



U.S. Department of Transportation
Research and Special Programs Administration

Hazardous Materials Incident Report

Form Approval OMB No. 3137-0039

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 2137-0039. The filling out of this information is mandatory and will take 96 minutes to complete.

INSTRUCTIONS

Submit this report to the Information Systems Manager, U.S. Department of Transportation, Pipeline and Hazardous Materials Safety Administration, Office of Hazardous Materials Safety, DHM-63, Washington, D.C. 20590-0001. If space provided for any item is inadequate, use a separate sheet of paper, identifying the entry number being completed. Copies of this form and instructions can be obtained from the Office of Hazardous Materials Website at <http://hazmat.dot.gov>. If you have any questions, you can contact the Hazardous Materials Information Center at 1-800-HMR-4922 (1-800-467-4922) or online at <http://hazmat.dot.gov>.

PART I - REPORT TYPE

1. Incident Id: E-2025090283
2. This is to report: A

PART II - GENERAL INCIDENT INFORMATION

3. Date of Incident: 08/15/2025
4. Time of Incident (use 24-hour time): 14:10

5. Enter National Response Center Report Number (if applicable): 1439986
6. If you submitted a report to another Federal DOT agency, enter the agency and report number:

7. Location of Incident:
City: REESEVILLE
County: DODGE
State: WI
Zip Code: (if known): 53579
Street Address/Mile Marker/Yard Name/Airport/Body of Water/River Mile:
W9425 Danville Rd

8. Mode of Transportation: Rail
9. Transportation Phase: In Transit

10. Carrier/Reporter:
Name: SOO LINE RAILROAD COMPANY
Street: 120 S 6TH ST STE 900
City: MINNEAPOLIS
State: MN
Zip Code: 55402-1812
Federal DOT Id Number: 108106
Hazmat Registration Number: 060325550303HJ

11. Shipper/Offoror:
Name: PBF Holding Company LLC
Street: 4550 Wrangle Hill Rd
City: Delaware City
State: DE
Zip Code: 19706
Waybill/Shipping Paper: 473891
Hazmat Registration Number:

12. Origin (if different from shipper address)
Street: 423051 Rg Rd 92
City: Hardisty, AB
State: ZZ
Zip Code: T0B 1V0

13. Destination:
Street: 4550 WRANGLE HILL RD
City: DELAWARE CITY
State: DE
Zip Code: 19706

14. Proper Shipping Name of Hazardous Material: PETROLEUM CRUDE OIL
15. Technical/Trade Name:
16. Hazardous Class/Division: Flammable - Combustible Liquid
17. Identification Number: (E.g. UN2764, NA 2020) UN1267

PART IV – CONSEQUENCES

30. Result of Incident (check all that apply):

- Spillage: True
- Explosion: True
- Vapor (Gas) Dispersion: True
- No Release: False
- Fire: True
- Material Entered Waterway/Storm Sewer: True
- Environmental Damage: True

31. Emergency Response: The following entities responded to the incident: (Check all that apply)

- Fire/EMS Report #: True N/A
- Police Report #: True
- In-house cleanup: True
- Other Cleanup: True

32. Damages Was the total damage cost more than \$500? True

- If yes, enter the following information: (If no, go to question 33.)
- Material Loss: \$ 0.00
 - Carrier Damage: \$ 0.00
 - Property Damage: \$ 0.00
 - Response Cost: \$ 5,000,000.00
 - Remediation/Cleanup Cost: \$ 5,500,000.00
- (See damage definitions in the instructions)*

33a. Did the hazardous material cause or contribute to a human fatality? False

- If yes, enter the number of fatalities resulting from the hazardous material:
- Employees: 0
 - Responders: 0
 - General Public: 0

33b. Were there human fatalities that did not result from the hazardous material? False

If yes, how many?

34. Did the hazardous material cause or contribute to personal injury? False

If yes, enter the number of injuries resulting from the hazardous material:

Hospitalized (Admitted Only):

- Employees: 0
- Responders: 0
- General Public: 0

Non-Hospitalized:

(e.g.: On site first aid or Emergency Room observation and release)

- Employees: 0
- Responders: 0
- General Public: 0

35. Did the hazardous material cause or contribute to an evacuation? False

If yes, provide the following information:

- Total number of general public evacuated: 0
- Total number of employees evacuated: 0
- Total evacuated: 0
- Duration of the evacuation: 0

36. Was a major transportation artery or facility closed? False

If yes, how many?

37. Was the material involved in a crash or derailment? True

If yes, provide the following information:

- Estimated speed (mph): 35
- Weather conditions: 87 F
- Vehicle overturned? True
- Vehicle left roadway/track? True

PART V - AIR INCIDENT INFORMATION (please refer to S 175.31 to report a discrepancy for air shipments)

38. Was the shipment on a passenger aircraft?

If yes, was it tendered as cargo, or as passenger baggage?

39. Where did the incident occur (if unknown, check the appropriate box for the location where the incident was discovered)?

40. What phase(s) had the shipment already undergone prior to the incident? (Check all that apply)

- Shipment had not been transported
- Transported by air (first flight)
- Transport by air (subsequent flights)
- Initial transport by highway to cargo facility
- Transfer at sort center/cargo facility

PART VI - DESCRIPTION OF EVENTS & PACKAGE FAILURE

- Describe the sequence of events that led to the incident and the actions taken at the time it was discovered. Describe the package failure, including the size and location of holes, cracks, etc. Photographs and diagrams should be submitted if needed for clarification. Estimate the duration of the release, if possible. Describe what was done to mitigate the effects of the release. Continue on additional sheets if necessary.

