

Shafel, Kathleen S - DNR

From: Rahn, Matthew W - DNR
Sent: Monday, May 20, 2019 2:46 PM
To: Shafel, Kathleen S - DNR
Subject: RE: Clear Lake Circle C - BRRT's #03-49-274529 - Tank Closure Report

Expires: Saturday, November 16, 2019 12:00 AM

I took a look at this and I feel it can be folded into the existing BRRTS #. Let me know if you need me to do the tracking for this as well.

Matthew W. Rahn

Phone: (715) 623-4190 Ext. 3110

Cell Phone: (715) 350-1121

Matthew.Rahn@wisconsin.gov

We are committed to service excellence.

Visit our survey at <http://dnr.wi.gov/customersurvey> to evaluate how I did.

From: Shafel, Kathleen S - DNR
Sent: Friday, May 17, 2019 10:57 AM
To: Rahn, Matthew W - DNR <Matthew.Rahn@wisconsin.gov>
Subject: FW: Clear Lake Circle C - BRRT's #03-49-274529 - Tank Closure Report

Hi Matt – here is a TSSA report dated 10/29/15. Associated with property FID Location # 649031020, BRRTS # 03-49-274529. With current PCM activity taking place.

Please assess the report, and let me know whether this needs its own unique tracking number or fold into existing.

Thanks,

We are committed to service excellence.

Visit our survey at <http://dnr.wi.gov/customersurvey> to evaluate how I did.

Kathleen Shafel

Phone: (715) 623-4190 x 3127

Kathleen.Shafel@wisconsin.gov

From: Legler, Dennis A - DNR
Sent: Friday, May 17, 2019 10:33 AM
To: Shafel, Kathleen S - DNR <Kathleen.Shafel@wisconsin.gov>
Subject: Clear Lake Circle C - BRRT's #03-49-274529 - Tank Closure Report

Couldn't find in BRRT'S.

Thank you,

We are committed to service excellence.

Visit our survey at <http://dnr.wi.gov/customersurvey> to evaluate how I did.

Dennis A Legler

PECFA Program Specialist Senior- Bureau of Remediation & Redevelopment
Wisconsin Department of Natural Resources

