

# Porter Ranch Community Advisory Committee

Meeting #11

Thursday, March 17, 2016  
Porter Ranch Community School

## **DRAFT NOTES**

**First Posted: 3/18/16 at 1:30pm**

**Last Updated:**

Paula Cracium, Committee Chair, called the meeting to order at 6:08pm.

### *Members Present:*

Paula Cracium  
Jarrod DeGonia  
Vivian Eckchian  
Craig Forray  
Tom Johnson  
John Lee  
Mary Melvin  
Issam Najm

### *Guest Speakers:*

Mandy Bane, LA County Department of Public Health  
Gillian Wright, SoCalGas  
Susan Trigueros, SoCalGas

Mandy Bane from the LA County Department of Health reported on the CASPER study underway in the area. They have completed the survey with a team of over 50 volunteers and completed 210 surveys. They are now working on entering the data and hoping to have results next week.

They are pursuing an extension in the relocation date through the courts.

They are seeking any information from community about symptoms and odors. Community members can call 213-738-3220 or email [mbane@ph.lacounty.gov](mailto:mbane@ph.lacounty.gov)

They have asked for assistance from US EPA that will help them get information on a correlation of symptoms and environmental conditions. They are also looking to do indoor air samples.

Paula: How long are you asking the extension to be?

Jarrold: We are going to court tomorrow. I don't know the exact number of days will be requested.

Mandy: Our position is that we need enough time to assess the situation.

Jarrold: The reports of symptoms occurring after sealing the leak makes it urgent because it is obvious that there are persistent concerns and issues.

Paula: Does county health have a timeline? People are anxious to get back home.

Mandy: We are expediting as quickly as possible because we understand the desire to get home.

Issam: We are under a state emergency declaration and County Health can't put out a schedule? What does it take to get a schedule?

Jarrold: There isn't a good answer we can give you tonight. You are tired of hearing this: but this is a unique situation and this type of testing hasn't been done on a mass scale or for these types of constituents. They really are inventing the wheel. That is why there isn't a set schedule because it hasn't been done to this extent before.

Issam: I disagree that this is monumental. If they are willing to put the resources together, they can put together a schedule. You should have a schedule for when you have your conversation with EPA.

Jarrold: Let's look at schedules in the past: We thought that when the well was fixed that symptoms would go away. Every time we have a schedule, it has been proven that the schedules weren't as expected.

Issam: I fear that this is being delayed to ensure that the legal aspect of the sampling is completely buttoned down. In the meantime, we wait. I appreciate that attorneys don't want to come up with a schedule, but I am confident that technical people can give you a schedule.

Jarrold: I appreciate that, and I will take that back.

Paula: Is there someone we can talk to or something that we can do to apply pressure to get the coordination you need? If it needs more attention? Because it is urgent from our families?

Issam: Why isn't OEHHA involved? The State/Governor has an incentive to make it move.

Mandy: We requested assistance from the US EPA's indoor air unit because they are experts at that. We are in constant communication with them. The timeline isn't a matter of coordination, it is a matter of science.

Jarrod: I actually do have an idea. Maybe the CAC should invite permanent representation from each agency on each level? EPA and DTA each have local offices. Maybe we make the request that they either become permanent representatives or that they have a permanent presence.

Paula: I feel like if there were people in hospitals it would garner more urgency but because they are in hotels there isn't urgency. We are looking for some definitive timelines.

Issam: Is there a legal component to this exercise?

Jarrod: I don't know, but I want to take it back to see if we might be being overly cautious.

Craig: What are you going to tell the judge?

Jarrod: That we need more time to do the study.

Craig: How many complaints have you gotten?

Mandy: Over 200. Some are repeats.

Craig: When did you realize you would be here presenting?

Mandy: Yesterday.

Craig: I'd like to know what the details are. You need more time to gather that information before coming to us.

Mandy: We don't have that information yet.

Craig: Won't the judge want to know these things?

Paula: What are the symptoms?

Mandy: Headache, nausea. Similar to before when the leak was happening.

Paula: We need to do a better job of letting you know who will be here so you can prepare answers to our questions.

Issam: We expect them to know a little more and it is frustrating.

Jarrold: It is massive, and what you are looking for as far as involvement and information.

Issam: We need more insight.

Craig: Attorneys have something and they have something specific and will be presented to the judge tomorrow morning. We are trying to share information with our constituents and when there isn't any information, it is a waste of our time being here.

Jarrold: There is a hearing tomorrow with a judge. I am not certain we would want to share all of that information with you right now before we share it with a judge.

Issam: I will leave the meeting today knowing nothing more than when I got here today. I should. Otherwise, why am I here?

John Lee: The 30-day extension, we have been assured by County Health that is a sufficient amount of time.

Paula: We are just frustrated with the emotional roller coaster not knowing when to move or not.