Describe:

On 8/15/2025 at 2:10 PM Central, a Canadian Pacific Kansas City Railroad (CPKC) unit train of loaded Petroleum Crude Oil derailed on the CPKC mainline at MP 141.66 of the Watertown Subdivision in Reeseville, WI. Twenty three cars derailed. Of these cars, four released hazardous materials as follows:

GBRX 706564 - derailed upright with the B-end buried in mud. The tank shell was punctured close to the top and middle of the tank car, on the right side, B-end. Resulting release was estimated at 750 gallons.

GBRX 706556 - derailed upright & underneath another tank car. The tank head was punctured close to the Brake handle on the B-end. Resulting release was estimated at 750 gallons.

GBRX 706217 - derailed on its right side, with the top of the tank car at roughly 3:00. The release occurred from the manway, where 3 of 8 manway bolts were less than tool tight. Resulting release was estimated at 5 gallons.

GBRX 706163 - derailed on its right side, with the top of the tank car at roughly 3:00. The release occurred from the manway, where 4 of 8 manway bolts were less than tool tight. Resulting release was estimated at 5 gallons.

The final car that requires a 5800 report is GBRX 706067, which was identified as leaking during the NTSB investigation. GBRX 706067 derailed on its right side, with the top of the tank car at roughly 3:00. The release occurred from the manway, where 1 of 8 manway bolts were less than tool tight. Resulting release was estimated at 0.016 gallons.

After uprighting the tank cars, the remaining lading was transferred into tank trucks and the empty tank cars were purged and cleaned. Post-response and remediation work is on-going as of the time of this filing.

Cost information is estimated and reported for the Response and Environmental Cleanup for the entire derailment (it is not feasible to separate the costs directly related to the four tank cars found in this report). Other costs are unknown at this time.

File Note: The quantity released was estimated based on the best information available at the time of filing. The shipment was offered as a 'bulk' shipment, aka one car load, therefore the exact amount offered in this package is not known to the carrier. This carrier does not have access to mass balance data which can exactly quantify this value.

PART VII - RECOMMENDATIONS/ACTIONS TAKEN TO PREVENT RECURRENCE

- Where you are able to do so, suggest or describe changes (such as additional training, use of better packaging, or improved operating procedures) to help prevent recurrence. Provide recommendations for improvement to hazardous materials transportation beyond the control of your individual company. Continue on additional sheets if necessary.

Describe:

This incident is currently under investigation - no root cause has been determined.

PART VIII - CONTACT INFORMATION

Contact's Name:	Tony Houdyshell
Contact's Title:	Mgr Emergency & Hazmat
Business Name and Address:	SOO LINE RAILROAD COMPANY 120 S 6TH ST STE 900 MINNEAPOLIS MN 55402-1812
E-mail Address:	tony.houdyshell@cpkcr.com
Telephone Number:	414-208-8546
Fax Number:	
Hazmat Registration Number:	060325550303HJ
Date:	09/12/2025
Preparer is:	Carrier



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PART I - REPORT TYPE

1. **Incident Id:** E-2025090283
2. **This is to report:** A

PART II - GENERAL INCIDENT INFORMATION

<p>3. Date of Incident: 08/15/2025</p> <p>5. Enter National Response Center Report Number (if applicable): 1439986</p> <p>7. Location of Incident: City: REESEVILLE County: DODGE State: WI Zip Code: (if known): 53579 Street Address/Mile Marker/Yard Name/Airport/Body of Water/River Mile: W9425 Danville Rd</p> <p>8. Mode of Transportation: Rail</p> <p>9. Transportation Phase: In Transit</p> <p>10. Carrier/Reporter: Name: SOO LINE RAILROAD COMPANY Street: 120 S 6TH ST STE 900 City: MINNEAPOLIS State: MN Zip Code: 55402-1812 Federal DOT Id Number: 108106</p> <p>11. Shipper/Offeror: Name: PBF Holding Company LLC Street: 4550 Wrangle Hill Rd City: Delaware City State: DE Zip Code: 19706 Waybill/Shipping Paper: 473891</p> <p>12. Origin (if different from shipper address) Street: 423051 Rg Rd 92 City: Hardisty, AB State: ZZ Zip Code: T0B 1V0</p> <p>13. Destination: Street: 4550 WRANGLE HILL RD City: DELAWARE CITY State: DE Zip Code: 19706</p> <p>14. Proper Shipping Name of Hazardous Material: PETROLEUM CRUDE OIL</p> <p>15. Technical/Trade Name:</p> <p>16. Hazardous Class/Division: Flammable - Combustible Liquid</p> <p>17. Identification Number: (E.g. UN2764, NA 2020) UN1267</p>	<p>4. Time of Incident (use 24-hour time): 14:10</p> <p>6. If you submitted a report to another Federal DOT agency, enter the agency and report number:</p> <p>Hazmat Registration Number: 060325550303HJ</p> <p>Hazmat Registration Number:</p>
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- 18. Packing Group:** (if applicable) II
- 19. Quantity Released:** (Include Measurement Units) 750 Liquid - Gallon
- 20. Was the material shipped as a hazardous waste?** False
If yes, provide the EPA Manifest Number:
- 21. Is this a Toxic by Inhalation (TIH) material?** False
If yes, provide the Hazard Zone:
- 22. Was the material shipped under an Exemption, Approval, or Competent Authority Certificate?** False
If yes, provide the Exemption, Approval, or CA number:
- 23. Was this an undeclared hazardous materials shipment?** False