Phone: (608) 267-7562

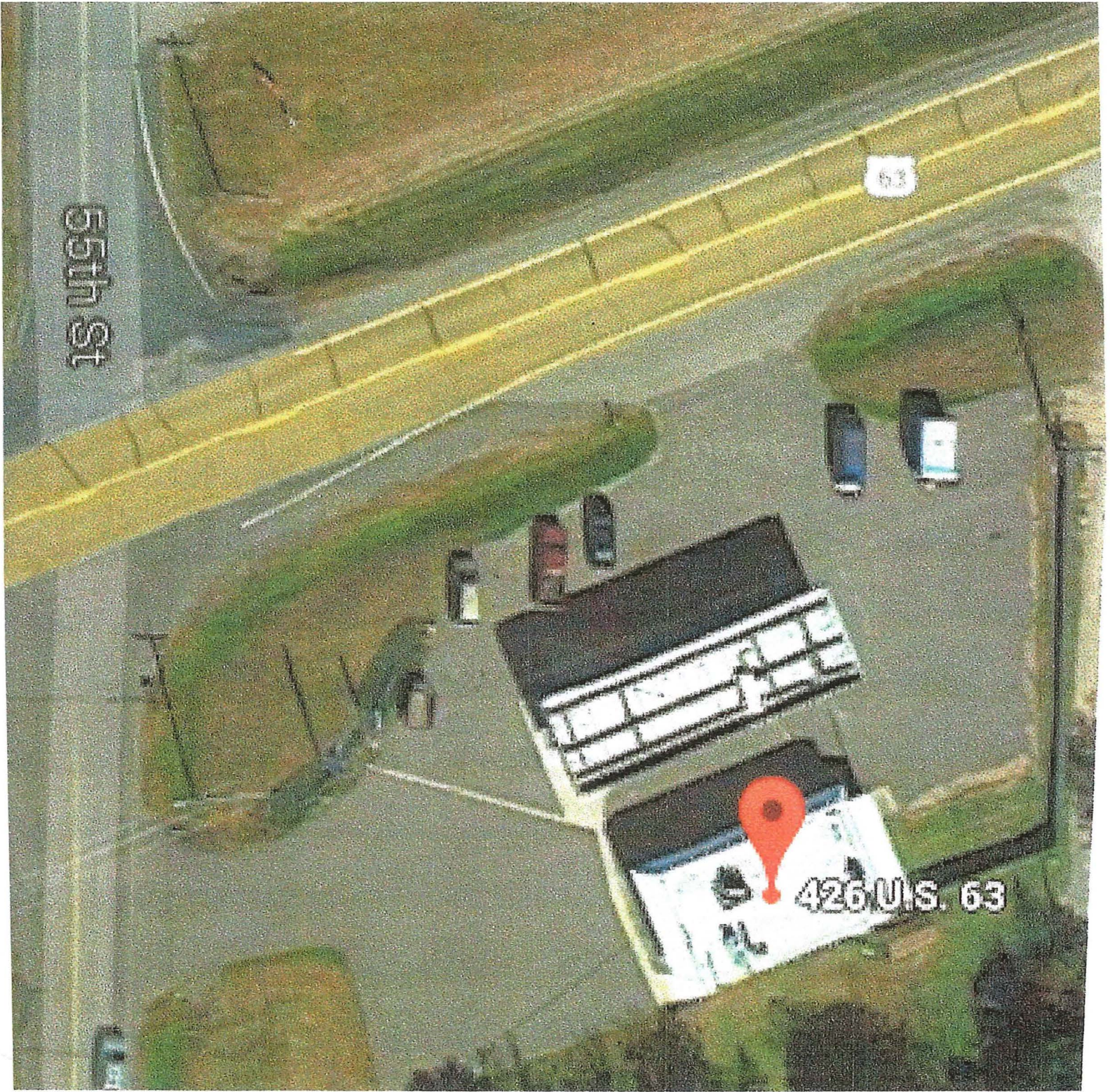
Fax: (608) 267-7646

dennis.legler@wi.gov



dnr.wi.gov





55th St

63



426 U.S. 63



Wisconsin Department of Agriculture, Trade and Consumer Protection
Bureau of Weights and Measures, Storage Tank Regulation
P.O. Box 7837
Madison, WI 53707-7837
(608) 224-4942

FOR OFFICE USE ONLY
TDID#: _____
Reg Obj #: **324341**
Wis. Admin. Code §ATCP 93.140

UNDERGROUND FLAMMABLE/COMBUSTIBLE/HAZARDOUS LIQUID STORAGE TANK REGISTRATION

Underground tanks in Wisconsin that have stored or currently store petroleum or regulated substances must be registered. A separate form is needed for each tank. Send each completed form to the agency designated above. Have you previously registered this tank by submitting a form? Yes No
If yes, are you correcting/updating information only? Yes No

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04 (1)(m) Wis. Stats.)

This registration applies to a tank status that is (check one):

<input type="checkbox"/> In Use	<input type="checkbox"/> Closed - Tank Removed	<input type="checkbox"/> Ownership Change (Indicate new owner name in block 2—attach deed)
<input type="checkbox"/> Newly Installed	<input type="checkbox"/> Closed - Filled with Inert Materials	
<input type="checkbox"/> Abandoned with Product	<input type="checkbox"/> Abandon with Water	
<input type="checkbox"/> Abandoned without Product (empty)	<input type="checkbox"/> Temporarily Out of Service - Provide Date: _____	

Fire Department providing fire coverage where tank is located:
 City Village
 Town: **Clear Lake**

A. IDENTIFICATION (Please Print)

1. Tank Site Name: **Circle C Convenience Center** Site Street Address: **426 US Hwy 63** Site Telephone Number: _____
 City Village Town: **Clear Lake** State: **WISCONSIN** Zip Code: **54005** County: **Polk**

2. Tank Owner Legal Name: **CCF Inc** Mailing Address: **125 Columbia Ct. #8** Telephone Number: _____
 City Village Town: **Chaska** State: **MN** Zip Code: **55318** County: _____

3. Property Owner Name (if different than tank owner): _____ Property Owner Address if different than #1: _____

4. Class A Operator Name: _____ DOB: _____ Training Method: _____ Certification #: _____

5. Class B Operator Name: _____ DOB: _____ Training Method: _____ Certification #: _____

B. Site ID #: _____ **Facility ID #:** **62385** **Customer ID #:** **286174**

C. Tank Capacity (gallons): **10,000** **Tank Age (age or date installed):** _____ **Vehicle fueling:** Yes No

D. LAND OWNER TYPE (check one) Refer to back
 County State Federal Leased Federal Owned Tribal Nation Municipal Other Government Private

E. OCCUPANCY TYPE (check one) Refer to back
 Retail Fuel Sales Bulk Storage Terminal Storage Mercantile/Commercial Industrial Residential School
 Agricultural (crop or livestock production) Backup or Emergency Generator Gov't Fleet Utility Other (specify): _____

F. Tank Construction:
 Bare Steel Coated Steel Stainless steel Steel - Fiberglass Reinforced Plastic Composite
 Fiberglass Unknown Other (specify): _____ Lined (date): _____
Overfill Protection? Yes No
Spill Containment? Yes No

G. Tank Cathodic Protection: Sacrificial Anodes Impressed Current N/A **Tank Double Walled?** Yes No

H. Primary Tank Leak Detection Method:
 Automatic tank gauging Interstitial monitoring → Electronic: Yes No Inventory control and tightness testing
 Manual tank gauging (only for tanks of 1,000 gallons or less) