



March 29, 2007

New York State Department of Environmental Conservation
Division of Environmental Remediation
Bureau of Construction Services
625 Broadway, 12th Floor
Albany, New York 12233-7013

APR - 2 2007

Attn: Jeffrey E. Trad, P.E.
Environmental Engineer II

Re: Sonia Road Landfill Remediation Program
Site Registry No. 152013
Post Closure Program

Dear Mr. Trad:

Attached please find the First Quarter Sonia Road Post Closure Monitoring Report for 2007. Also included is the January, February and March 2007 Gas Migration Monitoring Reports; the First Quarter Groundwater Monitoring Well Condition Report as well as the total number of cars stored on site.

If there are any questions please contact me at (631) 224-5645.

Sincerely,

Alan R. Sanchez
Vice-President of Operations

ARS:clp

cc: Christopher A. Andrade, President
Paul J. DiMaria, P.E., Chief Engineer
Francis D. Ribaldo, P.E., Associate Engineer
Joe Cosci, Construction Coordinator
File

clp_NYSDEC_3-29-07_Trad_Rpt_Sonia Rd 2007 1st Quart PCMR.wpd



**TOWN OF ISLIP
SUFFOLK COUNTY, NEW YORK**

**SONIA ROAD LANDFILL
WEST BRENTWOOD, NEW YORK
SITE REGISTRY NO. 152013**



**POST CLOSURE
MONITORING AND MAINTENANCE REPORT**

MARCH 2007

**POST-CLOSURE MONITORING AND MAINTENANCE REPORT
SONIA ROAD LANDFILL
BRENTWOOD, NEW YORK**

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SITE INSPECTION CHECKLIST

**TOWN OF ISLIP
SONIA ROAD LANDFILL
POST CLOSURE MONITORING AND MAINTENANCE PLAN
SITE INSPECTION CHECKLIST**

VEGETATIVE COVER

DATE: 3/14/07

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHAMAN

GRID I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
			Y/N #	WINTER CONDITIONS.
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	

PROBLEM CODE	
a	bare spots
b	dead areas
c	undesirable growth
d	unauthorized dumping
e	litter
f	

PRIORITY CODE	
1	Immediate
2	Correct within 1 week
3	Correct within 1 month
4	Correct within 3 months
5	Correct within 6 months
6	Correct within 1 year

Directions:
List only items or areas of the site where problems or deficiencies are noted or where repairs or rehabilitation are required.

If entire site Vegetative Cover is acceptable, check box and sign below.

Signature: Fazil Rahman

**TOWN OF ISLIP
SONIA ROAD LANDFILL
POST CLOSURE MONITORING AND MAINTENANCE PLAN
SITE INSPECTION CHECKLIST**

SOIL COVER

DATE: 3/14/07

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHAMAN

GRID I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	

PROBLEM CODE			
a	erosion damage	g	waste breakthrough
b	slope movement	h	leachate breakthrough
c	ponding (>10'x10')	i	exposed geosynthetics
d	holes	j	vandalism
e	cracking	k	vector infestation
f	rutting of soils	l	

PRIORITY CODE	
1	Immediate
2	Correct within 1 week
3	Correct within 1 month
4	Correct within 3 months
5	Correct within 6 months
6	Correct within 1 year

Directions:
List only items or areas of the site where problems or deficiencies are noted or where repairs or rehabilitation are required.

If entire site Soil Cover is acceptable, check box and sign below.

Signature: Fazil Rahman

**TOWN OF ISLIP
SONIA ROAD LANDFILL
POST CLOSURE MONITORING AND MAINTENANCE PLAN
SITE INSPECTION CHECKLIST**

REVETMENT MATTING (RIP RAP)

DATE: 3/14/07

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHAMAN

GRID I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Side Slopes				
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
Gabion Curb				
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	

PROBLEM CODE			
a	vandalism	g	waste breakthrough
b	slope movement	h	leachate breakthrough
c	vector infestation	i	exposed geosynthetics
d	holes	j	damaged baskets
e	holes in wire fabric	k	loose ties
f	settlement	l	

PRIORITY CODE	
1	Immediate
2	Correct within 1 week
3	Correct within 1 month
4	Correct within 3 months
5	Correct within 6 months
6	Correct within 1 year

Directions:
List only items or areas of the site where problems or deficiencies are noted or where repairs or rehabilitation are required.

If all Revetment Matting (Rip Rap) and Gabion Curbs are acceptable, check box and sign below.



Signature: Fazil Rahman

**TOWN OF ISLIP
SONIA ROAD LANDFILL
POST CLOSURE MONITORING AND MAINTENANCE PLAN
SITE INSPECTION CHECKLIST**

ACCESS ROADS

DATE: 3/2/07

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHAMAN

GRID I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
<u>F&F1</u>	<u>G,H,I,&J</u>	<u>---</u>	<u>(Y) N # 2</u>	<u>SEE ATTACHED MEMORANDUM DATED 11/16/06.</u>
<u>---</u>	<u>---</u>	<u>---</u>	<u>Y/N #</u>	<u>(SIX PHOTOS PREVIOUSLY TAKEN, RE: 2006 4TH QUARTER REPORT)</u>
<u>C,D,&F5</u>	<u>G</u>	<u>---</u>	<u>Y/N #</u>	<u>BEING MONITORED.</u>
<u>G1</u>	<u>C</u>	<u>---</u>	<u>(Y) N # 2</u>	<u>BETWEEN FENCE & ACCESS ROAD.</u>
			<u>Y/N #</u>	
			<u>Y/N #</u>	
			<u>Y/N #</u>	
			<u>Y/N #</u>	
			<u>Y/N #</u>	
			<u>Y/N #</u>	

PROBLEM CODE			
a	potholes	g	depressions
b	burrow holes	h	<u>CRACKING</u>
c	erosion gullies	i	<u>SLOPE MOVEMENT</u>
d	loss of stone cover	j	<u>FENCE MOVEMENT</u>
e	exposed geotextile	k	
f	obstructions/debris	l	

PRIORITY CODE	
1	Immediate
2	Correct within 1 week
3	Correct within 1 month
4	Correct within 3 months
5	Correct within 6 months
6	Correct within 1 year

Directions:
List only items or areas of the site where problems or deficiencies are noted or where repairs or rehabilitation are required.

If all Access Roads are acceptable, check box and sign below.

Signature: _____

**TOWN OF ISLIP
SONIA ROAD LANDFILL
POST CLOSURE MONITORING AND MAINTENANCE PLAN
SITE INSPECTION CHECKLIST**

STORMWATER COLLECTION SYSTEM (1 of 4)

DATE: 3/2/07

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHAMAN

GRID I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Perimeter Swales				
G1	G	4	Y/N # 1	BEING MONITORED.
E&F5	D	4	Y/N # 2	SOUTH SWALE NEEDS TO BE RE-SHAPED.
			Y/N #	
			Y/N #	
Diversion Swales				
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	

PROBLEM CODE			
a	vandalism	g	erosion control fabric
b	slope movement	h	loss of topsoil
c	silt accumulation	i	exposed geosynthetics
d	ponded water	j	wash outs
e	vegetative cover	k	
f	debris / clogging	l	

PRIORITY CODE	
1	Immediate
2	Correct within 1 week
3	Correct within 1 month
4	Correct within 3 months
5	Correct within 6 months
6	Correct within 1 year

Directions:
List only items or areas of the site where problems or deficiencies are noted or where repairs or rehabilitation are required.

If Perimeter Swales and Diversion Swales are acceptable, check box and sign below

Signature: _____

**TOWN OF ISLIP
SONIA ROAD LANDFILL
POST CLOSURE MONITORING AND MAINTENANCE PLAN
SITE INSPECTION CHECKLIST**

STORMWATER COLLECTION SYSTEM (2 of 4)

DATE: 3/14/07

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHAMAN

GRID I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Inlet Structures				
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
Rip Rap Drainway				Culvert Outlets
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	

PROBLEM CODE			
a	vandalism	g	erosion control fabric
b	slope movement	h	loss of stone
c	silt accumulation	i	loss of topsoil
d	ponded water	j	soil erosion around
e	vegetative cover	k	soil erosion beneath
f	debris / clogging	l	woody vegetation

PRIORITY CODE	
1	Immediate
2	Correct within 1 week
3	Correct within 1 month
4	Correct within 3 months
5	Correct within 6 months
6	Correct within 1 year

Directions:
List only items or areas of the site where problems or deficiencies are noted or where repairs or rehabilitation are required.

If Inlet Structures and Rip Rap Drainway are acceptable, check box and sign below.

Signature: Fazil Rahman

**TOWN OF ISLIP
SONIA ROAD LANDFILL
POST CLOSURE MONITORING AND MAINTENANCE PLAN
SITE INSPECTION CHECKLIST**

STORMWATER COLLECTION SYSTEM (3 of 4)

DATE: 3/14/07

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHAMAN

GRID I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Energy Dissipators				
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
Downchutes				
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	

PROBLEM CODE	
a vandalism	g soil erosion around
b slope movement	h loss of stone
c silt accumulation	i soil erosion beneath
d ponded water	j loose ties on baskets
e damage / instability	k slippage of gabion
f debris / clogging	l woody vegetation

PRIORITY CODE	
1	Immediate
2	Correct within 1 week
3	Correct within 1 month
4	Correct within 3 months
5	Correct within 6 months
6	Correct within 1 year

Directions:
List only items or areas of the site where problems or deficiencies are noted or where repairs or rehabilitation are required.

If Energy Dissipators and Downchutes are acceptable, check box and sign below.

Signature: Fazil Rahman

**TOWN OF ISLIP
SONIA ROAD LANDFILL
POST CLOSURE MONITORING AND MAINTENANCE PLAN
SITE INSPECTION CHECKLIST**

STORMWATER COLLECTION SYSTEM (4 of 4)

DATE: 3/14/07

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHAMAN

GRID I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Drywells				
			Y / N #	
			Y / N #	
			Y / N #	
			Y / N #	
Culverts / Outlets				
			Y / N #	
			Y / N #	
			Y / N #	
			Y / N #	

PROBLEM CODE			
a	vandalism	g	erosion control fabric
b	slope movement	h	soil erosion around
c	silt accumulation	i	exposed geosynthetics
d	ponded water	j	damage / instability
e	vegetative cover	k	
f	debris / clogging	l	

PRIORITY CODE	
1	Immediate
2	Correct within 1 week
3	Correct within 1 month
4	Correct within 3 months
5	Correct within 6 months
6	Correct within 1 year

Directions:
List only items or areas of the site where problems or deficiencies are noted or where repairs or rehabilitation are required.

If Drywells and Culverts are acceptable, check box and sign below.



Signature: Fazil Rahman

**TOWN OF ISLIP
SONIA ROAD LANDFILL
POST CLOSURE MONITORING AND MAINTENANCE PLAN
SITE INSPECTION CHECKLIST**

RECHARGE BASINS

DATE: 3/14/07

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHAMAN

GRID I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Recharge Basin No. 1				
A3	F	4	Y/N # 2	LITTER / DEBRIS, NORTH & WEST SIDE OF BASIN
			Y/N #	
			Y/N #	
			Y/N #	
Recharge Basin No. 2				
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	

PROBLEM CODE	
a	vegetation
b	sideslope erosion
c	sideslope failures
d	silt accumulation
e	overflow conditions
f	debris / clogging

PRIORITY CODE	
1	Immediate
2	Correct within 1 week
3	Correct within 1 month
4	Correct within 3 months
5	Correct within 6 months
6	Correct within 1 year

Directions:
List only items or areas of the site where problems or deficiencies are noted or where repairs or rehabilitation are required.

If both Recharge Basins are acceptable, check box and sign below.

Signature: _____

**TOWN OF ISLIP
SONIA ROAD LANDFILL
POST CLOSURE MONITORING AND MAINTENANCE PLAN
SITE INSPECTION CHECKLIST**

MONITORING WELLS

DATE: 3/14/07

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHAMAN

ITEM I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Landfill Gas Monitoring Wells				See well condition reports prepared by Town consultants.
13 & 14	C	—	Y/N #	RE: TO ATTACHED MEMORANDUM DATED 11/16/06
			Y/N #	
			Y/N #	
			Y/N #	
Groundwater Monitoring Wells				See well condition reports prepared by Town consultants.
115 & 110	AAC	—	Y/N #	RE: TO ATTACHED MEMORANDUM DATED 11/16/06
21 & 135	AAC	—	Y/N #	RE: TO WELL CONDITION REPORT PREPARED BY D&B.
			Y/N #	
			Y/N #	

PROBLEM CODE	
a	damage
b	vandalism
c	settlement
d	vector infestation
e	
f	

PRIORITY CODE	
1	Immediate
2	Correct within 1 week
3	Correct within 1 month
4	Correct within 3 months
5	Correct within 6 months
6	Correct within 1 year

Directions:
List only items or areas of the site where problems or deficiencies are noted or where repairs or rehabilitation are required.

If all Monitoring Wells are acceptable, check box and sign below.

Signature: _____

**TOWN OF ISLIP
SONIA ROAD LANDFILL
POST CLOSURE MONITORING AND MAINTENANCE PLAN
SITE INSPECTION CHECKLIST**

LANDFILL GAS COLLECTION SYSTEM

DATE: 3/14/07

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHAMAN

ITEM I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
LFG Recovery Wells / Valve Vaults				RE: TO PG. 14 FOR ADDITIONAL INFORMATION
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
LFG Collection Wells (GC1 - GC16)				RE: TO PG. 14 FOR ADDITIONAL INFORMATION
GC 3 & 13	D	—	Y/N # 1	RE: TO ATTACHED MEMORANDUM DATED 11/16/06
GC 6, 11, 12 & 14	D	—	Y/N # 3	BEING MONITORED (HEADER PIPE CLOSE TO PRECAST)
—	—	—	Y/N #	GC 3 & 6 PHOTOS RE: TO 2006 4 TH QUARTER REPORT
GC 15, 16	D	—	Y/N # 2	BEING MONITORED (HEADER PIPE CLOSE TO ACCESS COVER & PRECAST)

PROBLEM CODE			
a	odor	g	broken valve
b	damage	h	broken piping
c	vandalism	i	exposed geosynthetics
d	settlement	j	damage / instability
e	vector infestation	k	soil erosion around
f	no vacuum	l	access restricted

PRIORITY CODE	
1	Immediate
2	Correct within 1 week
3	Correct within 1 month
4	Correct within 3 months
5	Correct within 6 months
6	Correct within 1 year

Directions:
List only items or areas of the site where problems or deficiencies are noted or where repairs or rehabilitation are required.

