



April 7, 2008

APR 10 2008

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

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 2008. Also included is the January, February and March 2008 Gas Migration Monitoring Report; 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:imb

cc: Christopher A. Andrade, President
Anthony J. Varrichio, P.E., Chief Engineer
Joe Cosci, Construction Coordinator
File

imb_NYSDEC_4-7-08_Trad_Rpt_Sonia Rd 2007 1st Quart 2008 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**

**JANUARY THROUGH MARCH
2008**

**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

Quarterly Inspection Storm Inspection _____

DATE: 3/10/08

INSPECTION BY: EAZIL 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: _____

Eazil Rahman

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

SOIL COVER

Quarterly Inspection

Storm Inspection

DATE: 3/10/08

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
b	slope movement
c	ponding (>10'x10')
d	holes
e	cracking
f	rutting of soils
g	waste breakthrough
h	leachate breakthrough
i	exposed geosynthetics
j	vandalism
k	vector infestation
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: 3/10/08

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				
<u>3B</u>	<u>L</u>	<u>4</u>	<u>Y/N # 1</u>	<u>ALONG SIDE OF GABIAN CURB.</u>
			Y/N #	
			Y/N #	
			Y/N #	

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

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: _____

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

ACCESS ROADS

Quarterly Inspection

Storm Inspection

DATE: 3/10/08

INSPECTION BY: FAZIL RAHAMAN

GRID I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
C5,D5,F5	GAH	4	PHOTO # 3	BEING MONITORED.
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	

PROBLEM CODE	
a	potholes
b	burrow holes
c	erosion gullies
d	loss of stone cover
e	exposed geotextile
f	obstructions/debris
g	depressions
h	<u>PONDING</u>
i	
j	
k	
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: 3/10/08

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHAMAN

GRID I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Perimeter Swales				
G5, F5, G5, G1	D	1	YIN # 4	
F5 & F5	B	7	YIN #	RE: TO PHOTO'S PREVIOUSLY TAKEN.
G1 & H4	G	6	YIN # 1	RE: TO PHOTO & PHOTO PREVIOUSLY TAKEN.
			YIN #	
Diversion Swales				
G5, H5	E	5	YIN #	AROUND COLLECTOR'S / LOCATED ON SOUTHEAST.
B4	F	1	YIN # 1	REMOVE TREE STUMPS (SHRUBS BY VEGETATIVE COVER).
			YIN #	
			YIN #	

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

7 - BEING MONITORED

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: 3/10/08

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHMAN

GRID I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Inlet Structures				
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
Rip Rap Drainway				
<u>B43C4, D14</u>	<u>E</u>	<u>4</u>	<u>Y(N) #</u>	<u>Culvert Outlets REMOVE UNWANTED VEGETATION.</u>
			Y/N #	
			Y/N #	
			Y/N #	

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

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

STORMWATER COLLECTION SYSTEM (3 of 4)

DATE: 3/10/08

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				
B4	L	4	Y(N) #	UN-WANTED WOODY VEGETATION.
B5	M	4	Y(N) #	UN-WANTED VEGETATION.
			Y/N #	
			Y/N #	

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

M - VEGETATIVE COVER

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: _____

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

STORMWATER COLLECTION SYSTEM (4 of 4)

DATE: 3/10/08

INSPECTION BY: FAZIL RAHMAN

Quarterly Inspection Storm Inspection

GRID I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Drywells				
			Y/N #	
			Y/N #	
			Y/N #	
			Y/N #	
Culverts / Outlets				
A3, A5, D1	E	4	Y(N) #	UN-WANTED VEGETATION AROUND CULVERTS/OUTLETS.
E1, G1, H1	E	4	Y(N) #	" " " "
G4, H4	E	4	Y(N) #	" " " "
			Y/N #	

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

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

RECHARGE BASINS

Quarterly Inspection Storm Inspection

DATE: 3/10/08

INSPECTION BY: FAZIL RAHAMAN

GRID I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Recharge Basin No. 1				
A3	A	4	Y(N) #	ACCESS ROAD.
			Y/N #	
			Y/N #	
			Y/N #	
Recharge Basin No. 2				
A5	A	4	Y(N) #	ACCESS ROAD.
			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: 3/10/08

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHMAN

ITEM I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Landfill Gas Monitoring Wells				
13 & 14	C	SEE MEMO	Y(N) #	See well condition reports prepared by Town consultants. RE: TO ATTACHED MEMORANDUM DATED 11/16/06
7	C	—	Y(N) #	SIMILAR RECOMMENDATION AS OUTLINED, FOR GEN 13 & 14.
			YIN #	
			YIN #	
Groundwater Monitoring Wells				
115 & 117	A & C	SEE MEMO	Y(N) #	See well condition reports prepared by Town consultants. RE: TO ATTACHED MEMORANDUM DATED 11/16/06, ALSO TO DAB 2006, 4 TH QTR. & H217 2008 1 ST QTR. REPORT.
135	C	4	Y(N) #	RE: TO DAB 2006, 4 TH QTR. WELL CONDITION REPORT.
35	A	4	Y(N) #	RE: TO H2M 2003, 1 ST QTR. WELL CONDITION REPORT.
065, 1 & D	E	4	Y(N) #	RE: TO H2M 2003, 1 ST QTR. WELL CONDITION REPORT.