PART III - PACKAGING INFORMATION

- 24. Check Packaging Type (check only one - if more than one, list type of packaging, copy Part III, and complete for each type:**
Tank Car
- 25. See instructions and enter the appropriate failure codes found at the end of the instructions. Be sure to enter the codes from the list that corresponds to the particular packaging type checked above. Enter the number of codes as appropriate to describe the incident.**
Enter the most important failure point in line 1. If there are more than two failure points, provide in this format in part VI.
- What Failed: - 149-Tank Head
How Failed: - 309-Punctured
Causes of Failure: - Derailment
- 26a. Provide the packaging identification markings, if available.**
Identification Markings: 117J100W
(Examples: 1A1/Y1.4/150/92/USA/RB/93/RL, UN31H1/Y0493/USA/M9339/10800/1200, DOT - 105A - 100W (RAIL), DOT 406 (HIGHWAY), DOT 51, DOT 3-A)
- 26b. For Non-bulk, IBC, or non-specification packaging, if identification markings are incomplete or unavailable, see instructions and complete the following:**

Single Package or Outer Packaging:	Single Package or Inner Packaging (if any):
Packaging Type: Material of Construction: Head Type (Drums only):	Packaging Type: Material of Construction:

27. Describe the package capacity and the quantity:

Single Package or Outer Packaging:	Single Package or Inner Packaging (if any):
Package Capacity: 29080 Liquid - Gallon Amount in Package: Number in Shipment: 1 Number Failed: 1	Package Capacity: Amount in Package: Number in Shipment: Number Failed:

28. Provide packaging construction and test information, as appropriate:

Manufacturer:	GBRX 706556	Manufacture Date:
Serial Number:		Last Test Date:
Material of Construction:	(if Tank Car, CTMV, Portable Tank, or Cylinder)	
Design Pressure:	(if Tank Car, CTMV, Portable Tank)	
Shell Thickness:	(if Tank Car, CTMV, Portable Tank)	
Head Thickness:	(if Tank Car, CTMV)	
Service Pressure:	(if Cylinder)	
If valve or device failed:		
Type:		
Model:		
Manufacturer:		

29. If the packaging is for Radioactive Materials, complete the following:

Packaging Category:	
Packaging Certification:	
Certification Number:	
Nuclide(s) Present:	Transport Index:
Activity:	
Critical Safety Index:	

PART IV – CONSEQUENCES

30. Result of Incident (check all that apply):

- Spillage: True
- Explosion: True
- Vapor (Gas) Dispersion: True
- No Release: False
- Fire: True
- Material Entered Waterway/Storm Sewer: True
- Environmental Damage: True

31. Emergency Response: The following entities responded to the incident: (Check all that apply)

- Fire/EMS Report #: True N/A
- Police Report #: True
- In-house cleanup: True
- Other Cleanup: True

32. Damages Was the total damage cost more than \$500? True

- If yes, enter the following information: (If no, go to question 33.)
- Material Loss: \$ 0.00
 - Carrier Damage: \$ 0.00
 - Property Damage: \$ 0.00
 - Response Cost: \$ 5,000,000.00
 - Remediation/Cleanup Cost: \$ 5,500,000.00
- (See damage definitions in the instructions)*

33a. Did the hazardous material cause or contribute to a human fatality? False

- If yes, enter the number of fatalities resulting from the hazardous material:
- Employees: 0
 - Responders: 0
 - General Public: 0

33b. Were there human fatalities that did not result from the hazardous material? False

If yes, how many?

34. Did the hazardous material cause or contribute to personal injury? False

If yes, enter the number of injuries resulting from the hazardous material:

Hospitalized (Admitted Only):

- Employees: 0
- Responders: 0
- General Public: 0

Non-Hospitalized:

(e.g.: On site first aid or Emergency Room observation and release)

- Employees: 0
- Responders: 0
- General Public: 0

35. Did the hazardous material cause or contribute to an evacuation? False

If yes, provide the following information:

- Total number of general public evacuated: 0
- Total number of employees evacuated: 0
- Total evacuated: 0
- Duration of the evacuation: 0

36. Was a major transportation artery or facility closed? False

If yes, how many?

37. Was the material involved in a crash or derailment? True

If yes, provide the following information:

- Estimated speed (mph): 35
- Weather conditions: 87 F
- Vehicle overturned? True
- Vehicle left roadway/track? True

PART V - AIR INCIDENT INFORMATION (please refer to S 175.31 to report a discrepancy for air shipments)

38. Was the shipment on a passenger aircraft?

If yes, was it tendered as cargo, or as passenger baggage?

39. Where did the incident occur (if unknown, check the appropriate box for the location where the incident was discovered)?

40. What phase(s) had the shipment already undergone prior to the incident? (Check all that apply)

- Shipment had not been transported
- Transported by air (first flight)
- Transport by air (subsequent flights)
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PART VI - DESCRIPTION OF EVENTS & PACKAGE FAILURE

- Describe the sequence of events that led to the incident and the actions taken at the time it was discovered. Describe the package failure, including the size and location of holes, cracks, etc. Photographs and diagrams should be submitted if needed for clarification. Estimate the duration of the release, if possible. Describe what was done to mitigate the effects of the release. Continue on additional sheets if necessary.

Describe:

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GBRX 706564 - derailed upright with the B-end buried in mud. The tank shell was punctured close to the top and middle of the tank car, on the right side, B-end. Resulting release was estimated at 750 gallons.

GBRX 706556 - derailed upright & underneath another tank car. The tank head was punctured close to the Brake handle on the B-end. Resulting release was estimated at 750 gallons.

GBRX 706217 - derailed on its right side, with the top of the tank car at roughly 3:00. The release occurred from the manway, where 3 of 8 manway bolts were less than tool tight. Resulting release was estimated at 5 gallons.

GBRX 706163 - derailed on its right side, with the top of the tank car at roughly 3:00. The release occurred from the manway, where 4 of 8 manway bolts were less than tool tight. Resulting release was estimated at 5 gallons.

The final car that requires a 5800 report is GBRX 706067, which was identified as leaking during the NTSB investigation. GBRX 706067 derailed on its right side, with the top of the tank car at roughly 3:00. The release occurred from the manway, where 1 of 8 manway bolts were less than tool tight. Resulting release was estimated at 0.016 gallons.

After uprighting the tank cars, the remaining lading was transferred into tank trucks and the empty tank cars were purged and cleaned. Post-response and remediation work is on-going as of the time of this filing.

Cost information is estimated and reported for the Response and Environmental Cleanup for the entire derailment (it is not feasible to separate the costs directly related to the four tank cars found in this report). Other costs are unknown at this time.

File Note: The quantity released was estimated based on the best information available at the time of filing. The shipment was offered as a 'bulk' shipment, aka one car load, therefore the exact amount offered in this package is not known to the carrier. This carrier does not have access to mass balance data which can exactly quantify this value.

PART VII - RECOMMENDATIONS/ACTIONS TAKEN TO PREVENT RECURRENCE

- Where you are able to do so, suggest or describe changes (such as additional training, use of better packaging, or improved operating procedures) to help prevent recurrence. Provide recommendations for improvement to hazardous materials transportation beyond the control of your individual company. Continue on additional sheets if necessary.

Describe:

This incident is currently under investigation - no root cause has been determined.

PART VIII - CONTACT INFORMATION

Contact's Name:	Tony Houdyshell
Contact's Title:	Mgr Emergency & Hazmat
Business Name and Address:	SOO LINE RAILROAD COMPANY 120 S 6TH ST STE 900 MINNEAPOLIS MN 55402-1812
E-mail Address:	tony.houdyshell@cpkcr.com
Telephone Number:	414-208-8546
Fax Number:	
Hazmat Registration Number:	060325550303HJ
Date:	09/12/2025
Preparer is:	Carrier



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1. **Incident Id:** E-2025090283
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PART II - GENERAL INCIDENT INFORMATION

<p>3. Date of Incident: 08/15/2025</p> <p>5. Enter National Response Center Report Number (if applicable): 1439986</p> <p>7. Location of Incident: City: REESEVILLE County: DODGE State: WI Zip Code: (if known): 53579 Street Address/Mile Marker/Yard Name/Airport/Body of Water/River Mile: W9425 Danville Rd</p> <p>8. Mode of Transportation: Rail</p> <p>9. Transportation Phase: In Transit</p> <p>10. Carrier/Reporter: Name: SOO LINE RAILROAD COMPANY Street: 120 S 6TH ST STE 900 City: MINNEAPOLIS State: MN Zip Code: 55402-1812 Federal DOT Id Number: 108106</p> <p>11. Shipper/Offeror: Name: PBF Holding Company LLC Street: 4550 Wrangle Hill Rd City: Delaware City State: DE Zip Code: 19706 Waybill/Shipping Paper: 473891</p> <p>12. Origin (if different from shipper address) Street: 423051 Rg Rd 92 City: Hardisty, AB State: ZZ Zip Code: T0B 1V0</p> <p>13. Destination: Street: 4550 WRANGLE HILL RD City: DELAWARE CITY State: DE Zip Code: 19706</p> <p>14. Proper Shipping Name of Hazardous Material: PETROLEUM CRUDE OIL</p> <p>15. Technical/Trade Name:</p> <p>16. Hazardous Class/Division: Flammable - Combustible Liquid</p> <p>17. Identification Number: (E.g. UN2764, NA 2020) UN1267</p>	<p>4. Time of Incident (use 24-hour time): 14:10</p> <p>6. If you submitted a report to another Federal DOT agency, enter the agency and report number:</p> <p>Hazmat Registration Number: 060325550303HJ</p> <p>Hazmat Registration Number:</p>
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- 18. Packing Group:** (if applicable) II
- 19. Quantity Released:** (Include Measurement Units) 5 Liquid - Gallon
- 20. Was the material shipped as a hazardous waste?** False
If yes, provide the EPA Manifest Number:
- 21. Is this a Toxic by Inhalation (TIH) material?** False
If yes, provide the Hazard Zone:
- 22. Was the material shipped under an Exemption, Approval, or Competent Authority Certificate?** False
If yes, provide the Exemption, Approval, or CA number:
- 23. Was this an undeclared hazardous materials shipment?** False

PART III - PACKAGING INFORMATION

- 24. Check Packaging Type (check only one - if more than one, list type of packaging, copy Part III, and complete for each type:**
Tank Car
- 25. See instructions and enter the appropriate failure codes found at the end of the instructions. Be sure to enter the codes from the list that corresponds to the particular packaging type checked above. Enter the number of codes as appropriate to describe the incident.**
Enter the most important failure point in line 1. If there are more than two failure points, provide in this format in part VI.