If entire site Landfill Gas Collection System is acceptable, check box and sign below.

Signature: _____

**TOWN OF ISLIP
SONIA ROAD LANDFILL
POST CLOSURE MONITORING AND MAINTENANCE PLAN
SITE INSPECTION CHECKLIST**

LANDFILL GAS COMPOUND

DATE: 3/14/07

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHAMAN

ITEM I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Blower Pad / Blower Nos. 104A and 104B				
104B	K	4	Y1(N) #	FROM FRONT OF BLOWER, APPROX. AFTER 30 MIN. OF RUN TIME (TWO PHOTO PREVIOUSLY TAKEN RE: TO 2006 4 TH QUARTER REPORT.
—	—	—	Y1N #	
			Y1N #	
Flare				SYSTEM USED FOR VENTING
			Y1N #	
			Y1N #	
Condensate Storage			Liquid Volume = <u>3.669</u> gallons Alarms: Y1(N) Test System: OK / Not Successful	
			Y1(N) #	STICK MEASURED, 4.7 INCHES (SYSTEM NOT TESTED)
			Y1N #	

PROBLEM CODE			
a	odor	g	broken valve
b	damage	h	broken piping
c	vandalism	i	broken belts
d	mechanical noise	j	gauges
e	no vacuum	k	OIL LEAK
f	alarms	l	

PRIORITY CODE	
1	Immediate
2	Correct within 1 week
3	Correct within 1 month
4	Correct within 3 months
5	Correct within 6 months
6	Correct within 1 year

Directions:
List only items or areas of the site where problems or deficiencies are noted or where repairs or rehabilitation are required.

If entire Landfill Gas Compound is acceptable, check box and sign below.

Signature: _____

**TOWN OF ISLIP
SONIA ROAD LANDFILL
POST CLOSURE MONITORING AND MAINTENANCE PLAN
SITE INSPECTION CHECKLIST**

SITE FACILITIES

DATE: 3/14/07

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHAMAN

ITEM I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Electrical Panels and Control Panels				Lights tested: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
BLOWER	G	4	Y/N #	BLOWER 104 A, SUPP. FUEL INDICATOR, 104 B, & INLET VALVE 104 A.
			Y/N #	
Gates / Locks / Signs				
			Y/N #	
Fencing (identify location by Grid I.D.)				
			Y/N #	
			Y/N #	
Site Traller				
			Y/N #	

PROBLEM CODE			
a	damage	g	replace indicator lights
b	vandalism	h	tripped / reset required
c	alarms	i	
d	missing locks	j	
e	missing signs	k	
f	hole in fence fabric	l	

PRIORITY CODE	
1	Immediate
2	Correct within 1 week
3	Correct within 1 month
4	Correct within 3 months
5	Correct within 6 months
6	Correct within 1 year

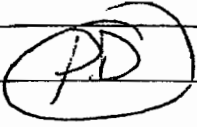
Directions:
List only items or areas of the site where problems or deficiencies are noted or where repairs or rehabilitation are required.

If all Site Facilities are acceptable, check box and sign below.

Signature: _____



MEMORANDUM

TO: Christopher Andrade, President
FROM: Paul J. DiMaria, PE, Chief Engineer 
DATE: November 16, 2006
RE: Conditions at Sonia Road Landfill

The Post Closure Monitoring Inspection recently completed by Operations personnel revealed several conditions at Sonia Road Landfill and environs that require attention. On the morning of November 14th Fazil Rahaman and Francis D. Ribaud, PE visited the site to inspect the areas of concern and later that same day Mr. Ribaud and I visited the site for the same reason. Our observations and recommendations are listed below:

- Condition:** Groundwater monitoring wells MW11S and MW 11D wells (located near the SCATT Property) are buried.

Problem: It is difficult or impossible to get to the well heads for sampling. It must be noted that SCATT has been cooperative in exposing the wells for sampling, but it's an ongoing problem.

Perceived Cause: The wells are located in the entrance way of SCATT Industries and their trucks are continually running through that area. Over the course of time rutting of the driveway occurs and SCATT adds fill to the ruts, thus burying the wells. It is not immediately clear as to whether the property on which the wells are located is owned by SCATT or the Town (it may be part of a Town road).

Recommendations: Engage the services of a surveyor (an on-call contract already exists) to research the location and determine ownership of the property on which the wells are located. If owned by SCATT, determine whether proper easements have been acquired. Once this information is obtained, have the wells properly raised to grade by the responsible party and instruct SCATT as to future actions.
- Condition:** There appears to be movement of soils on the slope along the north property line in the area between the two entrances used by Atlantic Automall. Slope movement is evident by observation of local settlement and cracking of the soil at the top of slope.

Problem: Movement of soil, if continued, can result in a gradual or immediate slope failure. If this happens soil will collapse onto the property below.

Perceived Cause: Saturation of the down slope soils due to storm water from the landfill.



Recommendations: Engage the services of a Consulting Engineer to determine the cause, evaluate the seriousness of the situation, and recommend and design the most cost effective solution. Then engage the services of a contractor to execute the design.

3. **Condition:** Well caps on Gas Monitoring Wells GM-13 and GM-14 appear to have slid and settled.

Problem: The well caps are bearing, both laterally and vertically, on the wells and may cause a break in the well casings.

Perceived Cause: Settlement of the waste mass in the area of the wells. This type of settlement is typical of landfills and was expected. Similar problems were noted and corrected (by a contractor) on other wells.

Recommendations: Engage the services of a contractor to reset the well caps.

4. **Condition:** The well head on Gas Collection Well GC-13 is set under the concrete slab of the access chamber, unlike on the other wells where it is located under the access chamber cover.

Problem: If the access chamber settles it will damage the well head.

Perceived Cause: Closer inspection reveals that the well was most likely installed the way it is now and that there is no immediate evidence of movement or settlement of the access chamber.

Recommendations: Although there may not be settlement occurring, the access chamber on GC-13 should be monitored for settlement as a precaution.

5. **Condition:** The access chamber on Gas Collection Well GC-3 has settled and is collecting water (2 separate problems, which may be related). The well head was recently shortened by sawing off part of the top.

Problem: Settlement of the access chamber can damage the well head. Additionally, the storm water collecting in the access chamber may be being drawn into the gas collection system (which is under vacuum) and could be a source of excess condensate.

Perceived Cause: Settlement of the waste mass in the area of the wells. This type of settlement is typical of landfills and was expected.