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: 3/10/08

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.
11	D	3	DIN # 3	BOTH EXTENSION PRESSING UP AGAINST SUMP OPENING.
12	D	7	DIN # 2	PIPE HEADER PIPE OFF CENTER IN RELATION TO COVER & PRE-CAST.
13	D	7	DIN # 2	PRE-CAST PREVIOUS ADJ. HAVING BEEN MADE.
14, 15 & 16	D	7	DIN # 2	MINIMAL CLEARANCE BETWEEN PIPE HEADER PIPE & ACCESS COVER.

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

7 - BEING MONITORED

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: 3/26/08

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHMAN

ITEM I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Blower Pad / Blower Nos. 104A and 104B				
104A&B	J	4	Y <input checked="" type="checkbox"/> #	OUTLET VACUUM/PRESSURE GAUGE.
			Y/N #	
			Y/N #	
Flare				USED FOR VENTING ONLY.
			Y/N #	
			Y/N #	
Condensate Storage				Liquid Volume = 2,279 gallons Alarms <input checked="" type="checkbox"/> N Test System: OK (Not Successful)
PIPE COND. CHASSIS 2	F	1	Y <input checked="" type="checkbox"/> #	STICK MEASUREMENT 29"
			Y/N #	

PROBLEM CODE	
a	odor
b	damage
c	vandalism
d	mechanical noise
e	no vacuum
f	alarms
g	broken valve
h	broken piping
i	broken belts
j	gauges
k	
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: 3/26/08

Quarterly Inspection Storm Inspection

INSPECTION BY: FAZIL RAHMAN

ITEM I.D.	PROBLEM CODE	PRIORITY CODE	PHOTO TAKEN	COMMENTS
Electrical Panels and Control Panels				
FLARE	G	4		Lights tested: <input checked="" type="checkbox"/> IN
AB	C	—	Y/N #	ORDER 104 AB SUPPLEMENT INDICATOR INLET TO A PULSERS.
STARTER	G	4	Y/N #	FLAME ARRESTOR OVER RANGE AL-COOTE PANEL USED FOR TESTING.
Gates / Locks / Signs				
			Y/N #	
Fencing (Identify location by Grid I.D.)				
EL, F1	I, J, K	SEE MEMO	Y/N #	SEE ATTACHED MEMORANDUM DATED 11/16/06,
			Y/N #	RE TO PHOTO'S PREVIOUSLY TAKEN.
Site Trailer				
			Y/N #	