What Failed: - 137-Manway or Dome Cover; 137-Manway or Dome Cover
How Failed: - 308-Leaked; 308-Leaked
Causes of Failure: - Derailment; Loose Closure, Component, or Device

- 26a. Provide the packaging identification markings, if available.**

Identification Markings: 117J100W

(Examples: 1A1/Y1.4/150/92/USA/RB/93/RL, UN31H1/Y0493/USA/M9339/10800/1200, DOT - 105A - 100W (RAIL), DOT 406 (HIGHWAY), DOT 51, DOT 3-A)

- 26b. For Non-bulk, IBC, or non-specification packaging, if identification markings are incomplete or unavailable, see instructions and complete the following:**

Single Package or Outer Packaging:

Packaging Type:
Material of Construction:
Head Type (Drums only):

Single Package or Inner Packaging (if any):

Packaging Type:
Material of Construction:

- 27. Describe the package capacity and the quantity:**

Single Package or Outer Packaging:

Package Capacity: 29190 Liquid - Gallon
Amount in Package:
Number in Shipment: 1
Number Failed: 1

Single Package or Inner Packaging (if any):

Package Capacity:
Amount in Package:
Number in Shipment:
Number Failed:

- 28. Provide packaging construction and test information, as appropriate:**

Manufacturer:
Serial Number: GBRX 706217
Material of Construction: (if Tank Car, CTMV, Portable Tank, or Cylinder)
Design Pressure: (if Tank Car, CTMV, Portable Tank)
Shell Thickness: (if Tank Car, CTMV, Portable Tank)
Head Thickness: (if Tank Car, CTMV)
Service Pressure: (if Cylinder)
If valve or device failed:
Type:
Model:
Manufacturer:

Manufacture Date:
Last Test Date:

- 29. If the packaging is for Radioactive Materials, complete the following:**

Packaging Category:
Packaging Certification:
Certification Number:
Nuclide(s) Present: Transport Index:
Activity:
Critical Safety Index:

PART IV – CONSEQUENCES

30. Result of Incident (check all that apply):

- Spillage: True
- Explosion: True
- Vapor (Gas) Dispersion: True
- No Release: False
- Fire: True
- Material Entered Waterway/Storm Sewer: True
- Environmental Damage: True

31. Emergency Response: The following entities responded to the incident: (Check all that apply)

- Fire/EMS Report #: True N/A
- Police Report #: True
- In-house cleanup: True
- Other Cleanup: True

32. Damages Was the total damage cost more than \$500? True

- If yes, enter the following information: (If no, go to question 33.)
- Material Loss: \$ 0.00
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33b. Were there human fatalities that did not result from the hazardous material? False

If yes, how many?

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If yes, enter the number of injuries resulting from the hazardous material:

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- Responders: 0
- General Public: 0

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(e.g.: On site first aid or Emergency Room observation and release)

- Employees: 0
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- General Public: 0

35. Did the hazardous material cause or contribute to an evacuation? False

If yes, provide the following information:

- Total number of general public evacuated: 0
- Total number of employees evacuated: 0
- Total evacuated: 0
- Duration of the evacuation: 0

36. Was a major transportation artery or facility closed? False

If yes, how many?

37. Was the material involved in a crash or derailment? True

If yes, provide the following information:

- Estimated speed (mph): 35
- Weather conditions: 87 F
- Vehicle overturned? True
- Vehicle left roadway/track? True

PART V - AIR INCIDENT INFORMATION (please refer to S 175.31 to report a discrepancy for air shipments)

38. Was the shipment on a passenger aircraft?

If yes, was it tendered as cargo, or as passenger baggage?

39. Where did the incident occur (if unknown, check the appropriate box for the location where the incident was discovered)?

40. What phase(s) had the shipment already undergone prior to the incident? (Check all that apply)

- Shipment had not been transported
- Transported by air (first flight)
- Transport by air (subsequent flights)
- Initial transport by highway to cargo facility
- Transfer at sort center/cargo facility

PART VI - DESCRIPTION OF EVENTS & PACKAGE FAILURE

- Describe the sequence of events that led to the incident and the actions taken at the time it was discovered. Describe the package failure, including the size and location of holes, cracks, etc. Photographs and diagrams should be submitted if needed for clarification. Estimate the duration of the release, if possible. Describe what was done to mitigate the effects of the release. Continue on additional sheets if necessary.

Describe:

On 8/15/2025 at 2:10 PM Central, a Canadian Pacific Kansas City Railroad (CPKC) unit train of loaded Petroleum Crude Oil derailed on the CPKC mainline at MP 141.66 of the Watertown Subdivision in Reeseville, WI. Twenty three cars derailed. Of these cars, four released hazardous materials as follows:

GBRX 706564 - derailed upright with the B-end buried in mud. The tank shell was punctured close to the top and middle of the tank car, on the right side, B-end. Resulting release was estimated at 750 gallons.

GBRX 706556 - derailed upright & underneath another tank car. The tank head was punctured close to the Brake handle on the B-end. Resulting release was estimated at 750 gallons.

GBRX 706217 - derailed on its right side, with the top of the tank car at roughly 3:00. The release occurred from the manway, where 3 of 8 manway bolts were less than tool tight. Resulting release was estimated at 5 gallons.

GBRX 706163 - derailed on its right side, with the top of the tank car at roughly 3:00. The release occurred from the manway, where 4 of 8 manway bolts were less than tool tight. Resulting release was estimated at 5 gallons.

The final car that requires a 5800 report is GBRX 706067, which was identified as leaking during the NTSB investigation. GBRX 706067 derailed on its right side, with the top of the tank car at roughly 3:00. The release occurred from the manway, where 1 of 8 manway bolts were less than tool tight. Resulting release was estimated at 0.016 gallons.

