

DENR USE ONLY:

Paper Report

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

Doc/Event #:

NC DENR

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):

Kimberly Clark

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

Name: Michael Baldwin

Phone: 828-697-4018

E-mail: mgbaldwi@kcc.com

Facility name:	Facility Address:	Facility Permit #	NC Landfill Rule: (.0500 or .1600)	Actual sampling dates (e.g., October 20-24, 2006)
Kimberly Clark, Berkeley Mills	32 Smyth Avenue, Hendersonville, NC 28792	45-02	.0500	September 5, 2012

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.

John Bruce

Mill Manager

(828) 697-4021

Facility Representative Name (Print)

Title

(Area Code) Telephone Number

John W. Bruce

11-30-2012

Affix NC Licensed/ Professional Geologist Seal

Signature

Date

Kimberly Clark, 32 Smyth Ave., Hendersonville NC, 28792

Facility Representative Address

Not Applicable

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

Revised 6/2009

Rhonda 11/26/12

**KIMBERLY-CLARK SOUTH LANDFILL
FIELD SURVEY OF MONITORING WELL INTEGRITY**

Permit Numbers: _____

Date: 9-5-12

Well Number: MW-13

I. WELL & SITE INSPECTION SUMMARY

	YES	NO	N/A
1. Location/Identification:			
a. Is the well visible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the well properly identified with the well ID?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are there protective posts?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Is the well accessible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the drainage around the well acceptable?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Is the area around the well free from chemical interferences?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Protective Casing:			
a. Is the protective casing free of apparent damage?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Does the lock and cover effectively prevent tampering?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Was the well locked?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the lock in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the casing free of degradation or deterioration?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Surface Seal:			
a. Is the seal in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the seal sloped away from the protective casing?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Is the seal snug against the protective casing and ground?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the surface seal free of erosion undermining?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the seal free of evidence of frost heaving?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Is the seal free of evidence of subsidence?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Internal Casing (Stickup):			
a. Is the annular space clear of debris and water?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the casing at least 1' above the ground?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Does the cap prevent entry of foreign material into the well?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the casing free of kinks or bends?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the dedicated sampling equipment in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Is the well properly vented for equilibration of air pressure?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

5. Actions taken to correct deficiencies (if applicable): _____

6. Comments: _____

**KIMBERLY-CLARK SOUTH LANDFILL
FIELD SURVEY OF MONITORING WELL INTEGRITY**

Permit Numbers: _____

Date: 9-5-12

Well Number: MW-21

I. WELL & SITE INSPECTION SUMMARY

	YES	NO	N/A
1. Location/Identification:			
a. Is the well visible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the well properly identified with the well ID?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are there protective posts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the well accessible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the drainage around the well acceptable?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Is the area around the well free from chemical interferences?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Protective Casing:			
a. Is the protective casing free of apparent damage?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Does the lock and cover effectively prevent tampering?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Was the well locked?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the lock in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the casing free of degradation or deterioration?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Surface Seal:			
a. Is the seal in good condition?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Is the seal sloped away from the protective casing?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
c. Is the seal snug against the protective casing and ground?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Is the surface seal free of erosion undermining?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Is the seal free of evidence of frost heaving?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Is the seal free of evidence of subsidence?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Internal Casing (Stickup):			
a. Is the annular space clear of debris and water?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Is the casing at least 1' above the ground?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Does the cap prevent entry of foreign material into the well?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Is the casing free of kinks or bends?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the dedicated sampling equipment in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Is the well properly vented for equilibration of air pressure?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Actions taken to correct deficiencies (if applicable): _____			

6. Comments: _____			

**KIMBERLY-CLARK SOUTH LANDFILL
FIELD SURVEY OF MONITORING WELL INTEGRITY**

Permit Numbers: _____

Date: 9-5-12

Well Number: MW-31

I. WELL & SITE INSPECTION SUMMARY

	YES	NO	N/A
1. Location/Identification:			
a. Is the well visible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the well properly identified with the well ID?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are there protective posts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the well accessible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the drainage around the well acceptable?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Is the area around the well free from chemical interferences?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Protective Casing:			
a. Is the protective casing free of apparent damage?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Does the lock and cover effectively prevent tampering?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Was the well locked?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the lock in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the casing free of degradation or deterioration?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Surface Seal:			
a. Is the seal in good condition?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Is the seal sloped away from the protective casing?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. Is the seal snug against the protective casing and ground?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Is the surface seal free of erosion undermining?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Is the seal free of evidence of frost heaving?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Is the seal free of evidence of subsidence?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Internal Casing (Stickup):			
a. Is the annular space clear of debris and water?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the casing at least 1' above the ground?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Does the cap prevent entry of foreign material into the well?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the casing free of kinks or bends?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the dedicated sampling equipment in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Is the well properly vented for equilibration of air pressure?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Actions taken to correct deficiencies (if applicable): _____			

