

September 10, 2013

Ms. Jaclynne Drummond
NCDENR DWM Solid Waste Section
1646 Mail Service Center
Raleigh, North Carolina 27699-1646

RE: **Operations, Monitoring, and Maintenance Report – August 2013**
Avery County Closed MSW Landfill
Spruce Pine, North Carolina

Dear Ms. Drummond:

This report provides information concerning the operation and maintenance (O&M) of the Avery County Closed MSW Landfill (Permit No. 06-01) Landfill Gas Collection and Control System (LFGCCS) as well as monitoring of the landfill gas probes located both on- and off-site. This report covers the August 2013 monitoring period. Mr. Don Misenheimer with Smith Gardner, Inc. (S+G) performed the site visit on August 6, 2013. Details of this site visit are provided below.

ACTION LIST

S+G previously identified the following items to be addressed in order for the LFGCCS to operate as designed:

1. **LFGCCS System:** An expansion of the LFGCCS system, as proposed in the *Annual Landfill Gas Monitoring Report*¹, was previously approved² by the division of Waste Management. **Phase One of the expansion project has been completed and is currently being evaluated for effectiveness.**
2. **Monitoring:** Monthly monitoring will continue at the site.

LFG EXTRACTION WELL MONITORING PROGRAM

Monthly monitoring of the LFGCCS will continue and shall include the following items:

- CH₄, O₂, CO₂, and Pressure monitoring at each extraction well head;
- CH₄, O₂, CO₂, and Pressure monitoring at the flare station; and
- Adjustment of LFGCCS to balance recovery and ensure safe operation of the system.

The County will maintain this LFGCCS and will continue to evaluate the effectiveness of increased LFG recovery from the waste mass in alleviating off-site migration of LFG. During

¹ *Annual Landfill Gas Monitoring Report*, Closed Avery County MSW Landfill. Submitted by Smith Gardner, November 2012.

² Approval response letter, Closed Avery County MSW Landfill (Annual Landfill Gas Monitoring Report). Sent by Jaclynne Drummond, Solid Waste Section, November 15, 2012.

this time, LFG monitoring at the landfill and for off-site properties will be continued on a monthly basis. Reporting of these results will be accordance with the approved LFG Monitoring Plan.

LFG EXTRACTION WELL MONITORING ACTIVITIES

S+G performed the flare station and well field monitoring on August 6, 2013. When S+G arrived to the site, there was between approximately 29 and 32 inches of available vacuum at each of the LFG wells across the well field. The results of this event are summarized below. Recommended actions are made in **bold**. Well field data and flare station data are provided in the **attached Table 1**.

LFG Extraction Well Field

- **W-1 through W-10:** S+G performed CH₄, O₂, CO₂, and pressure monitoring and any required/needed adjustment at each extraction well head (adjustments consisted of slight changes of applied vacuum to the well).
- **Orifice Plates:** S+G continues to evaluate orifice plate sizes on the site as necessary.

Flare Station

- **Condensate Tank:** The condensate tank was observed during this site visit; the liquid was at an acceptable level. **S+G will continue to monitor the liquid level of the condensate tank.**
- **Filter Tank:** The filter tank was observed during this site visit; the liquid was at an acceptable level. **S+G will continue to monitor the liquid level of the filter tank.**

LFG MONITORING WELL (PERIMETER) MONITORING PROGRAM

S+G personnel also performed monitoring of the perimeter LFG monitoring network. Monitoring wells P1, P3, P7 and P11 each measured over the 100% LEL or 5% by volume of CH₄. All other wells had no detectable concentrations of CH₄. Results of this monitoring event are included in **Attachment 1**. These wells will continue to be monitored and data will be submitted in this reporting format.

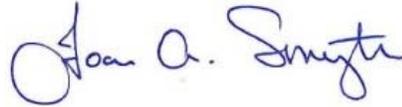
Ms. Drummond
September 10, 2013
Page 3 of 3

The next routine monitoring event is scheduled for the third week of September 2013. If you have any questions, or require additional information, please contact us at your earliest convenience at 919-828-0577 or by e-mail (address below).

Sincerely,
SMITH GARDNER, INC.