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

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

COMMENTS

Quarterly Inspection

Storm Inspection

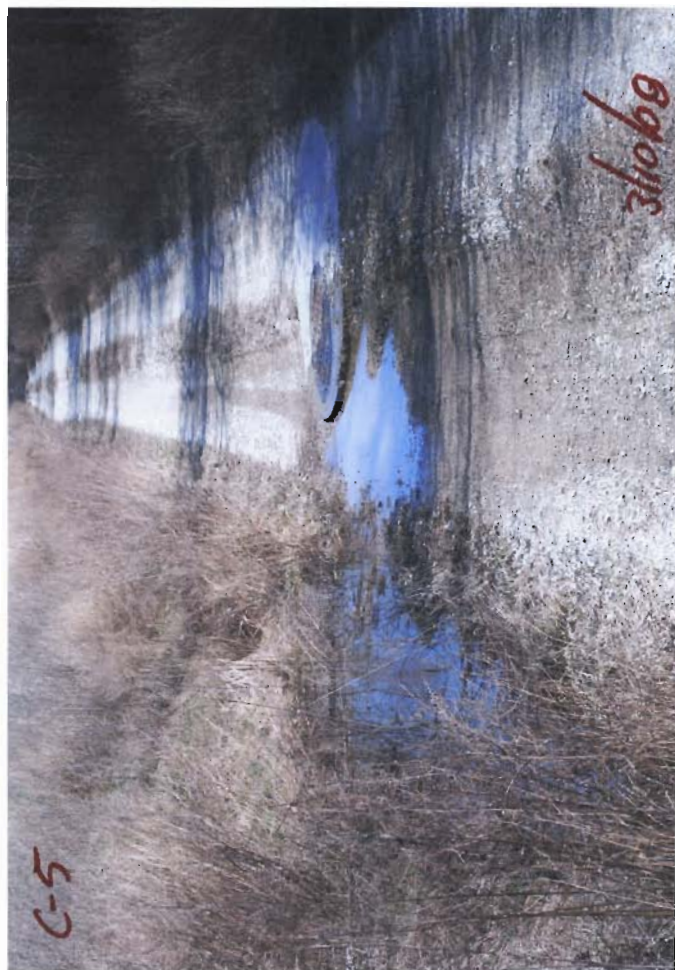
DATE: 3/10/08

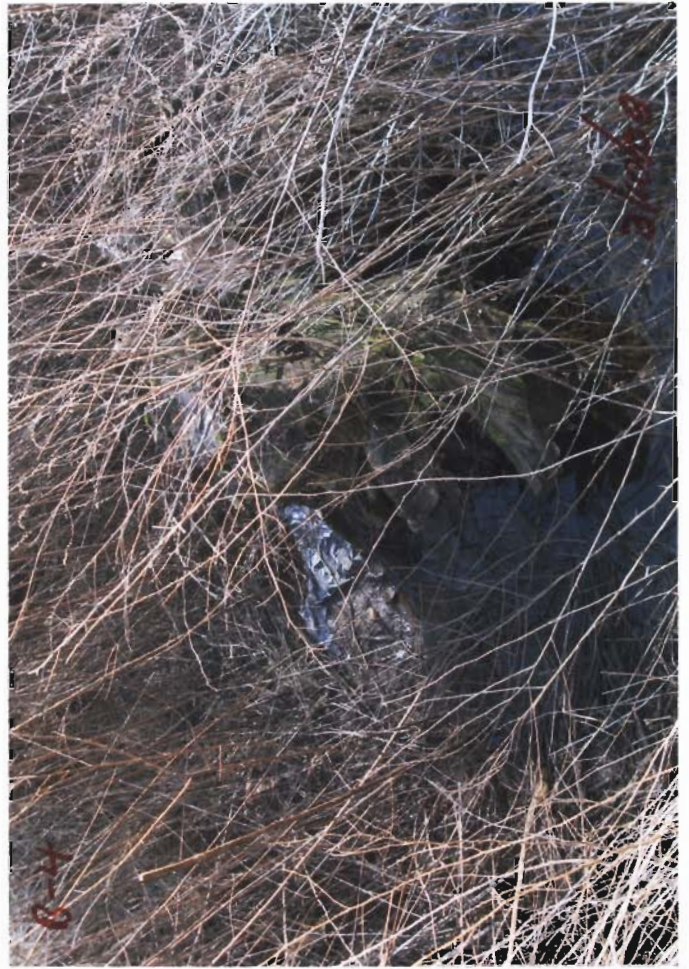
INSPECTION BY: FAZIL RAHAMAN

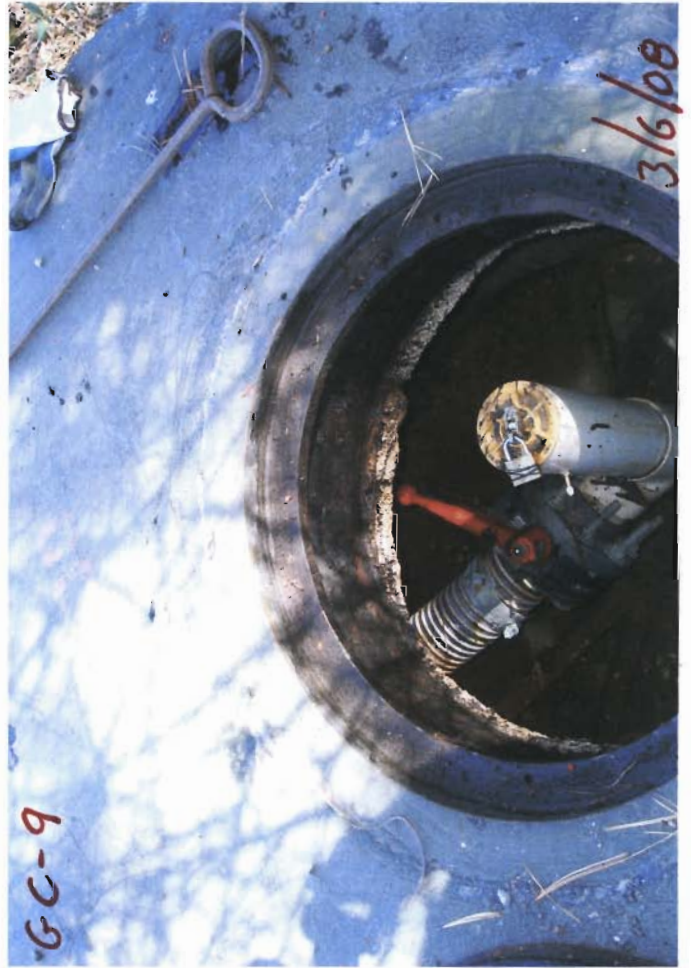
ADDITIONAL COMMENTS AS REQUIRED
LEG- RECOVER WELL'S/Vaults, # 11, 12, 13, 14 WILL BE INSPECTED NEXT QUARTER.
LEG- COLLECTION WELLS, #1 THROUGH #8 WILL BE INSPECTED NEXT QUARTER.
WELL #3 ACCUMULATES WATER RE: TO ATTACHED MEMORANDUM DATED 11/6/06 & PHOTO'S PREVIOUSLY TAKEN.
WELL'S #2, 6, 7, 9, 12, BEING MONITORED, HEADER PIPE OFF CENTER IN RELATION TO ACCESS COVER & CLOSE TO PRE-CAST.
RE: TO ATTACHED PHOTO'S FOR WELLS #9, 12, & PHOTO'S PREVIOUSLY TAKEN FOR WELLS #2 & 6.
WELL #11 HEADER PIPE CLOSE TO PRECAST & BOTH EXTENSION PRESSING CAP AGAINST SUMP OPENING. RE: TO 2 PHOTO'S TAKEN ON 3/6/08.
WELL #13 HEADER PIPE UNDER LIP OF PRECAST (PREVIOUS ADJUSTMENTS HAVING BEEN MADE) RE: TO PHOTO TAKEN 3/6/08.
WELL'S #14, 15, 16 BEING MONITORED MINIMAL CLEARANCE BETWEEN P.U.C. HEADER PIPE & ACCESS COVER / PRECAST. RE: TO PHOTO'S TAKEN FOR 14 & 15
NOTE: ATTACHED ARE 19 PHOTO'S, MEMORANDUM DATED 11/6/06, EPH, JAN, FEB, MAR, 08 GAS MONITORING RESULTS, H21 ACC. 1 st QTR. REPORT & ATLANTIC AUTO CAR COUNT DATED 3/24/08.