Recommendations: Engage the services of a contractor to reset the access chambers.

cc: A. Sanchez
J. Cosci
F. Rahaman ✓
FDR

①

PG. 4 GRID I.D. E&FI



②

PG. 4 GRID I.D. E&FI



③

PG. 4 GRID I.D. G1



④

PG. 4 GRID I.D. G1



5

PG.5 GRID I.D. G1



6

PG.5 GRID I.D. E&F5



7

PG.5 GRID I.D. E&F5



8

PG.9 GRID I.D. A3



⑨ PG.9 GRID I.D. A3



⑩ PG.11 GCWELL 13



⑪ PG.11 GCWELL 11



⑫

PG.11 GCWELL 12



13

PG. 11 GC WELL 14



14

PG. 11 GC WELL 15



15

PG. 11 GC WELL 16



GAS MIGRATION MONITORING

FPM group _____ Engineering and Environmental Science

FPM Group, Ltd.
FPM Engineering Group, P.C.
formerly Fanning, Phillips and Molnar

CORPORATE HEADQUARTERS
909 Marconi Avenue
Ronkonkoma, NY 11779
631/737-8200
Fax 631/737-2410

February 15, 2007

Mr. Alan R. Sanchez
Vice President of Operations
Islip Resource Recovery Agency
401 Main Street
Islip, New York 11751

Re: **Sonia Road Landfill**
February 2007 Landfill Gas Monitoring Results
FPM File No. 631-04-06

Dear Mr. Sanchez:

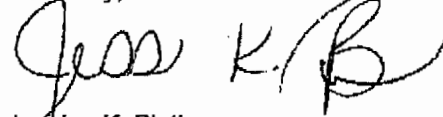
On February 13, 2007, FPM Group (FPM) performed landfill gas monitoring at the above-referenced site. Monitoring was performed with a Landtec GA-90 Gas Analyzer, model GA1/1.

Oxygen (O₂) gas and methane (CH₄) gas were zeroed according to the manufacturer's specifications. The gas analyzer was calibrated with 15 percent (%) CH₄ with the balance nitrogen (N₂) gas, 15% carbon dioxide (CO₂) with the balance N₂ gas, and background O₂ according to the manufacturer's recommendation prior to sampling.

The landfill gas monitoring results are provided in Table 1. The next landfill gas monitoring event is tentatively scheduled for March 7, 2007. Thomas Dudo will be notified several days in advance of the sampling event.

Should you have any questions, please do not hesitate to call me at (631) 737-6200, ext. 229.

Sincerely,



Jessica K. Bluth
Hydrogeologist

JKB:tac
Attachment

cc: Paul J. DiMaria, P.E. (via fax)
Thomas Dudo (via fax)

\\jfs\clients\slip\RRAR\reports\Sonia-llrs\2007 letters\Feb 15.doc

**TABLE 1
LANDFILL GAS MONITORING RESULTS
SONIA ROAD LANDFILL
ISLIP, NEW YORK**

Gas Monitoring Wells

Location ID	Well Condition	Time & Date	CH ₄	CO ₂	O ₂	Atmospheric Pressure	Relative Pressure
SONIBLOW	OK	2/13/2007 12:07	0.0	0.0	20.0	31.0	-0.10
GM-01	OK	2/13/2007 12:11	0.0	0.8	16.8	31.0	0.00
GM-02	OK	2/13/2007 12:17	0.0	1.8	18.6	31.0	0.00
GM-03	OK	2/13/2007 12:22	0.0	0.0	20.1	31.0	0.00
GM-04	OK	2/13/2007 13:43	0.0	0.0	20.0	30.9	0.00
GM-05	OK	2/13/2007 12:30	0.0	0.0	20.2	31.0	-0.40
GM-06	OK	2/13/2007 12:38	0.0	0.0	20.2	31.0	-0.20
GM-07	OK	2/13/2007 12:43	0.0	0.0	20.2	31.0	-0.20
GM-08	OK	2/13/2007 12:48	0.0	0.3	20.1	31.0	-0.10
GM-09	OK	2/13/2007 12:52	0.0	0.4	19.8	31.0	-0.10
GM-10	OK	2/13/2007 12:56	0.0	0.0	20.5	30.6	0.00
GM-11	OK	2/13/2007 13:06	0.0	0.7	19.9	30.2	-0.50
GM-12	OK	2/13/2007 13:10	0.0	0.0	20.1	30.9	0.00
GM-13	*	2/13/2007 13:15	0.0	0.0	20.1	30.9	-0.50
GM-14	*	2/13/2007 13:20	0.0	0.2	20.1	30.9	-0.70
GM-15	OK	2/13/2007 13:26	0.0	0.1	20.1	30.9	-0.90
GM-16	OK	2/13/2007 13:30	0.0	0.3	20.0	30.9	0.00
GM-17	OK	2/13/2007 13:34	0.0	0.1	20.1	30.9	0.00

Notes:

CH₄, CO₂, and O₂ are reported in percent gas.

Relative well head pressure is reported in inches of water.

Atmospheric pressure is reported in inches of mercury.

Recovery System Status - On

Weather - Overcast, 25°F

*GM-13 - Exterior casing is obstructed by well and will not close

*GM-14 - Exterior casing is obstructed by well and will not close

FPM

FPM group _____ Engineering and Environmental Science

FPM Group, Ltd.
FPM Engineering Group, P.C.
formerly Fanning, Phillips and Molnar

CORPORATE HEADQUARTERS
909 Marconi Avenue
Ronkonkoma, NY 11779
631/737-6200
Fax 631/737-2410

March 21, 2007

Mr. Alan R. Sanchez
Vice President of Operations
Islip Resource Recovery Agency
401 Main Street
Islip, New York 11751

Re: **Sonia Road Landfill**
March 2007 Landfill Gas Monitoring Results
FPM File No. 631-04-06

Dear Mr. Sanchez:

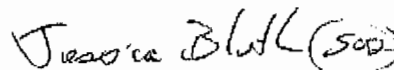
On March 19, 2007, FPM Group (FPM) performed landfill gas monitoring at the above-referenced site. Monitoring was performed with a Landtec GA-90 Gas Analyzer, model GA1/1.

Oxygen (O₂) gas and methane (CH₄) gas were zeroed according to the manufacturer's specifications. The gas analyzer was calibrated with 15 percent (%) CH₄ with the balance nitrogen (N₂) gas, 15% carbon dioxide (CO₂) with the balance N₂ gas, and background O₂ according to the manufacturer's recommendation prior to sampling.

The landfill gas monitoring results are provided in Table 1. The next landfill gas monitoring event is tentatively scheduled for April 11, 2007. Thomas Dudo will be notified several days in advance of the sampling event.

Should you have any questions, please do not hesitate to call me at (631) 737-6200, ext. 229.