Issam: It is not complicated to analyze data and make an assessment. 210 is not a lot of entries. Now we are not only waiting for testing but also analysis. You could give us a preliminary schedule to put it in perspective for our people. It is not complicated to analyze an excel spreadsheet.

Paula: I understand. This is the most exhausting process outside of getting the leak stopped. Hopefully Jarrod will help us navigate that.

Gillian provided an update from SCG. The leak is still fixed and there are no new leaks. Tomorrow is the 18<sup>th</sup>, and they put out communication to residents so they know they won't have to leave on the 18<sup>th</sup> if it ends up being the final day. They will have the weekend to move back to their homes.

SCG is continuing to provide support in the community resource center and improving the support that the community resource representatives can provide.

Gillian answered questions from the last meeting:

As far as methane levels, they are between 2.1-2.9. These are the readings at the site, which is background level.

As far as the 18 wells similar to SS25, they are isolated from the reservoir and filled with fluid and will be part of the full inspection. They may or may not be put back into service, and SCG won't make that determination until the inspection is done.

Craig: Do you need all the wells at the same time to operate?

Gillian: It depends on what is happening in the field.

Craig: There are some fairly recent wells. Are there enough new ones to handle the need? How many do you need to operate? That would be good information to have.

Gillian: I can't answer that today, but I can take it back and find an answer. We did find out that part of the inspection process, the inner tubing is pulled out and replaced with new tubing. All the inspected wells will receive new inner tubing. None of the wells will operate again outside the tubing. These requirements are from DOGGR and we expect this to be the mode into the future.

Issam: Are you equipping them with safety valves?

Gillian: That is above my knowledge, but I will find out.

Tom: Are there valves that can go to that depth and what is the longevity?

Paula: Could you reach out to DOGGR and find out?

Gillian continued to answer a question about the use of infrared imaging to monitor the wells. SCG is using infrared images to spot check the wells on a regular basis.

There was a question about releasing natural gas during the work-over process. There is a possibility when adding fluid that a small amount could be released at that time.

Paula: We just want to understand why people keep smelling the odor. We want to know if there is a release during the work. We'd like you to keep the community abreast of when you are working on wells so we would understand what is happening.

Gillian: We would normally provide that information. Keep in mind that we also do pipeline work. We do have to release the gas in the pipes during pipeline work. We do provide that information to the call center so operators know.

Paula: It's that PTSD thing that when they smell that gas they worry what's going on. Knowing ahead of time if there is going to be a temporary release could be helpful.

Gillian answered questions about fire prevention measures at the well sites. Currently, the well pad is kept clear of vegetation, and the electrical is properly grounded. They have process in place for red flag days and have a fire fighting unit on site. There is also a helipad for emergencies.

She went on to discuss the cleaning of outdoor residue. They have had 463 requests for outdoor cleaning and completed assessments on 150. They found 19 with no oily residue, 17 with medium coverage, and 1 heavy coverage. The rest are light coverage.

Craig: What is the geographic area?

Gillian: It is all within about a mile of the Aliso Canyon Site property.

Craig: Is the heavy coverage closest to the well?

Gillian: I am not sure where it is, but I can find out. They are generally close and generally light. It isn't a distinct dispersion. Some houses next to the houses with coverage don't have anything. Walking the neighborhood, this is generally what we are seeing. Farther away they think they have, it but they don't.

We have about 20 or so requests coming in each day asking for the assessment.

Craig: Wouldn't it be on their stucco? Could they look at their windows to see if they have it?

Gillian: if it is at the same level then you would see it on your window. It is a very distinctive dot and they are dispersed.

Issam: What is the makeup of the substance?

Gillian: The lab samples from January are of this residue. They are posted on the PRCAC website.

Related to the in-home air testing: They have completed 71 homes. We did testing for methane and mercaptan with a handheld detector. Geosyntec has actually completed the testing. The mercaptans were 10-minute grab samples in Kevlar bags in the center of the home. All of the results came up non-detect except one that came up with carbon disulfide. All other levels were normal for indoor levels. We had one reading at 17 ppm, and normal levels can go up to 50 ppm. The threshold we are looking at for further evaluation was 100 ppm. We did not find any signs of gas leaks inside the homes.

Craig: Are you testing for benzene?

Gillian: No. Methane was the main marker for the gas leak. Benzene levels in the outdoor air are below what is expected in LA so there was not a reason to look at benzene inside.

Craig: Is there a situation where benzene can be in the air and be deposited?

Gillian: Everything that has been monitored is a gas and should not deposit.

Issam: In the world of absorption, organic chemicals either absorb or not. We are using carbon filters to filter the air. We cannot say that the activated carbon filter will

remove it completely. We can't say that counters can't absorb these things more than activated carbon. If you don't support it with data, it isn't worth much. From the beginning we begged that the testing not be limited to just the air. We want surfaces to be tested. I have no data to support this but I would like someone to look into it but when you run something through activated carbon, once you switch that air to zero levels, it is possible for those chemicals to leach onto the other surfaces. The idea is that passing clean air through a loaded activated carbon filter could result in leaching of the chemicals back into the air passing through the filter. We know this happens when activated carbon is used in water treatment, and I was not sure if there has been any work done to show whether or not it happens in air activated-carbon filters too. I'd like to get at least a validated answer.

Gillian: There has never been an elevated benzene level.

Issam: In the past, there was definitely benzene detected.

Gillian: The levels were only ever at background.

Issam: The record is there that they have been elevated. Maybe things are fine but maybe things are leeching off now. It would be good to understand it.

Gillian: The Air Resources Board tested filters and suggesting replacing the filters.

Paula: The data, from UCLA, isn't clear about how the data is being collected. The saturation of even the low levels is a concern.

Issam: This situation has not happened before. It may not be an issue but the only way to know the answer is to get the data.

Gillian: It is a good idea to get information to understand how the filters work. We are all trying to get answers. We are pushing to get testing done because of this extended period of questions without answers.

Paula: How many people are still outside their homes?

Gillian: 5100 households are still outside their homes. 1900 in temporary housing. The rest are in hotels and with friends and family.

Paula: There isn't an image of people being homeless but they are being drastically impacted.

John Lee: With the initial spray, is there any chance of this being sprayed into the air? Are there any tests to see if people inhaled any of this spray? Are there any studies of the dangers of when that happened?

Gillian: It was coming from the well site and we had workers safety agencies at the site. They aren't microscopic and were not deemed to be hazardous to work in every day.

Paula: Do you have anything on that, Mandy?

Jarrod: Dr. Rangan put something out on that, and I will find it.

Tom: Is your greatest demand on natural gas in summer?

Gillian: No, winter is the time of greatest demand.

Tom: What are the limitations on the reservoir going to do to capacity?

Gillian: Our highest demand is in the winter. We do have peak days in summer on high electric use days. The biggest issue will be the availability of gas in storage. 15 billion cubic feet is the limit we have right now and it's not much. There will be a big conservation campaign encouraging people to reduce their use.

Tom: With the current limitations, is there any anticipated rolling blackout?

Gillian: You'd need more data to answer that question depending on how hot it gets and when we can start injecting. September and October are our hottest days. I think it will be tight. A blackout will be if there weren't a lot of flexibility. We are looking at how we can provide capacity. That's definitely a focus of the agencies.

Tom: With new regulations, I imagine there will be additional safety measures. How will these costs be passed on?

Gillian: It's early to say. Depending on the nature of the new regulations, those would be recovery costs we would file with the PUC to see if we can recover.

Tom: When we talked about the valve, we would want a valve where it is serviceable.

Gillian: Maintenance will be part of the equation.

Tom: The health impact study, you agreed to with the settlement.

John Bwarie: There was some transitions at AQMD. They are still in transition, so they are juggling many things and will give us an update when they have something.

Tom: During the settlement discussions, it was discussed that it would be 3-4 months.

Gillian: the study hasn't begun and it takes 6 months to gather. I will ask the experts to verify.

Tom: Who is doing the data collection?

Gillian: I am not sure. The agencies are collecting the air data.

Tom: There was discussion about it interacting with water and carpeting. I think the health study would be able to give an individual summary so we could get a peace of mind. We want to know if we will have any residual effects. What are the impacts to me and my family? I will be asking that in every meeting.

Gillian: I am sorry because AQMD is running it I don't have a lot to offer.

Tom: Who do we have from AQMD to let them know this study is important?

Jarrod: We will check to make sure data is being collected. I know the health assessment is part of that long-term assessment.

Paula: We will try to get all of the people overseeing the testing in one room. As well as those involved in the ongoing health study.

Issam: Our county supervisor is on the AQMD board. Do we have his commitment to push this study forward?

Jarrold: Yes and part of the reason for the transition was because the supervisor wasn't certain there was a commitment before.

Issam: We all know you have a planned investigation on the leak. Do you have an update?

Gillian: The investigation is going on through DOGGR and CPUC. Blade is the third party investigator. They have been doing work collecting evidence on the surface. Then they will go to remediation.

Issam: Have they given you any preliminary schedule?

Gillian: I don't have one.

Issam: Can you get that and share it with us?

Gillian: I will get the information that I can give you about the timeframe.

Craig: Bernson park is closed off.

John Lee: County Health went out and didn't see anything but we sent out City Staff and we still detected residue spots. We closed down the site and sent to our contractor and hoping to get results back tomorrow. As soon as we detected the oily residue, we asked SCG to do a complete wipe-down of all parks and playgrounds. They went out and completely cleaned it. The residue is no longer present but we are looking for the test results before letting people back.

