroleum with Other Contaminants	Listed Contaminated Sites	Contaminated Dredge Condensate	Hydrostatic Testing of Pipelines/Tanks	Well Development or Rehabilitation

b) Based on the analysis of the untreated influent, the applicant must indicate whether each listed chemical is **believed present or believed absent** in the potential discharge. Attach additional sheets as needed.

PARAMETER	Believe Absent	Believe Present	# of Samples (1 minimum)	Typeof Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
1. Total Suspended Solids		x								
2. Total Residual Chlorine	x									
3. Total Petroleum Hydrocarbons		x								
4. Cyanide	x									
5. Benzene		x								
6. Toluene		x								
7. Ethylbenzene		x								
8. (m,p,o) Xylenes		x								
9. Total BTEX4		x								

4 BTEX = Sum of Benzene, Toluene, Ethylbenzene, total Xylenes.

PARAMETER	Believe Absent	Believe Present	# of Samples (1 min-imum)	Typeof Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
10. Ethylene Dibromide 5 (1,2- Dibromo-methane)	X									
11. Methyl-tert-Butyl Ether (MtBE)	X									
12. tert-Butyl Alcohol (TBA)	X									
13. tert-Amyl Methyl Ether (TAME)	X									
14. Naphthalene		X								
15. Carbon Tetra-chloride	X									
16. 1,4 Dichlorobenzene	X									
17. 1,2 Dichlorobenzene	X									
18. 1,3 Dichlorobenzene	X									
19. 1,1 Dichloroethane	X									
20.1,2 Dichloroethane	X									
21. 1,1 Dichloroethylene	X									
22. cis-1,2 Dichloro-ethylene	X									
23. Dichloromethane (Methylene Chloride)	X									
24. Tetrachloroethylene	X									

5 EDB is a groundwater contaminant at fuel spill and pesticide application sites in New England.

PARAMETER	Believe Absent	Believe Present	# of Samples (1 min-imum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily Value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
25. 1 1 1 Trichloroethane	X									
26.1 1 2 Trichloroethane	X									
27. Trichloroethylene	X									
28. Vinyl Chloride	X									
29. Acetone	X									
30.1,4 Dioxane	X									
31. Total Phenols	X									
32. Pentachlorophenol	X									
33. Total Phthalates [6] (Phthalate esthers)	X									
34. Bis (2-Ethylhexyl) Phthalate [Di-(ethylhexyl) Phthalate]	X									
35. Total Group I Polycyclic Aromatic Hydrocarbons (PAH)		X								
a. Benzo(a) Anthracene		X								
b. Benzo(a) Pyrene		X								
c. Benzo(b)Fluoranthene		X								
d. Benzo(k) Fluoranthene		X								
e. Chrysene		X								

6 The sum of individual phthalate compounds.

PARAMETER	Believe Absent	Believe Present	# of Samples (1 minimum)	Type of Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Average daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
f. Dibenzo(a,h) anthracene		X								
g. Indeno(1,2,3-cd) Pyrene		X								
36. Total Group II Polycyclic Aromatic Hydrocarbons (PAH)		X								
h. Acenaphthene		X								
i. Acenaphthylene		X								
j. Anthracene		X								
k. Benzo(ghi) Perylene		X								
l. Fluoranthene		X								
m. Fluorene		X								
n. Naphthalene-		X								
o. Phenanthrene		X								
p. Pyrene		X								
37. Total Polychlorinated Biphenyls (PCBs)	X									
38. Antimony	X									
39. Arsenic	X									
40. Cadmium	X									
41. Chromium III	X									
42. Chromium VI	X									

PARAMETER	Believe Absent	Believe Present	# of Samples (1 min-imum)	Typeof Sample (e.g., grab)	Analytical Method Used (method #)	Minimum Level (ML) of Test Method	Maximum daily value		Avg. daily value	
							concentration (ug/l)	mass (kg)	concentration (ug/l)	mass (kg)
43. Copper	x									
44. Lead	x									
45. Mercury	x									
46. Nickel	x									
47. Selenium	x									
48. Silver	x									
49. Zinc	x									
50. Iron	x									
Other (describe):										

c) For discharges where **metals** are believed present, please fill out the following: N/A NO METALS BELIEVED IN DISCHARGE