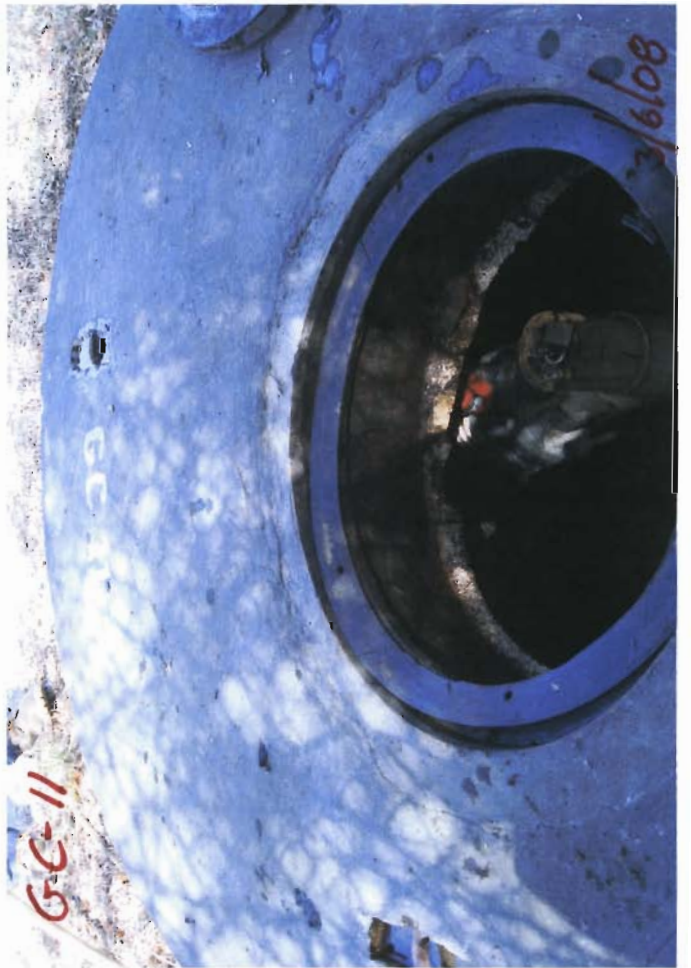
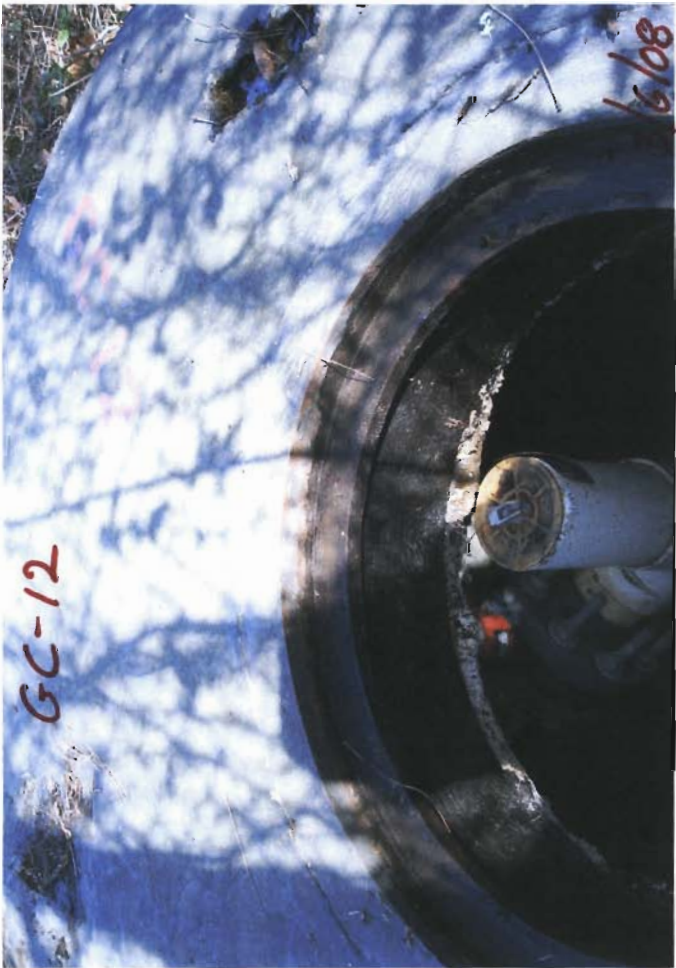
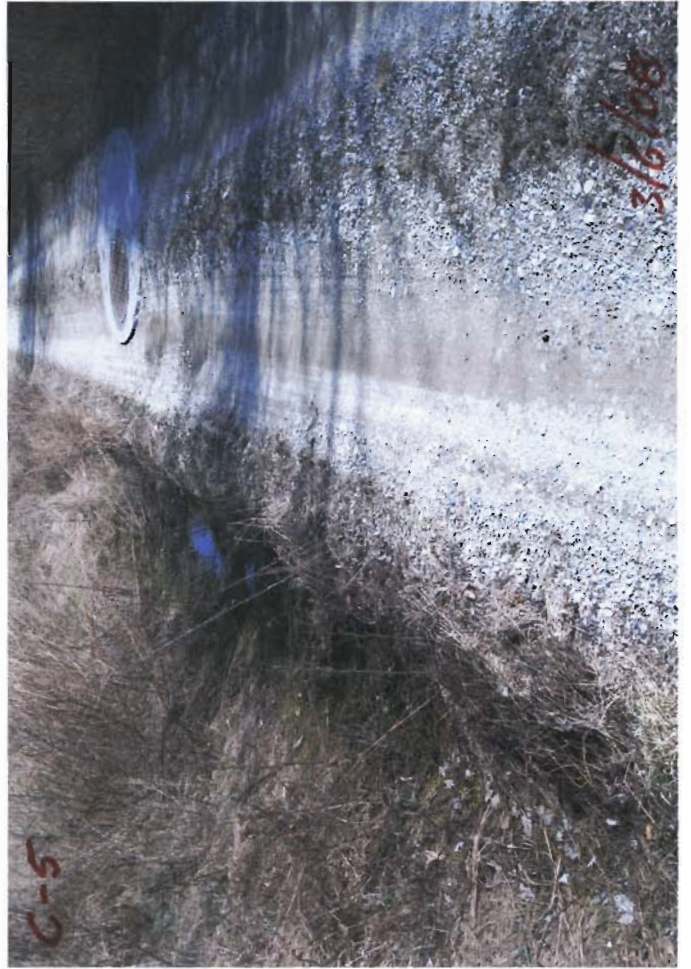
Site inspection has been completed, check box and sign below.