Don Misenheimer
Project Scientist, ext. 224
don@smithgardnerinc.com



Joan A. Smyth, P.G.
Senior Hydrogeologist ext. 221
joan@smithgardnerinc.com

Attachments

CC: Buddy Norris – Avery County
Deb Aja – NCDENR
File

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FIGURE

**Operations Monitoring and Maintenance Report - LFGCCS
Avery County Closed MSW Landfill
Permit No. 06-91**

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LEGEND

- EXISTING LANDFILL GAS PROBE
- ④ OFFSITE STRUCTURE TO BE MONITORED

REFERENCES

1. ADJACENT PROPERTIES ARE FROM AVERY COUNTY GIS MAPPING DEPARTMENT.
2. MONITORING WELL LOCATIONS FROM FIELD SURVEY DATED 1/14/08, BY SURVEYING SOLUTIONS, P.C.
3. PROPERTY LINE FROM FIELD SURVEY DATED APRIL 9, 2010, BY APPALACHIAN PROFESSIONAL LAND SURVEYORS & CONSULTANTS.
4. LFG PROBES LOCATIONS FROM FIELD SURVEY DATED APRIL 9, 2010, BY APPALACHIAN PROFESSIONAL LAND SURVEYORS & CONSULTANTS. PROBE P-2, P-3, AND P-9 THROUGH P-13 LOCATIONS WERE NOT SURVEYED AND ARE APPROXIMATE.



PREPARED BY: _____ NC LIC. NO. C-0828 (ENGINEERING)

SMITH+GARDNER

14 N. Boylan Avenue, Raleigh NC 27603 | 919.828.0577

FIGURE NO. 1

SCALE: AS SHOWN

APPROVED: D.M.M.

PROJECT NO: AVERY 12-6

DRAWN: W.R.B.

DATE: Oct 2012

FILENAME: AVERY-B0192

**LANDFILL GAS MONITORING SYSTEM
AVERY COUNTY CLOSED MSWLF
SPRUCE PINE, NORTH CAROLINA**

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TABLE

**Operations, Monitoring and Maintenance Report - LFGCCS
Avery County Closed MSW Landfill
Permit No. 06-91**

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TABLE 1
Avery County Closed MSW Landfill
Landfill Gas Collection and Control System Monitoring
August 2013

DataField CS - GEM Mode Data Output

Device ID	Date/Time mm/dd/yyyy	CH4 %	CO2 %	O2 %	Balance %	Adj. Temperature degF	Init. Static Pressure in H2O	Adj. Static Pressure in H2O	Adj. Diff. Pressure in H2O	Init. Flow Scfm	Adj. Flow Scfm	System Pressure in H2O
AVERY-W1	8/6/2013 9:42	65.9	25.7	0.1	8.3	75	-31.6	-31.5	-0.101	<<>>	<<>>	-31.46
AVERY-W2	8/6/2013 9:48	68.2	23.7	0	8.1	74	-31.5	-31.6	-0.092	<<>>	<<>>	-31.7
AVERY-W3	8/6/2013 9:52	64.5	26.1	0.2	9.2	75	-27.8	-27.9	0.116	13	13	-27.89
AVERY-W4	8/6/2013 9:50	65.3	25.7	0.2	8.8	75	-31.4	-31.4	-0.101	<<>>	<<>>	-31.55
AVERY-W5	8/6/2013 10:03	33.7	26.3	0	40	75	-29.2	-29.2	1.383	3	3	-30.35
AVERY-W6	8/6/2013 10:06	16.4	13.4	8	62.2	75	-17.6	-13.4	-0.124	8	4	-31.58
Avery-W7	8/6/2013 10:15	25.9	22.5	0	48	76	-2.9	-2.9	20.112	0	2	-31.89
Avery-W8	8/6/2013 10:22	27.4	26.3	0	47.2	80	-29.1	-29.1	-0.101	1	1	-29.95
Avery-W9	8/6/2013 9:45	58.4	33	0	8.6	75	-31.6	-31.7	0.162	4	1	-31.76
AveryW10	8/6/2013 9:55	37	20.6	6.8	35.6	75	-29.1	-29.3	-0.122	<<>>	<<>>	-29.43
Flare Station	8/6/2013 10:36	46.4	24.6	0	75.9	N/A	1.3	N/A	N/A	29	N/A	N/A

The differential pressure measurement should be positive. A negative differential pressure indicates no gas flow. Negative differential pressure may be the result of dirt or water obstructing the pitot tube perforations. Overpulling by adjacent extraction wells may also result in negative pressure being displayed.