Step I - Do any of the metals in the influent have a **reasonable potential** to exceed the effluent limits in Appendix III (i.e., the limits set at zero to five dilutions)? Y____ N____	If yes, which metals?
Step 2 - For any metals which have **reasonable potential** to exceed the **Appendix III** limits, calculate the **dilution factor (DF)** using the formula in Part I.A.3.c) (step 2) of the **NOI** instructions or as determined by the State prior to the submission of this **NOI.** What is the dilution factor for applicable metals? Metals:_____ DF: _____	Look up the limit calculated at the corresponding dilution factor in **Appendix IV.** Do any of the metals in the **influent** have the potential to exceed the corresponding effluent limits in Appendix IV (i.e., is the influent concentration above the limit set at the calculated dilution factor)? Y____ N____ If "Yes," list which metals:

4. Treatment system information. Please describe the treatment system using separate sheets as necessary, including:

a) A description of the treatment system, including a schematic of the proposed or existing treatment system:						
b) Identify each applicable treatment unit (check all that apply):	Frac.tank	Air stripper	Oil/water separator	Equalization tanks	Bag filter	GAC filter
	Chlorination	Dechlorination	Other (please describe):			
c) Proposed **average and maximum flow rates** (gallons per minute) for the discharge and the **design flow rate(s)** (gallons per minute) of the treatment system: 300 gpm Average flow rate of discharge 300gpm Maximum flow rate of treatment system 300 gpm Design flow						
d) A description of chemical additives being used or planned to be used (attach MSDS sheets): N/A						

5. Receiving surface water(s). Please provide information about the receiving water(s), using separate sheets as necessary:

a) Identify the discharge pathway:	Direct ____	Within facility ___	Storm drain ____	River/brook XXX	Wetlands ____	Other (describe):
b) Provide a narrative description of the discharge pathway, including the name(s) of the receiving waters: Unnamed Tributary to Higher Brook to Chicopee River						
c) Attach a **detailed map(s) indicating** the site location and location of the outfall to the receiving water: 1. For multiple discharges, number the discharges sequentially. 2. For indirect dischargers, indicate the location of the discharge to the indirect conveyance and the discharge to surface water The map should also include the location and distance to the nearest sanitary sewer as well as the locus of nearby sensitive receptors (based on USGS topographical mapping), such as surface waters, drinking water supplies, and wetland areas.						
d) Provide the state water quality classification of the receiving water Class B, Warm Water						
e) Provide the reported or calculated seven day-ten year low flow (7Q 1 0) of the receiving water 1440 cfs Please attach any calculation sheets used to support stream flow and dilution calculations.						
f) Is the receiving water a listed 303 NO (d) water quality impaired or limited water? YES If yes, for which pollutant(s)? Phosphorus > Chicopee River						

6. Results of Consultation with Federal Services: Please provide the following information according to requirements of Part I.B.4 and Appendices II and VII.

a) Are any listed threatened or endangered species, or designated critical habitat, in proximity to the discharge? Yes XXXNo
Has any consultation with the federal services been completed? No X or is consultation underway? YES XX No
What were the results of the consultation with the U.S. Fish and NWWife Service and/or National Marine Fisheries ServYdV(G~ one):
a "no jeopardy" opinion? or written concurrence on a finding that the discharges are not likely to adversely affect any endangered species or critical habitat?

b) Are any historic properties listed or eligible for listing on the National Register of Historic Places located on the facility or site or in proximity to the discharge?
Yes No XXX Have any state or tribal historic preservation officer been consulted in this determination (Massachusetts only)? Yes No XXX

7. Supplemental information.

Please provide any supplemental information. Attach any analytical data used to support the application. Attach any certification(s) requiredby the general permit.

8. Signature Requirements: The Notice of Intent must be signed by the operator in accordance with the signatory requirements of 40 CFR Section 122.22, including the following certification:

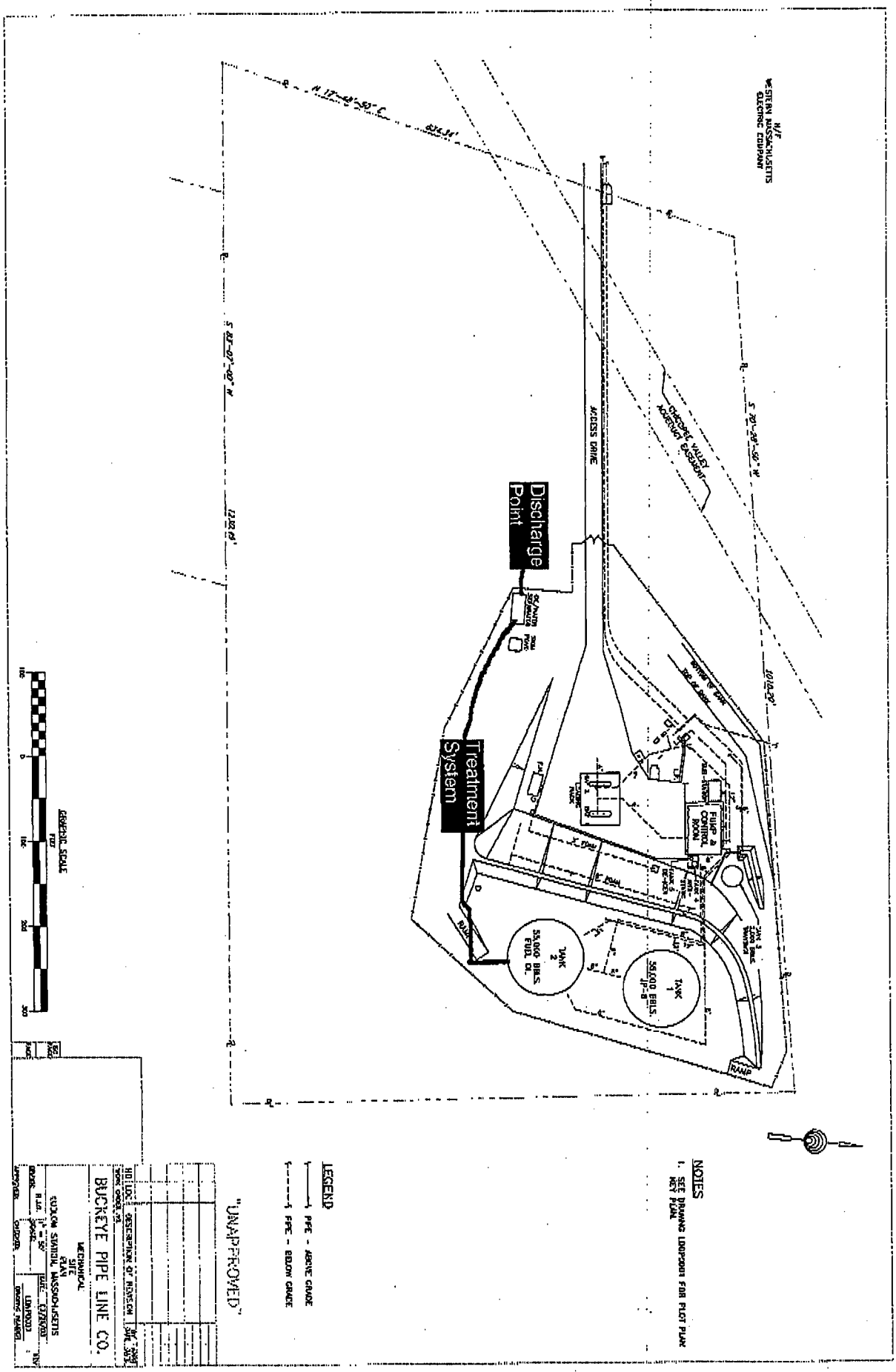
I certify underpenalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualifiedpersonnelproperly gather and evaluate the information submitted. Based on my inquiry of the person orpersons who manage the system, or those persons directly responsiblefor gathering the information, I certify that the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I certify that I am aware that there are significantpenaltiesfor submittingfalse information, including the possibility offine and imprisonmentfor knowing violations.

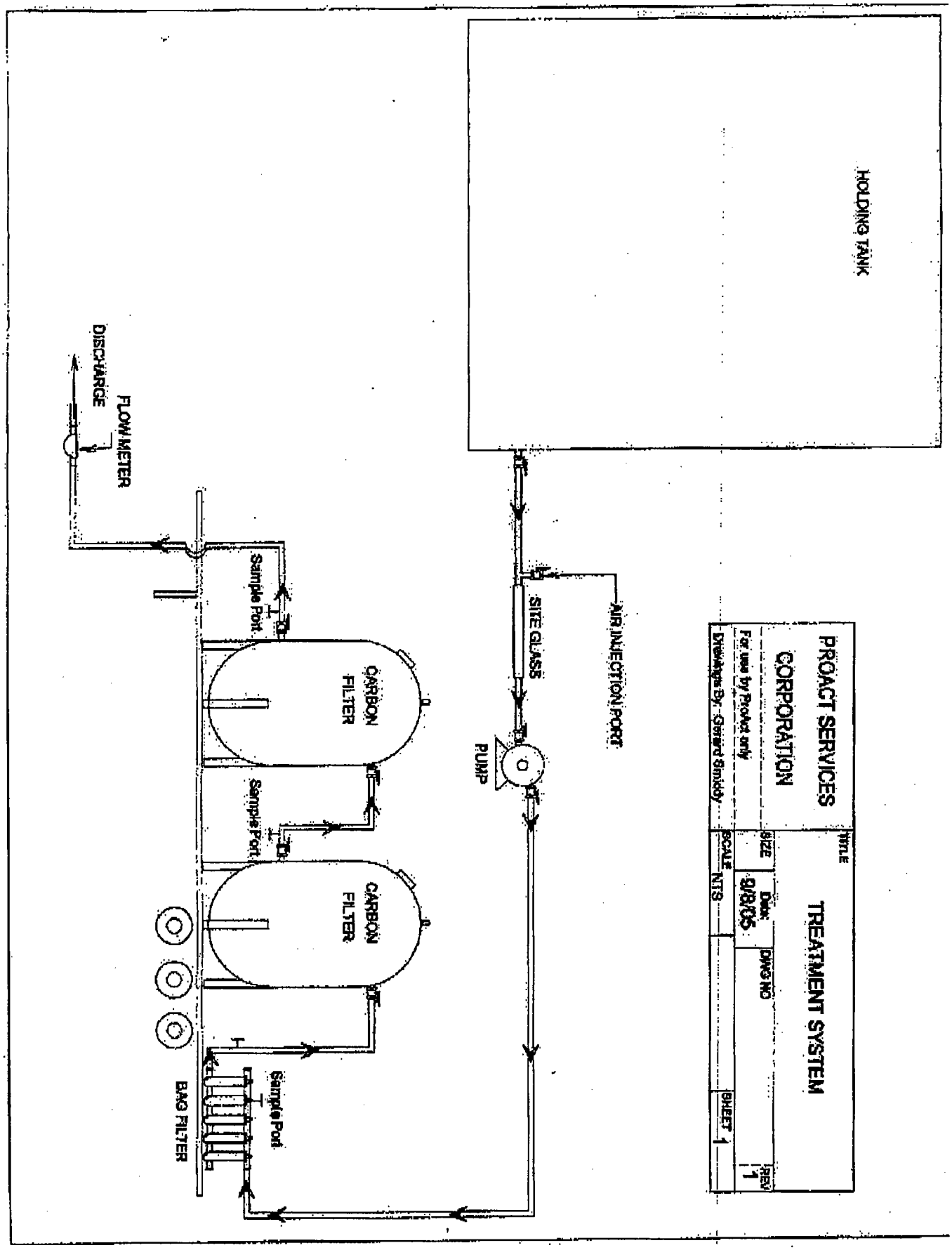
Facility/Site Name: LUDLOW TERMINAL - BUCKEYE PIPE LINE CO., LP

Operator signature: Pierce W. Wagner PIERCE W. WAGNER, CHMM

Title: ENV COORD

Date: 9/16/05


Discharge Point
Treatment System
ACCESS DRIVE
TANK 1 35,000 BBLS. JP-8
TANK 2 35,000 BBLS. FUEL OIL
RAMP
GRAPHIC SCALE
NOTES
1. SEE DRAWING L00P0008 FOR PLOT PLAN KEY PLAN
LEGEND
PIPE - ABOVE GRADE
PIPE - BELOW GRADE
"UNAPPROVED"
BUCKEYE PIPE LINE CO.


HOLDING TANK
DISCHARGE
FLOW METER
Sample Port
CARBON FILTER
Sample Port
CARBON FILTER
BAG FILTER
Sample Port
SITE GLASS
PUMP
AIR INJECTION PORT
PROACT SERVICES CORPORATION
TITLE
TREATMENT SYSTEM
For use by ProAct only
Drawings By: Gerard Smiddy
SIZE
Date: 9/8/05
DWG NO
REV 1
SCALE NTS
SHEET 1