

DENR USE ONLY:
NC DENR

Paper Report Electronic Data - Email CD (data loaded: Yes / No)

Doc/Event #:

Division of Waste Management - Solid Waste

Environmental Monitoring Reporting Form

Notice: This form and any information attached to it are "Public Records" as defined in NC General Statute 132-1. As such, these documents are available for inspection and examination by any person upon request (NC General Statute 132-6).

Instructions:

- Prepare one form for each individually monitored unit.
- Please type or print legibly.
- Attach a notification table with values that attain or exceed NC 2L groundwater standards or NC 2B surface water standards. The notification must include a preliminary analysis of the cause and significance of each value. (e.g. naturally occurring, off-site source, pre-existing condition, etc.).
- Attach a notification table of any groundwater or surface water values that equal or exceed the reporting limits.
- Attach a notification table of any methane gas values that attain or exceed explosive gas levels. This includes any structures on or nearby the facility (NCAC 13B .1629 (4)(a)(i)).
- Send the original signed and sealed form, any tables, and Electronic Data Deliverable to: Compliance Unit, NCDENR-DWM, Solid Waste Section, 1646 Mail Service Center, Raleigh, NC 27699-1646.

Solid Waste Monitoring Data Submittal Information

Name of entity submitting data (laboratory, consultant, facility owner):

Richardson Smith Gardner and Associates, Inc.

Contact for questions about data formatting. Include data preparer's name, telephone number and E-mail address:

Name: Joan A. Smyth, P.G.

Phone: 919-828-0577 x 221

E-mail: joan@rsgengineers.com

Facility name:	Facility Address:	Facility Permit #	NC Landfill Rule: (.0500 or .1600)	Actual sampling dates (e.g., October 20-24, 2006)
City of High Point Closed Riverdale Landfill	Riverdale Drive High Point, NC	41-01	.0500	June 30, 2011

Environmental Status: (Check all that apply)

- Initial/Background Monitoring Detection Monitoring Assessment Monitoring Corrective Action

Type of data submitted: (Check all that apply)

- Groundwater monitoring data from monitoring wells Methane gas monitoring data
 Groundwater monitoring data from private water supply wells Corrective action data (specify) _____
 Leachate monitoring data Other(specify) _____
 Surface water monitoring data

Notification attached?

- No. No groundwater or surface water standards were exceeded.
 Yes, a notification of values exceeding a groundwater or surface water standard is attached. It includes a list of groundwater and surface water monitoring points, dates, analytical values, NC 2L groundwater standard, NC 2B surface water standard or NC Solid Waste GWPS and preliminary analysis of the cause and significance of any concentration.
 Yes, a notification of values exceeding an explosive methane gas limit is attached. It includes the methane monitoring points, dates, sample values and explosive methane gas limits.

Certification

To the best of my knowledge, the information reported and statements made on this data submittal and attachments are true and correct. Furthermore, I have attached complete notification of any sampling values meeting or exceeding groundwater standards or explosive gas levels, and a preliminary analysis of the cause and significance of concentrations exceeding groundwater standards. I am aware that there are significant penalties for making any false statement, representation, or certification including the possibility of a fine and imprisonment.

Joan A. Smyth, P.G.

Senior Hydrogeologist

919-828-0577 x 221

Facility Representative Name (Print)

Title

(Area Code) Telephone Number

Joan A. Smyth

7/5/11

Affix NC Licensed/ Professional Geologist Seal

Signature

Date

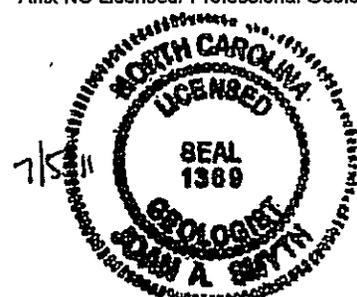
14 N. Boylan Avenue Raleigh, NC 27603

Facility Representative Address

C0828

NC PE Firm License Number (if applicable effective May 1, 2009)

Revised 6/2009



NC Division of Waste Management - Solid Waste Section

Landfill Gas Monitoring Data Form

Notice: This form and any information attached to it are "Public Records" as defined in NC General Statute 132-1. As such, these documents are available for inspection and examination by any person upon request (NC General Statute 132-6).