After uprighting the tank cars, the remaining lading was transferred into tank trucks and the empty tank cars were purged and cleaned. Post-response and remediation work is on-going as of the time of this filing.

Cost information is estimated and reported for the Response and Environmental Cleanup for the entire derailment (it is not feasible to separate the costs directly related to the four tank cars found in this report). Other costs are unknown at this time.

File Note: The quantity released was estimated based on the best information available at the time of filing. The shipment was offered as a 'bulk' shipment, aka one car load, therefore the exact amount offered in this package is not known to the carrier. This carrier does not have access to mass balance data which can exactly quantify this value.

PART VII - RECOMMENDATIONS/ACTIONS TAKEN TO PREVENT RECURRENCE

- Where you are able to do so, suggest or describe changes (such as additional training, use of better packaging, or improved operating procedures) to help prevent recurrence. Provide recommendations for improvement to hazardous materials transportation beyond the control of your individual company. Continue on additional sheets if necessary.

Describe:

This incident is currently under investigation - no root cause has been determined.

PART VIII - CONTACT INFORMATION

Contact's Name:	Tony Houdyshell
Contact's Title:	Mgr Emergency & Hazmat
Business Name and Address:	SOO LINE RAILROAD COMPANY 120 S 6TH ST STE 900 MINNEAPOLIS MN 55402-1812
E-mail Address:	tony.houdyshell@cpkcr.com
Telephone Number:	414-208-8546
Fax Number:	
Hazmat Registration Number:	060325550303HJ
Date:	09/12/2025
Preparer is:	Carrier



U.S Department of Transportation
Research and Special Programs Administration

Hazardous Materials Incident Report

Form Approval OMB No. 3137-0039

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 2137-0039. The filling out of this information is mandatory and will take 96 minutes to complete.

INSTRUCTIONS

Submit this report to the Information Systems Manager, U.S. Department of Transportation, Pipeline and Hazardous Materials Safety Administration, Office of Hazardous Materials Safety, DHM-63, Washington, D.C. 20590-0001. If space provided for any item is inadequate, use a separate sheet of paper, identifying the entry number being completed. Copies of this form and instructions can be obtained from the Office of Hazardous Materials Website at <http://hazmat.dot.gov>. If you have any questions, you can contact the Hazardous Materials Information Center at 1-800-HMR-4922 (1-800-467-4922) or online at <http://hazmat.dot.gov>.

PART I - REPORT TYPE

1. Incident Id: E-2025090283
2. This is to report: A

PART II - GENERAL INCIDENT INFORMATION

3. Date of Incident: 08/15/2025
4. Time of Incident (use 24-hour time): 14:10

5. Enter National Response Center Report Number (if applicable): 1439986
6. If you submitted a report to another Federal DOT agency, enter the agency and report number:

7. Location of Incident:
City: REESEVILLE
County: DODGE
State: WI
Zip Code: (if known): 53579
Street Address/Mile Marker/Yard Name/Airport/Body of Water/River Mile: W9425 Danville Rd

8. Mode of Transportation: Rail
9. Transportation Phase: In Transit

10. Carrier/Reporter:
Name: SOO LINE RAILROAD COMPANY
Street: 120 S 6TH ST STE 900
City: MINNEAPOLIS
State: MN
Zip Code: 55402-1812
Federal DOT Id Number: 108106
Hazmat Registration Number: 060325550303HJ

11. Shipper/Offeror:
Name: PBF Holding Company LLC
Street: 4550 Wrangle Hill Rd
City: Delaware City
State: DE
Zip Code: 19706
Waybill/Shipping Paper: 473891
Hazmat Registration Number:

12. Origin (if different from shipper address)
Street: 423051 Rg Rd 92
City: Hardisty, AB
State: ZZ
Zip Code: T0B 1V0

13. Destination:
Street: 4550 WRANGLE HILL RD
City: DELAWARE CITY
State: DE
Zip Code: 19706

14. Proper Shipping Name of Hazardous Material: PETROLEUM CRUDE OIL
15. Technical/Trade Name:
16. Hazardous Class/Division: Flammable - Combustible Liquid
17. Identification Number: (E.g. UN2764, NA 2020) UN1267

- 18. Packing Group:** (if applicable) II
- 19. Quantity Released:** (Include Measurement Units) 5 Liquid - Gallon
- 20. Was the material shipped as a hazardous waste?** False
If yes, provide the EPA Manifest Number:
- 21. Is this a Toxic by Inhalation (TIH) material?** False
If yes, provide the Hazard Zone:
- 22. Was the material shipped under an Exemption, Approval, or Competent Authority Certificate?** False
If yes, provide the Exemption, Approval, or CA number:
- 23. Was this an undeclared hazardous materials shipment?** False

PART III - PACKAGING INFORMATION

- 24. Check Packaging Type (check only one - if more than one, list type of packaging, copy Part III, and complete for each type:**
Tank Car
- 25. See instructions and enter the appropriate failure codes found at the end of the instructions. Be sure to enter the codes from the list that corresponds to the particular packaging type checked above. Enter the number of codes as appropriate to describe the incident.**
Enter the most important failure point in line 1. If there are more than two failure points, provide in this format in part VI.