Sincerely,



Jessica K. Bluth
Hydrogeologist

JKB:tac
Attachment

cc: Paul J. DiMaria, P.E. (via fax)
Thomas Dudo (via fax)

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TABLE 1
LANDFILL GAS MONITORING RESULTS
SONIA ROAD LANDFILL
ISLIP, NEW YORK

Gas Monitoring Wells

Location ID	Well Condition	Time & Date	CH ₄	CO ₂	O ₂	Atmospheric Pressure	Relative Pressure
SONIBLOW	OK	3/19/2007 11:21	0.0	0.0	20.1	30.9	-43.20
GM-01	OK	3/19/2007 11:23	0.0	0.7	17.4	30.9	0.60
GM-02	OK	3/19/2007 11:36	0.0	1.5	18.1	30.8	-0.20
GM-03	OK	3/19/2007 11:44	0.0	0.0	20.4	30.3	0.00
GM-04	OK	3/19/2007 13:09	0.0	0.1	20.2	30.7	0.00
GM-05	OK	3/19/2007 11:53	0.0	0.0	20.1	30.8	-0.60
GM-06	OK	3/19/2007 11:59	0.0	0.0	20.0	30.9	-0.20
GM-07	OK	3/19/2007 12:05	0.0	0.1	20.0	30.9	-0.30
GM-08	OK	3/19/2007 12:10	0.0	0.2	19.8	30.9	-0.10
GM-09	OK	3/19/2007 12:14	0.0	0.4	19.6	30.9	-0.20
GM-10	OK	3/19/2007 12:19	0.0	0.0	19.9	30.9	0.00
GM-11	OK	3/19/2007 12:24	0.0	0.7	19.4	30.9	0.00
GM-12	OK	3/19/2007 12:30	0.0	0.0	19.8	30.9	-0.10
GM-13	*	3/19/2007 12:34	0.0	0.3	19.7	30.9	0.00
GM-14	*	3/19/2007 12:39	0.0	0.3	20.8	29.2	-0.40
GM-15	OK	3/19/2007 12:44	0.0	0.0	20.9	29.3	-0.40
GM-16	OK	3/19/2007 12:48	0.0	0.0	20.6	29.9	-0.10
GM-17	OK	3/19/2007 12:53	0.0	0.1	19.9	30.9	0.00

Notes:

CH₄, CO₂, and O₂ are reported in percent gas.

Relative well head pressure is reported in inches of water.

Atmospheric pressure is reported in inches of mercury.

Recovery System Status - On

Weather - Partly sunny, 40°F

***GM-13 - Exterior casing is obstructed by well and will not close**

***GM-14 - Exterior casing is obstructed by well and will not close**

FPM

FPM group _____ Engineering and Environmental Science

FPM Group, Ltd.
FPM Engineering Group, P.C.
formerly Fanning, Phillips and Molnar

CORPORATE HEADQUARTERS
909 Marconi Avenue
Ronkonkoma, NY 11779
631/737-6200
Fax 631/737-2410

January 19, 2007

Mr. Alan R. Sanchez
Vice President of Operations
Islip Resource Recovery Agency
401 Main Street
Islip, New York 11751

Re: **Sonia Road Landfill**
January 2007 Landfill Gas Monitoring Results
FPM File No. 631-04-06

Dear Mr. Sanchez:

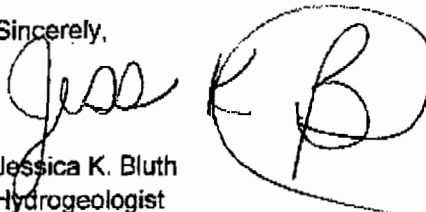
On January 19, 2007, FPM Group (FPM) performed landfill gas monitoring at the above-referenced site. Monitoring was performed with a Landtec GA-90 Gas Analyzer, model GA1/1.

Oxygen (O₂) gas and methane (CH₄) gas were zeroed according to the manufacturer's specifications. The gas analyzer was calibrated with 15 percent (%) CH₄ with the balance nitrogen (N₂) gas, 15% carbon dioxide (CO₂) with the balance N₂ gas, and background O₂ according to the manufacturer's recommendation prior to sampling.

The landfill gas monitoring results are provided in Table 1. The next landfill gas monitoring event is tentatively scheduled for February 7, 2007. Thomas Dudo will be notified several days in advance of the sampling event.

Should you have any questions, please do not hesitate to call me at (631) 737-6200, ext. 229.

Sincerely,


Jessica K. Bluth
Hydrogeologist

JKB:tac
Attachment

cc: Paul J. DiMaria, P.E. (via fax)
Thomas Dudo (via fax)

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**TABLE 1
LANDFILL GAS MONITORING RESULTS
SONIA ROAD LANDFILL
ISLIP, NEW YORK**

Gas Monitoring Wells

Location ID	Well Condition	Time & Date	CH ₄	CO ₂	O ₂	Atmospheric Pressure	Relative Pressure
SONIBLOW	OK	1/19/2007 12:20	0.0	0.0	19.8	30.1	-41.90
GM-01	OK	1/19/2007 12:23	0.0	0.9	16.8	30.1	2.00
GM-02	OK	1/19/2007 12:32	0.0	3.0	13.6	30.2	-0.10
GM-03	OK	1/19/2007 12:36	0.0	0.0	19.9	30.2	0.00
GM-04	OK	1/19/2007 13:43	0.0	0.0	19.8	30.3	0.00
GM-05	OK	1/19/2007 12:42	0.0	0.4	19.8	30.1	-0.40
GM-06	OK	1/19/2007 12:46	0.0	0.2	19.7	30.2	-0.20
GM-07	OK	1/19/2007 12:52	0.0	0.5	19.5	30.2	-0.20
GM-08	OK	1/19/2007 12:56	0.0	2.1	16.4	30.2	-0.10
GM-09	OK	1/19/2007 13:01	0.0	1.0	17.6	30.2	-0.10
GM-10	OK	1/19/2007 13:04	0.0	0.0	19.9	30.2	0.00
GM-11	OK	1/19/2007 13:08	0.0	1.1	18.7	30.2	0.00
GM-12	OK	1/19/2007 13:13	0.0	0.0	19.9	30.2	0.00
GM-13	*	1/19/2007 13:17	0.0	0.5	19.4	30.2	0.00
GM-14	*	1/19/2007 13:23	0.0	0.8	18.5	30.2	-0.20
GM-15	OK	1/19/2007 13:28	0.0	0.0	19.9	30.2	0.00
GM-16	OK	1/19/2007 13:32	0.0	0.9	18.5	30.3	0.00
GM-17	OK	1/19/2007 13:35	0.0	0.3	19.6	30.3	0.00

Notes:

CH₄, CO₂, and O₂ are reported in percent gas.

Relative well head pressure is reported in inches of water.

Atmospheric pressure is reported in inches of mercury.

Recovery System Status - On

Weather - Overcast, 48°F

*GM-13 - Exterior casing is obstructed by well and will not close

*GM-14 - Exterior casing is obstructed by well and will not close

FPM

GROUNDWATER WELL CONDITION



Dvirka and Bartilucci

CONSULTING ENGINEERS

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Edward J. Reilly

Daniel Shabat, P.E.

Charles J. Wachsmuth, P.E.

February 15, 2007

Paul J. DiMaria, P.E.
Chief Engineer
Islip Resource Recovery Agency
401 Main Street
Islip, NY 11751

Re: Blydenburgh Road Landfill Complex
Post-Closure Groundwater Monitoring Program
Well Condition Report
D&B No. 2208-16B

wrong landfill

Dear Mr. DiMaria:

Enclosed please find the First Quarter 2007 Well Condition Report for the Blydenburgh Road Landfill Complex. This report consists of Table 1, which presents a summary of monitoring well status and deficiencies along with recommendations. Wells which require attention have been shaded on the table. In addition, individual monitoring well inspection checklists are included.

If you have any questions or require additional information, please contact me.