Gillian: We did complete the cleanup of the public parks and the private playgrounds. We also reached out to the preschools to ensure assessment and cleanup. We appreciate the assistance in getting access.

Jarrold: There were emails and calls to the office but could you talk about spraying?

Paula: A resident was not feeling well after spraying.

Susan: We are trying to cut back the green area. We are using a spray to kill the grass. It is for weed abatement.

Paula: HONCHO is the substance. If residents had a concern, they called AQMD. Is there another way to do it?

Susan: We have done it every year for the past several years.

Issam: It doesn't have to be chemical. It is removal.

Susan: We can go back and look at why we do this process.

Issam: This is a special circumstance, and the way you did it in the past might not be a good idea.

Craig: Can we have a field trip to the well site some time?

Gillian: Let me look into that. Jarrod has been there, and safety is the biggest issue. We'd have to look at a time that would provide safe access. This body has a reason to make the request.

Paula: Clarification, 5100 households are still out. Not people.

John Bwarie discussed the next update.

John Lee: We reached out to UCLA regarding the tests in the homes and waiting on those results.

Tom: As far as the safety of the mountain as a whole. Will this be a part of the report?

Paula: I think that is a whole different agency.

Tom: Neighbors are concerned that there could be an explosion. They also want to know what the impacts have been on their home value.

John B: The county assessor came in to provide that information.

Jarrod: They should have a report in April. The assessor has been doing outreach based on request if people would like an individual assessment. The big community one is the market value report.

Issam: There is a new bill going through Senate scheduled for March 29<sup>th</sup>. I am interested in continuing to hear from DOGGR to how these are being taken to their agencies as they update their requirements.

John B: It's been so long, its time to have all the agencies come back again. We are thinking about going to a meeting two weeks from now. You let me know whom you would like to hear from.

Dusty Russell, Senator Pavley's Office.: The SB887 deals with health and safety regulations regarding natural gas wells. The bill will go to committee on Marh 29. SB380 went to the senate and in its last stop for appropriations in the assembly.

Issam: The way legislative agendas work, barring someone holding it back, how long does it take to go through to the Governor's Office.

Rosalva: SB380 is an urgency bill and it will go immediately into effect upon the governor's signature. It requires 2/3 votes. SB887 and 888 will go through the normal process by the end of April if there isn't a price tag on them. We are looking at July-August and will go into law in January.

Issam: Because it isn't an urgency bill so it should be easier?

Rosalva: We don't look at it that way. The bills all have their own challenges.

Craig: Are there price-tag issues?

Rosalva: We haven't heard. It is being ironed out in public utility committees.

Craig: Does 380 require California to pay more?

Rosalva: Not that we are aware of but the appropriations committee looks at that.

John B: The proposal is that we meet on the 31<sup>st</sup>. We need to have your questions to people by early next week.

Paula: I think the most important information is the home health study.

John B: We also talked about having conference calls for quick updates.

Issam: I offer our GoTo Meeting platform if need be.

Paula: AQMD study—when is that going to be underway?

Jarrold: That wasn't an individual health assessment?

Paula: Wasn't that to evaluate specific people to follow their path? That part of the study should be more on the fast track than it is.

Issam: That probably hasn't happened because there would be a plan.

John B: I'll work with Jarrold to make sure we get the right information from AQMD.

Tom: I'd like an update from LAUSD.

Vivian: Our general superintendent has asked that both schools make a recommendation. The date has not been determined. We are waiting for the response. I asked our director of nursing services to answer your questions.

Tricia from LAUSD Nursing Services explained that they have gathered data about the student visits to the nurses station. They have monitored the symptoms that were similar to those associated with the leak. They have seen a decrease in reports of symptoms. The other schools have not seen an increase.

Tom: Over the course of the event, did they see a spike in nurse visits?

Tricia: The average number of visits has been the same. When a student would complain about a headache, we would get a response from the parent about if it was normal for that student. When we look at that data, there is no significant difference.

Vivian: There wasn't an historic data available.

Tricia: We have monitored right before the leak, during and after the leak. With the relocation of the two schools, it did decrease the visits when students were relocated. Since the capping, the visits have not changed.

Vivian: I have looked at individual scenarios, and the instances did not increase when looking at the 17 schools.

John Bwarie reviewed action items for next meeting.

Tom: Was there resolution to the high gas bills?

John Lee: We put in the resolution to the CPUC. We haven't gotten anything back from them.

Issam: There are two numbers on that bill. We can see from our own bills if the rate has gone up. We can look at our own meters to see if it has been read correctly. If the unit price hasn't changed I don't know where you can go.

John Lee: Billing cycles are also different.

The meeting was adjourned at 7:58pm.