<<>> = measurement out of range of GEM 2000 meter. The reading was likely too low for measurement by the instrument.

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Attachment 1

**Operations, Monitoring and Maintenance Report - LFGCCS
Avery County Closed MSW Landfill
Permit No. 06-91**

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NC DENR **Environmental Monitoring Reporting Form**
 Division of Waste Management - Solid Waste

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):
 Smith Gardner, 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@smithgardnerinc.com

Facility name:	Facility Address:	Facility Permit #	NC Landfill Rule: (.0500 or .1600)	Actual sampling dates (e.g., October 20-24, 2006)
Avery County Closed MSW landfill	Brushy Creek Rd. Spruce Pine, NC	06-01	.0500	8-6-13

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) LFG System Monitoring
 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

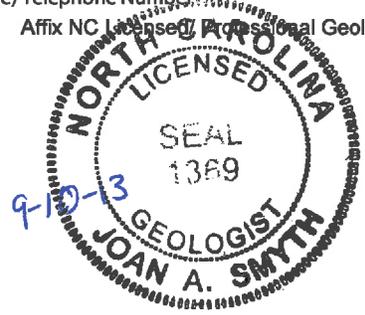
To the best of my knowledge, the information reported and statements made on this data submittal and attachments are true and correct. Furthermore, I have attached complete notification of any sampling values meeting or exceeding groundwater standards or explosive gas levels, and a preliminary analysis 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 Smyth 9-10-13 Affix NC Licensed Professional Geologist Seal
 Signature Date

14 N. Boylan Avenue Raleigh, NC 27603
 Facility Representative Address

C-0828
 NC PE Firm License Number (if applicable effective May 1, 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: Avery County Closed MSW Landfill Permit Number: 06-01

Date of Sampling: 8-6-13 NC Landfill Rule (.0500 or .1600): .0500

Name and Position of Sample Collector: GEM 2000 ^{07002 HP}

Type and Serial Number of Gas Meter: DON MISENHEIMER (STG) Calibration Date of Gas Meter: 2-1-13

Date and Time of Field Calibration: 9:00a 8-6-13

Type of Field Calibration Gas (15/15 or 35/50): 15/15 Expiration Date of Field Calibration Gas Canister: 2016

Pump Rate of Gas Meter: 0.5 L/min

Ambient Air Temperature: 85° Barometric Pressure: 27.22 General Weather Conditions: P. Sunny

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
P1	760s	9:30a	760s	7100	7100	9.0	8.4	14.8	
P2	760s	9:28a	760s	0	0	0	15.8	2.1	
P3	760s	9:25a	760s	7100	7100	60.8	0.1	31.5	
P4	760s	9:23a	760s	0	0	0	17.4	4.2	
P5	760s	9:16a	760s	0	0	0	19.9	0.1	
P6	760s	9:12a	760s	0	0	0	11.8	0.0	
P7	760s	8:09a	760s	7100	7100	26.1	8.7	4.9	
P8	760s	9:05a	760s	0	0	0	14.3	4.2	
P9	760s	11:32a	760s	0	0	0	16.8	3.1	
P10	760s	11:34a	760s	0	0	0	15.1	2.9	

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]
SIGNATURE

PROJECT SCIENTIST
TITLE

NC Division of Waste Management - Solid Waste Section

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Facility Name: Avery County Closed MSW Landfill Permit Number: 06-01

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

Name and Position of Sample Collector: [SEE PAGE 1]

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
P11	7605	11:37	7605	7100	7100	41.7	0.8	19.2	
P12	7605	9:07	7605	0	0	0	16.0	2.0	
P13	7605	11:46	7605	0	0	0	6.7	4.3	

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.