Very truly yours,

Kenneth P. Wenz, Jr., CPG
Senior Associate

KPW/CM/kap

Enclosure

cc: F. Ribaldo (IRRA)

◆2208\KPW07Ltr-01

Table 1

**BLYDENBURGH ROAD LANDFILL COMPLEX
POST CLOSURE GROUNDWATER MONITORING PROGRAM
SUMMARY OF MONITORING WELL STATUS AND DEFICIENCIES
FIRST QUARTER 2007 SAMPLING EVENT**

Well Designation	Surface Concrete Seal			Ponding of Water Around Concrete Seal	Protective Flush-Mounted Cover/Standpipe Cover and Lock		Well Casing Alignment	Survey Measuring Point Clearly Marked	Well Clearly Labeled	Well is Protected	Remarks and Recommendations
	Intact	Cracked	Missing		Cover/Pipe - Intact	Lock - In Place					
GM-1S			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
GM-1I			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
GM-1D			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
GM-2S			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
GM-2I			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
GM-2D			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
GM-3S			Not Visible	No	Yes	No	Straight	Yes	Yes	Yes	Well not locked. No action required. This well is not owned by the IRRA.
GM-3I			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	Concrete inner vault cracked below grade. No action required.
GM-3D			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
4G-1			Not Visible	No	No	Yes	Straight	Yes	Yes	Yes	
4G-2			Not Visible	No	Yes	Yes	Straight	No	Yes	Yes	No survey point, well needs to be resurveyed.
4M-1			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	≈110 ft tubing lodged in well No action required.
4M-2			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
5G-1			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
6G-1			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
6G-2			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
6G-3		Yes		No	Yes	Yes	Straight	Yes	Yes	Yes	
6M-1			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
7G-1			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
7M-1	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
8G-1	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
8M-1	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
8M-2	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	

Table 1 (continued)

**BLYDENBURGH ROAD LANDFILL COMPLEX
POST CLOSURE GROUNDWATER MONITORING PROGRAM
SUMMARY OF MONITORING WELL STATUS AND DEFICIENCIES
FIRST QUARTER 2007 SAMPLING EVENT**

Well Designation	Surface Concrete Seal			Ponding of Water Around Concrete Seal	Protective Flush-Mounted Cover/Standpipe Cover and Lock		Well Casing Alignment	Survey Measuring Point Clearly Marked	Well Clearly Labeled	Well is Protected	Remarks and Recommendations
	Intact	Cracked	Missing		Cover/Pipe - Intact	Lock - In Place					
9G-1			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
9M-1			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
10G-1	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
10M-1	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
11G-1			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
11G-2	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
11M-1			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
12G-1			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
12M-1			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
13G-1			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
13M-1	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
14G-1	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
14G-1A	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
14G-2	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
14M-1	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
15G-1	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
15M-1	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
16G-1			Not Visible	Yes	Yes	Yes	Straight	Yes	Yes	Yes	
16M-1			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
18G-1			Not Visible	No	Yes	Yes	Straight	Yes	Yes	Yes	
18G-2	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
22M-1	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	
23M-1	Yes			No	Yes	Yes	Straight	Yes	Yes	Yes	

Note:

Monitoring well that requires attention.

MONITORING WELL INSPECTION CHECKLIST

Well No. GM-1S

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature *Chris Min*

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. GM-11

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature 


Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. GM-1D

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature 
 Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. GM-2S

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. GM-2I

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. GM-2D

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature *Chris M...*

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. GM-3S

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	_____	X	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: Well not locked. No action required . This well is not owned by IRRA.

Inspector Signature

Chris Mori

Date of Inspection

2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. GM-3I

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: Concrete inner vault cracked/separated below grade. No action required.

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. GM-3D

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature *Chris M...*

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 4G-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	_____	_____	_____
Standpipe - Intact	_____	X	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature *Chris Moore*

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 4G-2

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	<u>X</u>	<u> </u>	<u> </u>
Cracked	<u> </u>	<u> </u>	<u> </u>
Missing	<u> </u>	<u> </u>	<u> </u>
2. Ponding of Water Around Concrete Seal	<u>X</u>	<u> </u>	<u> </u>
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	<u> </u>	<u> </u>	<u> </u>
Standpipe - Intact	<u>X</u>	<u> </u>	<u> </u>
Lock - Intact	<u>X</u>	<u> </u>	<u> </u>
4. Well Casing Alignment (Straight)	<u>X</u>	<u> </u>	<u> </u>
5. Survey Measuring Point Clearly Marked	<u> </u>	<u>X</u>	<u>Well needs to be resurveyed.</u>
6. Well Clearly Labeled	<u>X</u>	<u> </u>	<u> </u>
7. Well is Protected	<u>X</u>	<u> </u>	<u> </u>

Comments: _____

Inspector Signature 

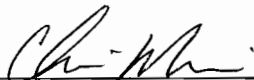
Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 4M-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	_____	_____	_____
Standpipe - Intact	X	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: ~ 110ft of tubing lodged in well. No action required.

Inspector Signature 

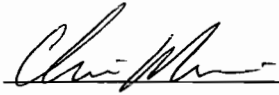
Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 4M-2

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	_____	_____	_____
Standpipe - Intact	X	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature 
 Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 5G-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	_____	_____	_____
Standpipe - Intact	X	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature *Chris Mori*
 Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 6G-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	_____	_____	_____
Standpipe - Intact	X	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature *Chris Moore*

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 6G-2

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not Visible @ Ground Surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	_____	_____	_____
Standpipe - Intact	X	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature 


Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 6G-3

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	X	_____	No repair required
Missing	_____	_____	_____
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	_____	_____	_____
Standpipe - Intact	X	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature 
 Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 6M-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	<u>Not visible @ ground surface</u>
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	_____	_____	_____
Standpipe - Intact	X	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature *Chris M...*

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 7G-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	<u>X</u>	_____	<u>Not visible @ ground surface</u>
2. Ponding of Water Around Concrete Seal	_____	<u>X</u>	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	_____	_____	_____
Standpipe - Intact	<u>X</u>	_____	_____
Lock - Intact	<u>X</u>	_____	_____
4. Well Casing Alignment (Straight)	<u>X</u>	_____	_____
5. Survey Measuring Point Clearly Marked	<u>X</u>	_____	_____
6. Well Clearly Labeled	<u>X</u>	_____	_____
7. Well is Protected	<u>X</u>	_____	_____

Comments: _____

Inspector Signature *Chris M...*

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 7M-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	<u>X</u>	<u> </u>	<u> </u>
Cracked	<u> </u>	<u> </u>	<u> </u>
Missing	<u> </u>	<u> </u>	<u> </u>
2. Ponding of Water Around Concrete Seal	<u> </u>	<u>X</u>	<u> </u>
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	<u>X</u>	<u> </u>	<u> </u>
Standpipe - Intact	<u> </u>	<u> </u>	<u> </u>
Lock - Intact	<u>X</u>	<u> </u>	<u> </u>
4. Well Casing Alignment (Straight)	<u>X</u>	<u> </u>	<u> </u>
5. Survey Measuring Point Clearly Marked	<u>X</u>	<u> </u>	<u> </u>
6. Well Clearly Labeled	<u>X</u>	<u> </u>	<u> </u>
7. Well is Protected	<u>X</u>	<u> </u>	<u> </u>

