

South Dakota Spill Report Form

PRCF #:

Case #: 2026.002

Reported (MM/DD/YY): 1/7/26		Time:		Recorded By: JS	
A. REPORTER	Reported By: OEM Duty Officer				
	Organization Name:			<input type="checkbox"/> Discharger <input type="checkbox"/> Public <input type="checkbox"/> State <input type="checkbox"/> Local <input type="checkbox"/> Federal	
	Phone:		Email:		
	Address:				
	City:		State:	Zip:	
B. DISCHARGER (Responsible Party)	Name: POET-Colin May <input type="checkbox"/> As Above in A				
	Address: 40509 247th Street				
	City: Mitchell		State: SD	Zip: 57301	
	Phone:		Email:		
C. INCIDENT DATE & LOCATION	Spill Date: (MM/DD/YY) 1/7/26 <input type="checkbox"/> As Above in B		Spill Time:		
	Street or Approx. Location: 40509 247th Street				
	Survey Description:				
	City: Mitchell		County: Davison	State: SD	Zip: 57301
D. MATERIAL	Material type (Code/Name): <input type="checkbox"/> Hazardous Substance <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Other <input type="checkbox"/> Material Unknown		Quantity Spilled	Spilled in Water	Units (Check one)
	Clean-In-Place Solution		150		<input type="checkbox"/> lb. <input type="checkbox"/> bbl. <input checked="" type="checkbox"/> gal. <input type="checkbox"/> oth.
					<input type="checkbox"/> lb. <input type="checkbox"/> bbl. <input type="checkbox"/> gal. <input type="checkbox"/> oth.
					<input type="checkbox"/> lb. <input type="checkbox"/> bbl. <input type="checkbox"/> gal. <input type="checkbox"/> oth.
E. SOURCE	Source of Spill: <input type="checkbox"/> AST <input type="checkbox"/> UST <input type="checkbox"/> Railway <input type="checkbox"/> Transport <input checked="" type="checkbox"/> Fixed Facility <input type="checkbox"/> Pipeline <input type="checkbox"/> Highway <input type="checkbox"/> Other				
	Description: Regulated Tank Facility: <input type="checkbox"/> Tank Facility ID #:				
F. MEDIUM	Medium Affected: <input type="checkbox"/> Air <input checked="" type="checkbox"/> Land <input type="checkbox"/> Water <input type="checkbox"/> Groundwater <input type="checkbox"/> Within Facilities Only				
	Waterway Affected: n/a				
G. CAUSE	Reported Cause: <input type="checkbox"/> Transportation Accident <input type="checkbox"/> Operational Error <input type="checkbox"/> Dumping <input type="checkbox"/> Equipment Failure <input type="checkbox"/> Natural Phenomenon <input type="checkbox"/> Unknown <input type="checkbox"/> Other				
	Description:				
H. DAM-AGES	# of Injuries: 0		# of Fatalities: 0		
	Response Action Taken: Absorbent pads placed, gravel and pads scraped up and put in dumpster for disposal				
K. NOTIFIED	Responding Agency: <input checked="" type="checkbox"/> DANR <input type="checkbox"/> Local <input type="checkbox"/> Discharger <input type="checkbox"/> Federal <input type="checkbox"/> EPA <input type="checkbox"/> Other				
	Agencies Notified: DANR				
K. COMMENTS	Comments:				

Department of Agriculture and Natural Resources
 Inspection, Compliance, and Remediation Program
 523 East Capitol Avenue
 Pierre, South Dakota 57501

Business Hours M – F 8:00-5:00 pm
 Normal Business Hours- (605)773-3296
 After Business Hours- (605) 773-3231



**DEPARTMENT of AGRICULTURE
and NATURAL RESOURCES**

JOE FOSS BUILDING
523 E CAPITOL AVE
PIERRE SD 57501-3182
danr.sd.gov

January 8, 2026

Colin May
POET Biorefining
40509 247th Street
Mitchell, SD 57301

Subject: Department of Agriculture and Natural Resources File # 2026.002: to a release of 5% caustic Clean-In-Place (CIP) Solution at the POET Biorefining facility in Mitchell SD.

Dear Mr. May:

The Department of Agriculture and Natural Resources (DANR) is contacting you regarding the event noted above. A copy of the initial spill report form is enclosed for your review. Based upon the information provided, an estimated 150 gallons of 5% caustic CIP Solution were released at POET's Mitchell facility. Procedures for the assessment and cleanup of spills such as this were developed to protect surface and groundwater resources. In this situation, DANR requires the following (We understand some of these steps may already be completed):

- Scrape up contaminated gravel and dispose at a permitted solid waste landfill;
- Provide this office with post cleanup photographs and disposal receipts;
- By February 8, 2026, please complete and return the attached Written Contamination Incident Follow Up Report form. Include a description of cleanup and waste management or disposal activities.

Jamison Smith has been assigned as the project manager for this case. He will review the information provided and contact you if further remedial action is necessary. If you have any questions or need additional information, please do not hesitate to contact him at 605.773.3296. Thank you for your cooperation and assistance.

Sincerely,

Trish Kindt
Inspections, Compliance, & Remediation Program
(605) 773-3296

cc Karen Wegleitner, Davison County EM