What Failed: - 137-Manway or Dome Cover; 137-Manway or Dome Cover
How Failed: - 308-Leaked; 308-Leaked
Causes of Failure: - Derailment; Loose Closure, Component, or Device

- 26a. Provide the packaging identification markings, if available.**

Identification Markings: 117J100W

(Examples: 1A1/Y1.4/150/92/USA/RB/93/RL, UN31H1/Y0493/USA/M9339/10800/1200, DOT - 105A - 100W (RAIL), DOT 406 (HIGHWAY), DOT 51, DOT 3-A)

- 26b. For Non-bulk, IBC, or non-specification packaging, if identification markings are incomplete or unavailable, see instructions and complete the following:**

Single Package or Outer Packaging:

Packaging Type:
Material of Construction:
Head Type (Drums only):

Single Package or Inner Packaging (if any):

Packaging Type:
Material of Construction:

- 27. Describe the package capacity and the quantity:**

Single Package or Outer Packaging:

Package Capacity: 29090 Liquid - Gallon
Amount in Package:
Number in Shipment: 1
Number Failed: 1

Single Package or Inner Packaging (if any):

Package Capacity:
Amount in Package:
Number in Shipment:
Number Failed:

- 28. Provide packaging construction and test information, as appropriate:**

Manufacturer:
Serial Number: GBRX 706163
Material of Construction: (if Tank Car, CTMV, Portable Tank, or Cylinder)
Design Pressure: (if Tank Car, CTMV, Portable Tank)
Shell Thickness: (if Tank Car, CTMV, Portable Tank)
Head Thickness: (if Tank Car, CTMV)
Service Pressure: (if Cylinder)
If valve or device failed:
Type:
Model:
Manufacturer:

Manufacture Date:
Last Test Date:

- 29. If the packaging is for Radioactive Materials, complete the following:**

Packaging Category:
Packaging Certification:
Certification Number:
Nuclide(s) Present: Transport Index:
Activity:
Critical Safety Index:

PART IV – CONSEQUENCES

30. Result of Incident (check all that apply):

- | | | | |
|---------------------------|-------|--|------|
| - Spillage: | True | - Fire: | |
| - Explosion: | | - Material Entered Waterway/Storm Sewer: | True |
| - Vapor (Gas) Dispersion: | | - Environmental Damage: | True |
| - No Release: | False | | |

31. Emergency Response: The following entities responded to the incident: (Check all that apply)

Fire/EMS Report #: True N/A
Police Report #:
In-house cleanup: True
Other Cleanup:

32. Damages Was the total damage cost more than \$500? True

If yes, enter the following information: (If no, go to question 33.)
Material Loss: \$ 0.00
Carrier Damage: \$ 0.00
Property Damage: \$ 0.00
Response Cost: \$ 5,000,000.00
Remediation/Cleanup Cost: \$ 5,500,000.00
(See damage definitions in the instructions)

33a. Did the hazardous material cause or contribute to a human fatality? False

If yes, enter the number of fatalities resulting from the hazardous material:
Employees:
Responders:
General Public:

33b. Were there human fatalities that did not result from the hazardous material? False

If yes, how many?

34. Did the hazardous material cause or contribute to personal injury? False

If yes, enter the number of injuries resulting from the hazardous material:

Hospitalized (Admitted Only):

Employees:
Responders:
General Public:

Non-Hospitalized:

(e.g.: On site first aid or Emergency Room observation and release)

Employees:
Responders:
General Public:

35. Did the hazardous material cause or contribute to an evacuation? False

If yes, provide the following information:

Total number of general public evacuated:
Total number of employees evacuated:
Total evacuated: 0
Duration of the evacuation:

36. Was a major transportation artery or facility closed? False

If yes, how many?

37. Was the material involved in a crash or derailment? True

If yes, provide the following information:

Estimated speed (mph): 35
Weather conditions: 87 F
Vehicle overturned? True
Vehicle left roadway/track? True

PART V - AIR INCIDENT INFORMATION (please refer to S 175.31 to report a discrepancy for air shipments)

38. Was the shipment on a passenger aircraft?

If yes, was it tendered as cargo, or as passenger baggage?

39. Where did the incident occur (if unknown, check the appropriate box for the location where the incident was discovered)?

40. What phase(s) had the shipment already undergone prior to the incident? (Check all that apply)

- | | |
|--|--|
| - Shipment had not been transported | - Transported by air (first flight) |
| - Transport by air (subsequent flights) | - Initial transport by highway to cargo facility |
| - Transfer at sort center/cargo facility | |

PART VI - DESCRIPTION OF EVENTS & PACKAGE FAILURE

- Describe the sequence of events that led to the incident and the actions taken at the time it was discovered. Describe the package failure, including the size and location of holes, cracks, etc. Photographs and diagrams should be submitted if needed for clarification. Estimate the duration of the release, if possible. Describe what was done to mitigate the effects of the release. Continue on additional sheets if necessary.

Describe:

On 8/15/2025 at 2:10 PM Central, a Canadian Pacific Kansas City Railroad (CPKC) unit train of loaded Petroleum Crude Oil derailed on the CPKC mainline at MP 141.66 of the Watertown Subdivision in Reeseville, WI. Twenty three cars derailed. Of these cars, four released hazardous materials as follows:

GBRX 706564 - derailed upright with the B-end buried in mud. The tank shell was punctured close to the top and middle of the tank car, on the right side, B-end. Resulting release was estimated at 750 gallons.

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GBRX 706163 - derailed on its right side, with the top of the tank car at roughly 3:00. The release occurred from the manway, where 4 of 8 manway bolts were less than tool tight. Resulting release was estimated at 5 gallons.

The final car that requires a 5800 report is GBRX 706067, which was identified as leaking during the NTSB investigation. GBRX 706067 derailed on its right side, with the top of the tank car at roughly 3:00. The release occurred from the manway, where 1 of 8 manway bolts were less than tool tight. Resulting release was estimated at 0.016 gallons.