6. Comments: _____			

**KIMBERLY-CLARK SOUTH LANDFILL
FIELD SURVEY OF MONITORING WELL INTEGRITY**

Permit Numbers: _____

Date: 9-5-12

Well Number: MW-45

I. WELL & SITE INSPECTION SUMMARY

	YES	NO	N/A
1. Location/Identification:			
a. Is the well visible?	/		
b. Is the well properly identified with the well ID?	/		
c. Are there protective posts?	/		
d. Is the well accessible?	/		
e. Is the drainage around the well acceptable?	/		
f. Is the area around the well free from chemical interferences?	/		
2. Protective Casing:			
a. Is the protective casing free of apparent damage?	/		
b. Does the lock and cover effectively prevent tampering?	/		
c. Was the well locked?	/		
d. Is the lock in good condition?	/		
e. Is the casing free of degradation or deterioration?	/		
3. Surface Seal:			
a. Is the seal in good condition?		/	
b. Is the seal sloped away from the protective casing?			/
c. Is the seal snug against the protective casing and ground?			/
d. Is the surface seal free of erosion undermining?			/
e. Is the seal free of evidence of frost heaving?			/
f. Is the seal free of evidence of subsidence?			/
4. Internal Casing (Stickup):			
a. Is the annular space clear of debris and water?	/		
b. Is the casing at least 1' above the ground?	/		
c. Does the cap prevent entry of foreign material into the well?	/		
d. Is the casing free of kinks or bends?	/		
e. Is the dedicated sampling equipment in good condition?			/
f. Is the well properly vented for equilibration of air pressure?			/

5. Actions taken to correct deficiencies (if applicable): _____

6. Comments: _____

**KIMBERLY-CLARK SOUTH LANDFILL
FIELD SURVEY OF MONITORING WELL INTEGRITY**

Permit Numbers: _____

Date: 9-5-12

Well Number: MW-55

I. WELL & SITE INSPECTION SUMMARY

	YES	NO	N/A
1. Location/Identification:			
a. Is the well visible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the well properly identified with the well ID?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are there protective posts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the well accessible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the drainage around the well acceptable?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Is the area around the well free from chemical interferences?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Protective Casing:			
a. Is the protective casing free of apparent damage?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Does the lock and cover effectively prevent tampering?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Was the well locked?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the lock in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the casing free of degradation or deterioration?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Surface Seal:			
a. Is the seal in good condition?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Is the seal sloped away from the protective casing?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. Is the seal snug against the protective casing and ground?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Is the surface seal free of erosion undermining?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Is the seal free of evidence of frost heaving?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Is the seal free of evidence of subsidence?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Internal Casing (Stickup):			
a. Is the annular space clear of debris and water?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. Is the casing at least 1' above the ground?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Does the cap prevent entry of foreign material into the well?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
d. Is the casing free of kinks or bends?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the dedicated sampling equipment in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Is the well properly vented for equilibration of air pressure?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Actions taken to correct deficiencies (if applicable): _____			

6. Comments: _____			

**KIMBERLY-CLARK SOUTH LANDFILL
FIELD SURVEY OF MONITORING WELL INTEGRITY**

Permit Numbers: _____

Date: 9-5-12

Well Number: MW-61

I. WELL & SITE INSPECTION SUMMARY

	YES	NO	N/A
1. Location/Identification:			
a. Is the well visible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the well properly identified with the well ID?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are there protective posts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the well accessible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the drainage around the well acceptable?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Is the area around the well free from chemical interferences?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Protective Casing:			
a. Is the protective casing free of apparent damage?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Does the lock and cover effectively prevent tampering?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Was the well locked?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the lock in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the casing free of degradation or deterioration?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Surface Seal:			
a. Is the seal in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the seal sloped away from the protective casing?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Is the seal snug against the protective casing and ground?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the surface seal free of erosion undermining?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the seal free of evidence of frost heaving?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Is the seal free of evidence of subsidence?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Internal Casing (Stickup):			
a. Is the annular space clear of debris and water?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the casing at least 1' above the ground?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Does the cap prevent entry of foreign material into the well?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the casing free of kinks or bends?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the dedicated sampling equipment in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Is the well properly vented for equilibration of air pressure?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