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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]
SIGNATURE

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Facility Name: Avery County Closed MSW Landfill Permit Number: 06-01

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

Name and Position of Sample Collector: [SEE PAGE 1]

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
AVERY COUNTY AIRPORT STRUCTURE #1									
NE Corner	7605	11:48a	7605	0	0	0	20.7	0.1	
NW Corner	7605	11:50a	7605	0	0	0	20.9	0	
SE Corner	7605	11:52a	7605	0	0	0	20.9	0	
SW Corner	7605	11:54a	7605	0	0	0	20.8	0	
ADD ANY ADDITIONAL LOCATIONS AT OR NEAR STRUCTURE WITH METHANE PRESENT BELOW OR ON ADDITIONAL SHEETS									

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]
SIGNATURE

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Facility Name: Avery County Closed MSW Landfill Permit Number: 06-01

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

Name and Position of Sample Collector: [SEE PAGE 1]

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
AVERY COUNTY AIRPORT STRUCTURE #2									
NE Corner	7605	11:56a	7605	0	0	0	20.9	0	
NW Corner	7605	11:58a	7605	0	0	0	20.8	0	
SE Corner	7605	12:00p	7605	0	0	0	20.9	0	
SW Corner	7605	12:02p	7605	0	0	0	20.9	0	
ADD ANY ADDITIONAL LOCATIONS AT OR NEAR STRUCTURE WITH METHANE PRESENT BELOW OR ON ADDITIONAL SHEETS									

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] (SIC)
SIGNATURE

PROJECT SCIENTIST
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NC Division of Waste Management - Solid Waste Section

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Facility Name: Avery County Closed MSW Landfill Permit Number: 06-01

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

Name and Position of Sample Collector: [SEE PAGE 1]

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
AVERY COUNTY AIRPORT STRUCTURE #3									
NE Corner	760s	12:04p	760s	0	0	0	20.9	0.1	
NW Corner	760s	12:06p	760s	0	0	0	20.9	0	
SE Corner	760s	12:08p	760s	0	0	0	20.8	0	
SW Corner	760s	12:10p	760s	0	0	0	20.8	0	
ADD ANY ADDITIONAL LOCATIONS AT OR NEAR STRUCTURE WITH METHANE PRESENT BELOW OR ON ADDITIONAL SHEETS									

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.

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Facility Name: Avery County Closed MSW Landfill Permit Number: 06-01

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

Name and Position of Sample Collector: [SEE PAGE 1]

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
AVERY COUNTY AIRPORT STRUCTURE #4									
NE Corner	7605	12:12p	7605	0	0	0	20.9	0.1	
NW Corner	7605	12:14p	7605	0	0	0	20.9	0.1	
SE Corner	7605	12:16p	7605	0	0	0	20.8	0	
SW Corner	7605	12:18p	7605	0	0	0	20.9	0	
ADD ANY ADDITIONAL LOCATIONS AT OR NEAR STRUCTURE WITH METHANE PRESENT BELOW OR ON ADDITIONAL SHEETS									

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]
SIGNATURE

PROJECT SCIENTIST
TITLE

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Facility Name: Avery County Closed MSW Landfill Permit Number: 06-01

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

Name and Position of Sample Collector: [SEE PAGE 1]

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
AVERY COUNTY AIRPORT STRUCTURE #5									
NE Corner	760s	12:20p	760s	0	0	0	20.8	0	
NW Corner	760s	12:22p	760s	0	0	0	20.9	0	
SE Corner	760s	12:24p	760s	0	0	0	21.0	0.1	
SW Corner	760s	12:26p	760s	0	0	0	20.9	0	
ADD ANY ADDITIONAL LOCATIONS AT OR NEAR STRUCTURE WITH METHANE PRESENT BELOW OR ON ADDITIONAL SHEETS									

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.

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[Signature]
SIGNATURE

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TITLE

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: Avery County Closed MSW Landfill Permit Number: 06-01

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

Name and Position of Sample Collector: _____

Type and Serial Number of Gas Meter: SEE PAGE 1 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
AVERY COUNTY AIRPORT STRUCTURE #6									
NE Corner	7605	12:28p	7605	0	0	0	20.9	0	
NW Corner	7605	12:30p	7605	0	0	0	20.8	0	
SE Corner	7605	12:32p	7605	0	0	0	20.9	0	
SW Corner	7605	12:34p	7605	0	0	0	20.9	0	
ADD ANY ADDITIONAL LOCATIONS AT OR NEAR STRUCTURE WITH METHANE PRESENT BELOW OR ON ADDITIONAL SHEETS									

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]
SIGNATURE

Project Scientist
TITLE