After uprighting the tank cars, the remaining lading was transferred into tank trucks and the empty tank cars were purged and cleaned. Post-response and remediation work is on-going as of the time of this filing.

Cost information is estimated and reported for the Response and Environmental Cleanup for the entire derailment (it is not feasible to separate the costs directly related to the four tank cars found in this report). Other costs are unknown at this time.

File Note: The quantity released was estimated based on the best information available at the time of filing. The shipment was offered as a 'bulk' shipment, aka one car load, therefore the exact amount offered in this package is not known to the carrier. This carrier does not have access to mass balance data which can exactly quantify this value.

PART VII - RECOMMENDATIONS/ACTIONS TAKEN TO PREVENT RECURRENCE

- Where you are able to do so, suggest or describe changes (such as additional training, use of better packaging, or improved operating procedures) to help prevent recurrence. Provide recommendations for improvement to hazardous materials transportation beyond the control of your individual company. Continue on additional sheets if necessary.

Describe:

This incident is currently under investigation - no root cause has been determined.

PART VIII - CONTACT INFORMATION

Contact's Name:	Tony Houdyshell
Contact's Title:	Mgr Emergency & Hazmat
Business Name and Address:	SOO LINE RAILROAD COMPANY 120 S 6TH ST STE 900 MINNEAPOLIS MN 55402-1812
E-mail Address:	tony.houdyshell@cpkcr.com
Telephone Number:	414-208-8546
Fax Number:	
Hazmat Registration Number:	060325550303HJ
Date:	09/12/2025
Preparer is:	Carrier



U.S Department of Transportation
Research and Special Programs Administration

Hazardous Materials Incident Report

Form Approval OMB No. 3137-0039

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 2137-0039. The filling out of this information is mandatory and will take 96 minutes to complete.

INSTRUCTIONS

Submit this report to the Information Systems Manager, U.S. Department of Transportation, Pipeline and Hazardous Materials Safety Administration, Office of Hazardous Materials Safety, DHM-63, Washington, D.C. 20590-0001. If space provided for any item is inadequate, use a separate sheet of paper, identifying the entry number being completed. Copies of this form and instructions can be obtained from the Office of Hazardous Materials Website at <http://hazmat.dot.gov>. If you have any questions, you can contact the Hazardous Materials Information Center at 1-800-HMR-4922 (1-800-467-4922) or online at <http://hazmat.dot.gov>.

PART I - REPORT TYPE

1. **Incident Id:** E-2025090283
2. **This is to report:** A

PART II - GENERAL INCIDENT INFORMATION

3. **Date of Incident:** 08/15/2025
4. **Time of Incident (use 24-hour time):** 14:10

5. **Enter National Response Center Report Number (if applicable):** 1439986
6. **If you submitted a report to another Federal DOT agency, enter the agency and report number:**

7. **Location of Incident:**
City: REESEVILLE
County: DODGE
State: WI
Zip Code: (if known): 53579
Street Address/Mile Marker/Yard Name/Airport/Body of Water/River Mile:
W9425 Danville Rd

8. **Mode of Transportation:** Rail
9. **Transportation Phase:** In Transit

10. **Carrier/Reporter:**
Name: SOO LINE RAILROAD COMPANY
Street: 120 S 6TH ST STE 900
City: MINNEAPOLIS
State: MN
Zip Code: 55402-1812
Federal DOT Id Number: 108106
Hazmat Registration Number: 060325550303HJ

11. **Shipper/Offeror:**
Name: PBF Holding Company LLC
Street: 4550 Wrangle Hill Rd
City: Delaware City
State: DE
Zip Code: 19706
Waybill/Shipping Paper: 473891
Hazmat Registration Number:

12. **Origin (if different from shipper address)**
Street: 423051 Rg Rd 92
City: Hardisty, AB
State: ZZ
Zip Code: T0B 1V0

13. **Destination:**
Street: 4550 WRANGLE HILL RD
City: DELAWARE CITY
State: DE
Zip Code: 19706

14. **Proper Shipping Name of Hazardous Material:** PETROLEUM CRUDE OIL
15. **Technical/Trade Name:**
16. **Hazardous Class/Division:** Flammable - Combustible Liquid
17. **Identification Number:** (E.g. UN2764, NA 2020) UN1267

PART IV – CONSEQUENCES

30. Result of Incident (check all that apply):

- Spillage: True
- Explosion: True
- Vapor (Gas) Dispersion: True
- No Release: False
- Fire: True
- Material Entered Waterway/Storm Sewer: True
- Environmental Damage: True

31. Emergency Response: The following entities responded to the incident: (Check all that apply)

- Fire/EMS Report #: True N/A
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 - Responders: 0
 - General Public: 0

33b. Were there human fatalities that did not result from the hazardous material? False

If yes, how many?

34. Did the hazardous material cause or contribute to personal injury? False

If yes, enter the number of injuries resulting from the hazardous material:

Hospitalized (Admitted Only):

- Employees: 0
- Responders: 0
- General Public: 0

Non-Hospitalized:

(e.g.: On site first aid or Emergency Room observation and release)

- Employees: 0
- Responders: 0
- General Public: 0

35. Did the hazardous material cause or contribute to an evacuation? False

If yes, provide the following information:

- Total number of general public evacuated: 0
- Total number of employees evacuated: 0
- Total evacuated: 0
- Duration of the evacuation: 0

36. Was a major transportation artery or facility closed? False

If yes, how many?

37. Was the material involved in a crash or derailment? True

If yes, provide the following information:

- Estimated speed (mph): 35
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