5. Actions taken to correct deficiencies (if applicable): _____

6. Comments: _____

**KIMBERLY-CLARK SOUTH LANDFILL
FIELD SURVEY OF MONITORING WELL INTEGRITY**

Permit Numbers: _____

Date: 9-5-12

Well Number: MW-55

I. WELL & SITE INSPECTION SUMMARY

	YES	NO	N/A
1. Location/Identification:			
a. Is the well visible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the well properly identified with the well ID?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Are there protective posts?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the well accessible?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the drainage around the well acceptable?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Is the area around the well free from chemical interferences?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Protective Casing:			
a. Is the protective casing free of apparent damage?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Does the lock and cover effectively prevent tampering?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Was the well locked?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the lock in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the casing free of degradation or deterioration?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Surface Seal:			
a. Is the seal in good condition?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the seal sloped away from the protective casing?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Is the seal snug against the protective casing and ground?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the surface seal free of erosion undermining?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the seal free of evidence of frost heaving?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Is the seal free of evidence of subsidence?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Internal Casing (Stickup):			
a. Is the annular space clear of debris and water?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Is the casing at least 1' above the ground?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Does the cap prevent entry of foreign material into the well?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Is the casing free of kinks or bends?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the dedicated sampling equipment in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Is the well properly vented for equilibration of air pressure?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Actions taken to correct deficiencies (if applicable): _____			

6. Comments: _____			

IV. SAMPLING INFORMATION:

<u>Well ID.</u>	<u>Monitoring Results</u>	
GMW-1 1500	%Methane by Volume: <u>00.0</u> % Oxygen by Volume: <u>19.6</u> *Alarm Level Condition: <u>Safe</u> Depth to Water (ft): <u>5.04</u>	CO ₂ - <u>00.0%</u>
GMW-2 1450	%Methane by Volume: <u>00.0</u> % Oxygen by Volume: <u>17.8</u> Alarm Level Condition: <u>Safe</u> Depth to Water (ft): <u>14.09</u>	CO ₂ - <u>1.5%</u>
GMW-3 1440	% Methane by Volume: <u>0.00</u> % Oxygen by Volume: <u>18.4</u> Alarm Level Condition: <u>Safe</u> Depth to Water (ft): <u>21.19</u>	CO ₂ - <u>1.1%</u>
GMW-4 1400	% Methane by Volume: <u>18.1</u> % Oxygen by Volume: <u>12.0%</u> Alarm Level Condition: <u>Per. 1</u> Depth to Water (ft): <u>32.96</u>	CO ₂ - <u>26.9%</u>
GMW-5 1410	% Methane by Volume: <u>00.0</u> % Oxygen by Volume: <u>17.2</u> Alarm Level Condition: <u>Safe</u> Depth to Water (ft): <u>31.42</u>	CO ₂ <u>2.2%</u>
MW-2S 1330	% Methane by Volume: <u>00.0</u> % Oxygen by Volume: <u>19.7</u> Alarm Level Condition: <u>Safe</u> Depth to Water (ft): <u>5.91</u>	CO ₂ <u>0.0%</u>
MW-3S 1345	% Methane by Volume: <u>00.0</u> % Oxygen by Volume: <u>14.0</u> Alarm Level Condition: <u>Safe</u> Depth to Water (ft): <u>7.71</u>	CO ₂ <u>5.9%</u>

MW-4S

1410

% Methane by Volume: 00.1%

% Oxygen by Volume: 17.0

Alarm Level Condition: SAFE

Depth to Water (ft): 4.91

CO₂ 5.2 %

MW-5S

1430

% Methane by Volume: 00.0

% Oxygen by Volume: 19.2

Alarm Level Condition: SAFE

Depth to Water (ft): 4.30

CO₂ 0.6 %

*Alarm Level Conditions: Safe, Caution, Peril, Explosive. At property boundary Safe 0-2%; Caution 2-3%; Peril 4-5% and >15%; Explosive 5-15%.

Certificate

I certify that the established concentration of landfill gas detected during this monitoring/sampling event does not exceed 25 percent of the lower explosive limit (LEL) for landfill gas in facility structures. The landfill gas concentration does not exceed the LEL for landfill gas at the property boundary, except as noted below.



(Signature)

9-5-12

(Date)

Noted exceptions: _____