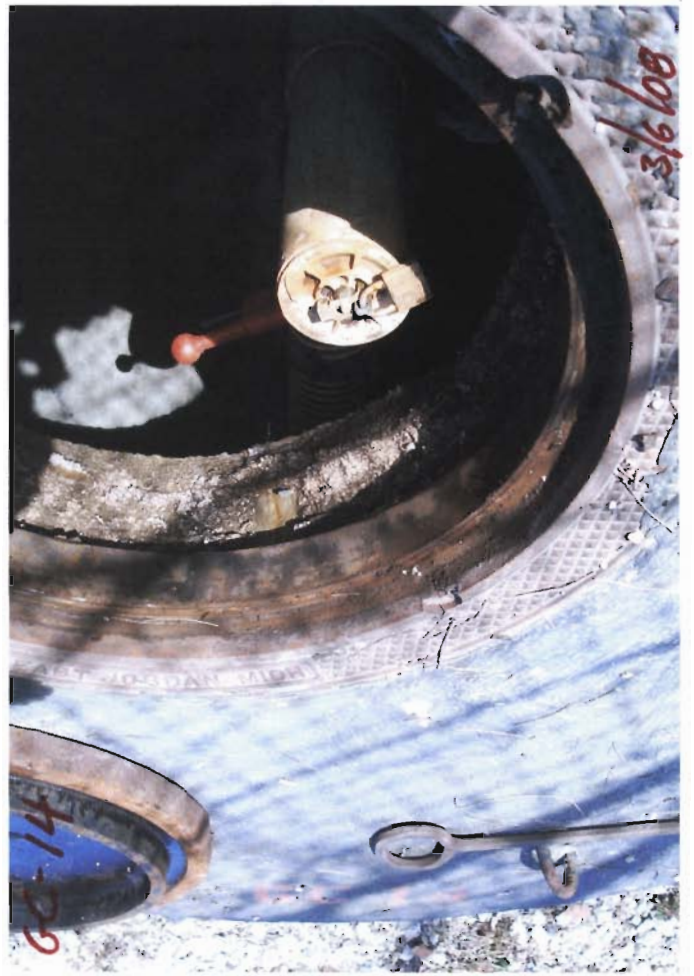
Signature: _____














Memo

To: Alan R. Sanchez
From: Fazil Rahaman 
Date: March 12, 2008
Subject: Rainfall - Sonia Road Landfill

Please be advised that on Saturday and Sunday, March 8 and 9, 2008, there was approximately a 3.53" rainfall (information supplied by Compu-Weather Report) at the referenced site.

Upon policing the site on Monday, March 10, 2008, there was evidence of ponding and erosion/wash-outs. For your information please refer to the attached seven photos dated and labeled accordingly using Sonia Road Landfill Index Map.

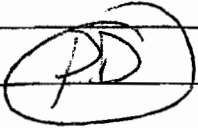
cc: Joseph A. Cosci, Sr.
Thomas M. Dudo
File

FR-Sanchez-SoniaRd Rainfall-Mar 8-9-031208.wpd





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

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
631/737-6200
Fax 631/737-2410

February 29, 2008

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

Re: **Sonia Road Landfill**
February 2008 Landfill Gas Monitoring Results
FPM File No. 631-04-06

Dear Mr. Sanchez:


On February 25, 2008, 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 and 15% carbon dioxide (CO₂) with the balance nitrogen (N₂) gas, and 4% O₂ with the balance N₂ gas 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 12, 2008. 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: Thomas Dudo (via fax)
Fazil Rahaman (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	2/25/2008 13:06	0.0	0.1	20.6	29.9	-43.50
GM-01	OK	2/25/2008 13:09	0.0	0.7	18.8	29.9	0.00
GM-02	OK	2/25/2008 13:17	0.0	1.2	19.0	29.9	-0.10
GM-03	OK	2/25/2008 13:24	0.0	0.0	20.2	29.9	0.00
GM-04	OK	2/25/2008 14:44	0.0	0.1	20.1	29.8	0.00
GM-05	OK	2/25/2008 13:30	0.0	0.8	19.8	29.8	-0.40
GM-06	OK	2/25/2008 13:37	0.0	0.1	20.3	29.8	0.00
GM-07	*	2/25/2008 13:42	0.0	0.2	20.2	29.8	0.00
GM-08	OK	2/25/2008 13:48	0.0	0.3	19.8	29.8	0.00
GM-09	OK	2/25/2008 13:50	0.0	1.0	19.0	29.8	0.00
GM-10	OK	2/25/2008 13:57	0.0	0.1	20.0	29.8	0.00
GM-11	OK	2/25/2008 14:03	0.0	0.9	19.3	29.8	0.00
GM-12	OK	2/25/2008 14:08	0.0	0.1	20.1	29.8	0.00
GM-13	*	2/25/2008 14:14	0.0	0.3	19.9	29.8	-0.10
GM-14	*	2/25/2008 14:19	0.0	0.3	19.8	29.8	-0.40
GM-15	OK	2/25/2008 14:24	0.0	0.2	19.9	29.8	0.00
GM-16	OK	2/25/2008 14:28	0.0	0.9	19.3	29.8	0.00
GM-17	OK	2/25/2008 14:37	0.0	0.2	20.0	29.8	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 - Clear, 40°F

* Exterior casing is obstructed by well and will not close.

