

**OKLAHOMA CORPORATION COMMISSION – PETROLEUM STORAGE TANK DIVISION**  
**P. O. Box 171, Oklahoma City, OK 73101**  
**(405) 521-4683**

Year \_\_\_\_\_ **INVENTORY RECONCILIATION RELEASE DETECTION**

Cycle Start Date \_\_\_\_\_ Cycle End Date \_\_\_\_\_

**FACILITY I. D. NUMBER** \_\_\_\_\_ **FACILITY NAME** \_\_\_\_\_ **TANK #** \_\_\_\_\_ **FUEL TYPE** \_\_\_\_\_  
 \_\_\_\_\_ 0.2 Gal Per Hour Tank Test, CSLD, SCALD, via ATG every 30 days **WATER CHECK DATE** \_\_\_\_\_ **INCHES** \_\_\_\_\_

Date	(1) Start Stick Inventory (Gallons)	(2) Gallons Delivered	(3) Gallons Pumped <small>(Add percent sold through blend pump if applicable.)</small>	(4) Book Inventory (Gallons)	Ending Stick Inventory		(7) Daily Over (+) Or Short (-) (End – Book)	Initials
					(5) (Inches)	(6) (Gallons)		
<b>NOTE:</b>		Column numbers (1) + (2) -- (3) = (4)			Column numbers (6) -- (4) = (7)			
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(8) TOTAL GALLONS PUMPED →

(9) TOTAL GALLONS OVER OR SHORT →

Drop last 2 whole numbers from TOTAL GALLONS PUMPED and enter number on the line below ↓

LEAK CHECK: \_\_\_\_\_

+130 gallons =

Compare these numbers (9 & 10) ↓

\_\_\_\_\_ gallons (10)

**IF TOTAL GALLONS OVER/SHORT (#9) IS LARGER THAN LEAK CHECK + 130 (#10) FOR 2 CONSECUTIVE 30-DAY PERIODS REPORT TO OKLAHOMA CORPORATION COMMISSION WITHIN 24 HOURS**  
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