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 8G-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	X		
Cracked			
Missing			
2. Ponding of Water Around Concrete Seal		X	
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X		
Standpipe - Intact			
Lock - Intact	X		
4. Well Casing Alignment (Straight)	X		
5. Survey Measuring Point Clearly Marked	X		
6. Well Clearly Labeled	X		
7. Well is Protected	X		

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 8M-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	X		
Cracked			
Missing			
2. Ponding of Water Around Concrete Seal		X	
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X		
Standpipe - Intact			
Lock - Intact	X		
4. Well Casing Alignment (Straight)	X		
5. Survey Measuring Point Clearly Marked	X		
6. Well Clearly Labeled	X		
7. Well is Protected	X		

Comments: _____

Inspector Signature *Chris M...*

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 8M-2

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	<u>X</u>	<u> </u>	<u> </u>
Cracked	<u> </u>	<u> </u>	<u> </u>
Missing	<u> </u>	<u> </u>	<u> </u>
2. Ponding of Water Around Concrete Seal	<u> </u>	<u>X</u>	<u> </u>
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	<u>X</u>	<u> </u>	<u> </u>
Standpipe - Intact	<u> </u>	<u> </u>	<u> </u>
Lock - Intact	<u>X</u>	<u> </u>	<u> </u>
4. Well Casing Alignment (Straight)	<u>X</u>	<u> </u>	<u> </u>
5. Survey Measuring Point Clearly Marked	<u>X</u>	<u> </u>	<u> </u>
6. Well Clearly Labeled	<u>X</u>	<u> </u>	<u> </u>
7. Well is Protected	<u>X</u>	<u> </u>	<u> </u>

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 9G-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not visible @ ground surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature 

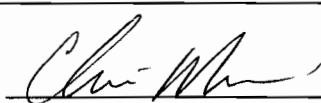
Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 9M-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	<u>X</u>	_____	<u>Not visible @ ground surface</u>
2. Ponding of Water Around Concrete Seal	_____	<u>X</u>	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	<u>X</u>	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	<u>X</u>	_____	_____
4. Well Casing Alignment (Straight)	<u>X</u>	_____	_____
5. Survey Measuring Point Clearly Marked	<u>X</u>	_____	_____
6. Well Clearly Labeled	<u>X</u>	_____	_____
7. Well is Protected	<u>X</u>	_____	_____

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 10G-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	<u>X</u>	<u> </u>	<u> </u>
Cracked	<u> </u>	<u> </u>	<u> </u>
Missing	<u> </u>	<u> </u>	<u> </u>
2. Ponding of Water Around Concrete Seal	<u> </u>	<u>X</u>	<u> </u>
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	<u>X</u>	<u> </u>	<u> </u>
Standpipe - Intact	<u> </u>	<u> </u>	<u> </u>
Lock - Intact	<u>X</u>	<u> </u>	<u> </u>
4. Well Casing Alignment (Straight)	<u>X</u>	<u> </u>	<u> </u>
5. Survey Measuring Point Clearly Marked	<u>X</u>	<u> </u>	<u> </u>
6. Well Clearly Labeled	<u>X</u>	<u> </u>	<u> </u>
7. Well is Protected	<u>X</u>	<u> </u>	<u> </u>

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 10M-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	X		
Cracked			
Missing			
2. Ponding of Water Around Concrete Seal		X	
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X		
Standpipe - Intact			
Lock - Intact	X		
4. Well Casing Alignment (Straight)	X		
5. Survey Measuring Point Clearly Marked	X		
6. Well Clearly Labeled	X		
7. Well is Protected	X		

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 11G-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not visible @ ground surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	_____	_____	_____
Standpipe - Intact	X	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature 


Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 11G-2

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	X		
Cracked			
Missing			
2. Ponding of Water Around Concrete Seal		X	
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact			
Standpipe - Intact	X		
Lock - Intact	X		
4. Well Casing Alignment (Straight)	X		
5. Survey Measuring Point Clearly Marked	X		
6. Well Clearly Labeled	X		
7. Well is Protected	X		

Comments: _____

Inspector Signature 

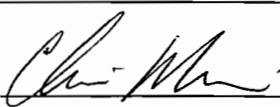
Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 11M-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	<u>X</u>	_____	<u>Not visible @ ground surface</u>
2. Ponding of Water Around Concrete Seal	_____	<u>X</u>	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	_____	_____	_____
Standpipe - Intact	<u>X</u>	_____	_____
Lock - Intact	<u>X</u>	_____	_____
4. Well Casing Alignment (Straight)	<u>X</u>	_____	_____
5. Survey Measuring Point Clearly Marked	<u>X</u>	_____	_____
6. Well Clearly Labeled	<u>X</u>	_____	_____
7. Well is Protected	<u>X</u>	_____	_____

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 12G-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	X	_____	Not visible @ ground surface
2. Ponding of Water Around Concrete Seal	_____	X	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	_____	_____	_____
Standpipe - Intact	X	_____	_____
Lock - Intact	X	_____	_____
4. Well Casing Alignment (Straight)	X	_____	_____
5. Survey Measuring Point Clearly Marked	X	_____	_____
6. Well Clearly Labeled	X	_____	_____
7. Well is Protected	X	_____	_____

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 12M-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	<u>X</u>	_____	<u>Not visible @ ground surface</u>
2. Ponding of Water Around Concrete Seal	_____	<u>X</u>	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	<u>X</u>	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	<u>X</u>	_____	_____
4. Well Casing Alignment (Straight)	<u>X</u>	_____	_____
5. Survey Measuring Point Clearly Marked	<u>X</u>	_____	_____
6. Well Clearly Labeled	<u>X</u>	_____	_____
7. Well is Protected	<u>X</u>	_____	_____

Comments: _____

Inspector Signature 


Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 13G-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	<u>X</u>	_____	<u>Not visible @ ground surface</u>
2. Ponding of Water Around Concrete Seal	_____	<u>X</u>	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	<u>X</u>	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	<u>X</u>	_____	_____
4. Well Casing Alignment (Straight)	<u>X</u>	_____	_____
5. Survey Measuring Point Clearly Marked	<u>X</u>	_____	_____
6. Well Clearly Labeled	<u>X</u>	_____	_____
7. Well is Protected	<u>X</u>	_____	_____

Comments: _____

Inspector Signature 
 Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 13M-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	X		
Cracked			
Missing			
2. Ponding of Water Around Concrete Seal		X	
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X		
Standpipe - Intact			
Lock - Intact	X		
4. Well Casing Alignment (Straight)	X		
5. Survey Measuring Point Clearly Marked	X		
6. Well Clearly Labeled	X		
7. Well is Protected	X		

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 14G-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	X		
Cracked			
Missing			
2. Ponding of Water Around Concrete Seal		X	
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X		
Standpipe - Intact			
Lock - Intact	X		
4. Well Casing Alignment (Straight)	X		
5. Survey Measuring Point Clearly Marked	X		
6. Well Clearly Labeled	X		
7. Well is Protected	X		