FPM



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 18, 2008

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

**Re: Sonia Road Landfill
January 2008 Landfill Gas Monitoring Results
FPM File No. 631-04-06**

Dear Mr. Sanchez:

On January 16, 2008, 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 and 15% carbon dioxide (CO₂) with the balance nitrogen (N₂) gas, and 4% O₂ with the balance N₂ gas 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 11, 2008. 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: Thomas Dudo (via fax)
Fazil Rahaman (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	1/16/2008 12:31	6.6	12.9	7.2	30.2	4.00
GM-01	OK	1/16/2008 12:35	0.0	1.0	19.1	30.2	0.00
GM-02	OK	1/16/2008 12:41	0.0	1.2	19.0	30.2	-0.10
GM-03	OK	1/16/2008 12:46	0.0	0.1	20.5	30.2	0.00
GM-04	OK	1/16/2008 14:05	0.0	0.1	20.3	30.2	0.00
GM-05	OK	1/16/2008 12:56	0.0	0.2	20.4	30.2	-0.40
GM-06	OK	1/16/2008 13:02	0.0	0.2	20.4	30.2	-0.10
GM-07	*	1/16/2008 13:07	0.0	0.2	20.4	30.2	-0.20
GM-08	OK	1/16/2008 13:12	0.0	0.6	20.0	30.2	-0.10
GM-09	OK	1/16/2008 13:16	0.0	1.3	19.0	30.2	-0.10
GM-10	OK	1/16/2008 13:20	0.0	0.1	20.3	30.2	0.00
GM-11	OK	1/16/2008 13:26	0.0	0.7	19.8	30.2	0.00
GM-12	OK	1/16/2008 13:32	0.0	0.1	20.4	30.2	0.00
GM-13	*	1/16/2008 13:38	0.0	0.3	20.3	30.2	0.00
GM-14	*	1/16/2008 13:43	0.0	0.5	20.0	30.2	-0.90
GM-15	OK	1/16/2008 13:48	0.0	0.3	20.2	30.2	-0.20
GM-16	OK	1/16/2008 13:52	0.0	1.1	19.5	30.2	-0.10
GM-17	OK	1/16/2008 13:57	0.0	0.1	20.3	30.2	-0.10

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 - Clear, 40°F

* 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 26, 2008

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

**Re: Sonia Road Landfill
March 2008 Landfill Gas Monitoring Results
FPM File No. 631-04-06**

Dear Mr. Sanchez:

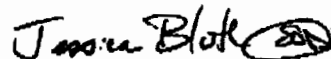
On March 18, 2008, FPM Group (FPM) performed landfill gas monitoring at the above-referenced site. Monitoring was performed with a Landtec GA-90 Gas Analyzer, model GA1/1.

Oxygen (O₂) gas and methane (CH₄) gas were zeroed according to the manufacturer's specifications. The gas analyzer was calibrated with 15 percent (%) CH₄ and 15% carbon dioxide (CO₂) with the balance nitrogen (N₂) gas, and 4% O₂ with the balance N₂ gas 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 14, 2008. 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: Thomas Dudo (via fax)
Fazil Rahaman (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	3/18/2008 11:39	3.9	10.4	9.1	30.4	4.00
GM-01	OK	3/18/2008 11:43	0.0	0.6	18.9	30.4	0.40
GM-02	OK	3/18/2008 11:51	0.0	1.3	17.7	30.4	-0.10
GM-03	OK	3/18/2008 11:59	0.0	0.1	20.1	30.4	0.00
GM-04	OK	3/18/2008 13:19	0.0	0.1	20.2	30.4	0.00
GM-05	OK	3/18/2008 12:07	0.0	0.2	19.9	30.4	-0.40
GM-06	OK	3/18/2008 12:13	0.0	0.2	19.9	30.4	-0.20
GM-07	*	3/18/2008 12:18	0.0	0.1	20.0	30.4	-0.20
GM-08	OK	3/18/2008 12:24	0.0	0.2	19.9	30.4	-0.10
GM-09	OK	3/18/2008 12:29	0.0	0.8	19.2	30.4	-0.10
GM-10	OK	3/18/2008 12:36	0.0	0.1	20.1	30.4	0.00
GM-11	OK	3/18/2008 12:41	0.0	0.6	19.5	30.4	0.00
GM-12	OK	3/18/2008 12:46	0.0	0.1	20.2	30.4	0.00
GM-13	*	3/18/2008 12:51	0.0	0.3	20.0	30.4	0.00
GM-14	*	3/18/2008 12:55	0.0	0.3	19.9	30.4	0.00
GM-15	OK	3/18/2008 13:04	0.0	0.1	20.2	30.4	-2.00
GM-16	OK	3/18/2008 13:09	0.0	0.7	19.5	30.4	-0.10
GM-17	OK	3/18/2008 13:13	0.0	0.3	20.1	30.4	-0.10

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 - Mostly cloudy, 42°F

* Exterior casing is obstructed by well and will not close.

FPM

GROUNDWATER WELL CONDITION

Holzmacher, McLendon & Murrell, P.C. ▴ H2M Labs, Inc.
H2M Associates, Inc. ▴ H2M Architects & Engineers, Inc.