Facility Name: CITY OF HIGH POINT, CLOSED RIVERDALE LF Permit Number: 41-01

Date of Sampling: 6-30-11 NC Landfill Rule (.0500 or .1600): .0500

Name and Position of Sample Collector: DON MISENHEIMER PRES. SCIENTIST (RSG)

Type and Serial Number of Gas Meter: GEM 2000 GM 07002HP Calibration Date of Gas Meter: 4-24-10 INSP

Date and Time of Field Calibration: 6-30-11 10:30a

Type of Field Calibration Gas (15/15 or 35/50): 15/15 Expiration Date of Field Calibration Gas Canister: 04/13

Pump Rate of Gas Meter: 0.5 L/min

Ambient Air Temperature: 89° C Barometric Pressure: 29.84 General Weather Conditions: Sunny/Hot

Instructions: Under "Location or LFG Well" identify the monitoring wells or describe the location for other tests (e.g., inside buildings). A drawing showing the location of test must be attached. Report methane readings in both % LEL and % methane by volume. A reading in percent methane by volume can be converted to % LEL as follows: % methane by volume = % LEL/20

Location or LFG Well ID	Sample Tube Purge	Time	Time Pumped (s)	Initial %LEL	Stabilized %LEL	%CH4 by Volume	%O2	%CO2	Notes
LFG-7	760s	1:14p	760s	7100	7100	28.6	1.6	25.6	
7-1	760s	1:31p	760s	7100	7100	18.2	2.6	24.4	
7-2	760s	1:37p	760s	0	0	0	8.3	9.2	
7-3	760s	1:40p	760s	7100	7100	10.1	2.8	16.0	
7-4	760s	1:51p	760s	7100	7100	44.2	4.2	26.5	
LFG-8	760s	1:59p	760s	7100	7100	53.3	0.3	41.3	
8A	760s	2:01p	760s	7100	7100	38.6	4.5	33.6	
8B	760s	2:03p	760s	7100	7100	51.5	1.2	38.3	
8-1	760s	2:08p	760s	7100	7100	60.9	0.3	33.5	
8-2	760s	2:10p	760s	7100	7100	54.8	0.3	40.3	

If your facility has more gas monitoring locations than there is room on this form, please attach additional sheets listing the same information as contained on this form.

Certification
To the best of my knowledge, the information reported and statements made on this data submittal and attachments are true and correct. I am aware that there are significant penalties for making any false statement, representation, or certification including the possibility of a fine and imprisonment.

Don Misener (RSG) SIGNATURE
PROJECT SCIENTIST TITLE

NOTE!
*METER WAS FIELD CAL'D USING 15/15 GAS, THEREFORE HIGH READINGS MAY NOT HAVE A HIGH LEVEL OF ACCURACY. THE 2000(GEM) WAS RE-CAL'D (FIELD) AFTER HIGH READINGS WERE FOUND. THE PROBES WE RE-TESTED WITH NO SIGNIFICANT CHANGES.

NC Division of Waste Management - Solid Waste Section

Landfill Gas Monitoring Data Form

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Facility Name: _____ Permit Number: _____

Date of Sampling: _____ NC Landfill Rule (.0500 or .1600): _____

Name and Position of Sample Collector: SAME AS PREVIOUS PAGE

Type and Serial Number of Gas Meter: _____ Calibration Date of Gas Meter: _____

Date and Time of Field Calibration: _____

Type of Field Calibration Gas (15/15 or 35/50): _____ Expiration Date of Field Calibration Gas Canister: _____

Pump Rate of Gas Meter: _____

Ambient Air Temperature: _____ Barometric Pressure: _____ General Weather Conditions: _____

Instructions: Under "Location or LFG Well" identify the monitoring wells or describe the location for other tests (e.g., inside buildings). A drawing showing the location of test must be attached. Report methane readings in both % LEL and % methane by volume. A reading in percent methane by volume can be converted to % LEL as follows: % methane by volume = % LEL/20

Location or LFG Well ID	Sample Tube Purge	Time	Time Pumped (s)	Initial %LEL	Stabilized %LEL	%CH4 by Volume	%O2	%CO2	Notes
8-3	760s	2:20p	760s	7100	7100	35.0	0.9	36.4	
8-4	760s	2:22p	760s	7100	7100	45.8	3.1	31.4	
8-5	760s	2:24p	760s	7100	7100	12.5	10.8	10.6	
LFG-9	760s	2:28p	760s	7100	7100	36.7	5.1	25.0	
9-1	760s	2:30p	760s	7100	7100	43.9	0.9	37.0	
LFG-10	760s	2:39p	760s	0	0	0	5.5	13.1	

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Certification
 To the best of my knowledge, the information reported and statements made on this data submittal and attachments are true and correct. I am aware that there are significant penalties for making any false statement, representation, or certification including the possibility of a fine and imprisonment.

[Signature] RSK
 SIGNATURE
PR. SCIENTIST
 TITLE

* SEE NOTE 1 FROM PREVIOUS PAGE

NC Division of Waste Management - Solid Waste Section

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Name and Position of Sample Collector: SAME AS PREVIOUS PAGE

Type and Serial Number of Gas Meter: _____ Calibration Date of Gas Meter: _____

Date and Time of Field Calibration: _____

Type of Field Calibration Gas (15/15 or 35/50): _____ Expiration Date of Field Calibration Gas Canister: _____

Pump Rate of Gas Meter: _____

Ambient Air Temperature: _____ Barometric Pressure: _____ General Weather Conditions: _____

Instructions: Under "Location or LFG Well" identify the monitoring wells or describe the location for other tests (e.g., inside buildings). A drawing showing the location of test must be attached. Report methane readings in both % LEL and % methane by volume. A reading in percent methane by volume can be converted to % LEL as follows: % methane by volume = % LEL/20

Location or LFG Well ID	Sample Tube Purge	Time	Time Pumped (s)	Initial %LEL	Stabilized %LEL	%CH4 by Volume	%O2	%CO2	Notes
LFG-6	760s	2:50P	760s	7100	7100	2.3	5.8	24.9	
LFG-5	760s	2:55P	760s	0	0	0	14.3	1.6	
LFG-4	760s	3:03P	760s	0	0	0	16.9	2.2	
LFG-3	760s	3:09P	760s	0	0	0	10.2	8.2	
1-1	760s	3:15P	760s	0	0	0	14.1	6.2	

If your facility has more gas monitoring locations than there is room on this form, please attach additional sheets listing the same information as contained on this form.

Certification

To the best of my knowledge, the information reported and statements made on this data submittal and attachments are true and correct. I am aware that there are significant penalties for making any false statement, representation, or certification including the possibility of a fine and imprisonment.

[Signature] (RSC)
SIGNATURE

PROJECT Scientist
TITLE

* SEE NOTE 1 FROM PREVIOUS PAGE



TITLE:
**LFG MONITORING PROBE LOCATIONS
 CLOSED RIVERDALE LANDFILL
 CITY OF HIGH POINT,
 NORTH CAROLINA**

DRAWN BY: D.M.M.	CHECKED BY: J.A.S.	SCALE: AS SHOWN	FIGURE NO. 1
DATE: DEC. 2010	PROJECT NO. HPOINT 10-2	FILE NAME	

**RICHARDSON SMITH GARDNER
 & ASSOCIATES**
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