Comments: _____

Inspector Signature *Chris White*

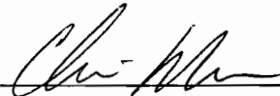
Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 14G-1A

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	X		
Cracked			
Missing			
2. Ponding of Water Around Concrete Seal		X	
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X		
Standpipe - Intact			
Lock - Intact	X		
4. Well Casing Alignment (Straight)	X		
5. Survey Measuring Point Clearly Marked	X		
6. Well Clearly Labeled	X		
7. Well is Protected	X		

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 14G-2

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	X		
Cracked			
Missing			
2. Ponding of Water Around Concrete Seal		X	
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X		
Standpipe - Intact			
Lock - Intact	X		
4. Well Casing Alignment (Straight)	X		
5. Survey Measuring Point Clearly Marked	X		
6. Well Clearly Labeled	X		
7. Well is Protected	X		

Comments: _____

Inspector Signature 


Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 14M-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	X		
Cracked			
Missing			
2. Ponding of Water Around Concrete Seal		X	
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X		
Standpipe - Intact			
Lock - Intact	X		
4. Well Casing Alignment (Straight)	X		
5. Survey Measuring Point Clearly Marked	X		
6. Well Clearly Labeled	X		
7. Well is Protected	X		

Comments: _____

Inspector Signature 
 Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 15G-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	X		
Cracked			
Missing			
2. Ponding of Water Around Concrete Seal		X	
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X		
Standpipe - Intact			
Lock - Intact	X		
4. Well Casing Alignment (Straight)	X		
5. Survey Measuring Point Clearly Marked	X		
6. Well Clearly Labeled	X		
7. Well is Protected	X		

Comments: _____

Inspector Signature 

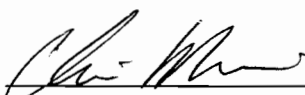
Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 15M-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	X		
Cracked			
Missing			
2. Ponding of Water Around Concrete Seal		X	
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	X		
Standpipe - Intact			
Lock - Intact	X		
4. Well Casing Alignment (Straight)	X		
5. Survey Measuring Point Clearly Marked	X		
6. Well Clearly Labeled	X		
7. Well is Protected	X		

Comments: _____

Inspector Signature 
 Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 16G-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	<u>X</u>	_____	<u>Not visible @ ground surface</u>
2. Ponding of Water Around Concrete Seal	<u>X</u>	_____	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	<u>X</u>	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	<u>X</u>	_____	_____
4. Well Casing Alignment (Straight)	<u>X</u>	_____	_____
5. Survey Measuring Point Clearly Marked	<u>X</u>	_____	_____
6. Well Clearly Labeled	<u>X</u>	_____	_____
7. Well is Protected	<u>X</u>	_____	_____

Comments: _____

Inspector Signature 

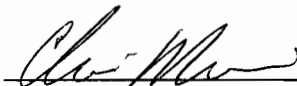
Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 16M-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	<u>X</u>	_____	<u>Not visible @ ground surface</u>
2. Ponding of Water Around Concrete Seal	_____	<u>X</u>	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	<u>X</u>	_____	_____
Standpipe - Intact	_____	_____	_____
Lock - Intact	<u>X</u>	_____	_____
4. Well Casing Alignment (Straight)	<u>X</u>	_____	_____
5. Survey Measuring Point Clearly Marked	<u>X</u>	_____	_____
6. Well Clearly Labeled	<u>X</u>	_____	_____
7. Well is Protected	<u>X</u>	_____	_____

Comments: _____

Inspector Signature 

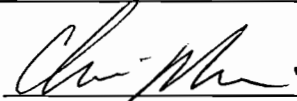
Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 18G-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	_____	_____	_____
Cracked	_____	_____	_____
Missing	<u>X</u>	_____	<u>Not visible @ ground surface</u>
2. Ponding of Water Around Concrete Seal	_____	<u>X</u>	_____
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	_____	_____	_____
Standpipe - Intact	<u>X</u>	_____	_____
Lock - Intact	<u>X</u>	_____	_____
4. Well Casing Alignment (Straight)	<u>X</u>	_____	_____
5. Survey Measuring Point Clearly Marked	<u>X</u>	_____	_____
6. Well Clearly Labeled	<u>X</u>	_____	_____
7. Well is Protected	<u>X</u>	_____	_____

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 18G-2

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	X		
Cracked			
Missing			
2. Ponding of Water Around Concrete Seal		X	
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact			
Standpipe - Intact	X		
Lock - Intact	X		
4. Well Casing Alignment (Straight)	X		
5. Survey Measuring Point Clearly Marked	X		
6. Well Clearly Labeled	X		
7. Well is Protected	X		

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 22M-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	<u>X</u>	<u> </u>	<u> </u>
Cracked	<u> </u>	<u> </u>	<u> </u>
Missing	<u> </u>	<u> </u>	<u> </u>
2. Ponding of Water Around Concrete Seal	<u> </u>	<u>X</u>	<u> </u>
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	<u>X</u>	<u> </u>	<u> </u>
Standpipe - Intact	<u> </u>	<u> </u>	<u> </u>
Lock - Intact	<u>X</u>	<u> </u>	<u> </u>
4. Well Casing Alignment (Straight)	<u>X</u>	<u> </u>	<u> </u>
5. Survey Measuring Point Clearly Marked	<u>X</u>	<u> </u>	<u> </u>
6. Well Clearly Labeled	<u>X</u>	<u> </u>	<u> </u>
7. Well is Protected	<u>X</u>	<u> </u>	<u> </u>

Comments: _____

Inspector Signature 

Date of Inspection 2/5/07

MONITORING WELL INSPECTION CHECKLIST

Well No. 23M-1

	<u>Yes</u>	<u>No</u>	<u>Remarks</u>
1. Surface Concrete Seal			
Intact	<u>X</u>		
Cracked			
Missing			
2. Ponding of Water Around Concrete Seal	<u>X</u>		
3. Protective Flush-Mounted Cover/Standpipe and Lock			
Flush-Mounted Cover - Intact	<u>X</u>		
Standpipe - Intact			
Lock - Intact	<u>X</u>		
4. Well Casing Alignment (Straight)	<u>X</u>		
5. Survey Measuring Point Clearly Marked	<u>X</u>		
6. Well Clearly Labeled	<u>X</u>		
7. Well is Protected	<u>X</u>		

Comments: _____

Inspector Signature *Chris Miller*

Date of Inspection 2/5/07

APPENDIX A

ATT: FAZ

631-234-1408

MARCH 21,2007

ATLANTIC CENTRAL STORAGE

DEALERSHIPS

UNITS

ATLANTIC HYUNDAI

716

ATLANTIC INFINITI

259

ADVANTAGE TOYOTA

73

ATLANTIC CADDY

90

ATLANTIC CHEVY

115

ATLANTIC NISSAN

480

ATLANTIC TOYOTA

320

ATLANTIC HONDA

254

LEXUS OF MASSAPEQUA

NOT INCLUDED

LEXUSOF R.V.C

NOT INCLUDED

MILLENNIUM HONDA

81

MILLENNIUM HYUNDAI

232

WESTBURY NISSAN

324

TOTAL

2944 UNITS IN STORAGE

pulled down
scanned / up to hill
total units moved in