175 Pinelawn Road, Suite 308, Melville, New York 11747
631.756.8000, Fax: 631.454.8432

www.h2m.com

February 20, 2008

Anthony Varrichio, P.E.
Chief Engineer
Islip Resource Recovery Agency
401 Main Street
Islip, New York 11751

Re: Well Condition Report
First Quarter 2008
Sonia Road Landfill
H2M No. ISLP0701

Dear Mr. Varrichio:

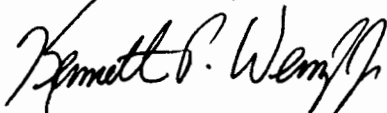
The purpose of this letter is to provide the First Quarter 2008 well inspection summary report for the 35 monitoring wells at the Sonia Road Landfill. The completed well inspection checklists are enclosed.

The well inspection did not reveal any significant damage, security issues or other concerns related to the sampled monitoring wells that would require corrective action, except at 4 wells. Due to contact between the well cap and manhole cover, the manhole MW-03S can no longer be properly closed. The rubber gasket on monitoring wells MW-06S, MW-06I and MW-06D are damaged, and should be repaired to maintain a watertight seal. In addition, although not noted in Table 1, wells MW-11S and MW-11D are often difficult to locate, due to the partial burial of the manholes for these wells, which are located at the western end of South Fourth Street.

If you have any questions or require any additional information, please call me at (631) 756-8000, extension 1606.

Very truly yours,

HOLZMACHER, McLENDON & MURRELL, P.C.



Kenneth P. Wenz, Jr., CPG
Senior Project Manager

Enclosures

X:\USLP (Town of Islip) - 10560\2008\USLP0801(Sonia Road Landfill)\01-DRAFT REPORT\Draft Report\1 Qtr 2008\wellcond1Q2008.doc

Table 1
WELL INSPECTION SUMMARY – FIRST QUARTER 2008
SONIA ROAD LANDFILL

Well	Surface Seal	Cover/Standpipe	Lock Intact?	Casing Alignment	Survey Point	Well Labeled?	Well Protected?
MW-01S	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-01I	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-01D	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-02I	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-02D	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-03S	Intact	Cannot be closed	Yes	Straight	Marked	Yes	Yes
MW-03I	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-03D	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-04S	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-04I	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-04D	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-05S	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-05I	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-05D	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-06S	Intact	Gasket damaged	Yes	Straight	Marked	Yes	Yes
MW-06I	Intact	Gasket damaged	Yes	Straight	Marked	Yes	Yes
MW-06D	Intact	Gasket damaged	Yes	Straight	Marked	Yes	Yes
MW-07S	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-07I	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-07D	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-10S	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-10I	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-10D	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-11S	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-11I	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-11D	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-12S	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-12I	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-12D	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-13S	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-13I	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-13D	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-14S	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-14I	Intact	Intact	Yes	Straight	Marked	Yes	Yes
MW-14D	Intact	Intact	Yes	Straight	Marked	Yes	Yes

Monitoring Well Inspection Checklist

Well No. MW-1S

	<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			
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: EVT
Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-11

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-1D

	<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			
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: High brush surrounding well

Inspector: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-2I

	<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			
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:
Cover will not close.

Inspector: EVT
Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-2D

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-3S

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-3I

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-3D

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-4S

	<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			
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: Well is located approximately 50' from designated location on site map

Inspector: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-4I

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-4D

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-5S

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-5I

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-5D

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-6S

	<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			
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: Rubber gasket on vault damaged.

Inspector: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-6S

	<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			
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: Rubber gasket on vault damaged.

Inspector: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-6I

	<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			
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: Rubber gasket on vault damaged.

Inspector: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-6D

	<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			
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: Rubber gasket on vault damaged.

Inspector: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-7S

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-7I

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-7D

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-10S

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-10I

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-10D

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-11S

	<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			
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: Well is buried under 6 inches of soil, which accumulates over time due to well's location in roadway.

Inspector: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-11I

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-11D

	<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			
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: Well is buried under 6 inches of soil, which accumulates over time due to well's location in roadway.

Inspector: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-12S

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-12I

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-12D

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-13S

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-13I

	<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			
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: Difficult to locate due to high brush.

Inspector: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-13D

	<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			
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: High brush surrounding well.

Inspector: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-14S

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-14I

	<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			
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: EVT

Date of Inspection: 2/8/08

Monitoring Well Inspection Checklist

Well No. MW-14D

	<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			
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: EVT

Date of Inspection: 2/8/08

APPENDIX A

CAR COUNT 3/24/08

HILL

<u>Dealership</u>	<u>Car Count</u>
Atlantic Nissan	290
Atlantic Kia	62
Atlantic Hyundai	262
Atlantic Honda	321
Atlantic Toyota	262
Alantic Chevy	33
Atlantic Caddy	19
Atlantic Audi	49
Millennium Honda	263
Millennium Hyundai	15
Advantage Toyota	75
Advantage Nissan	34
Lexus Massapequa	65
Lexus RVC	35
Total Count:	1785

A/H/N: Faz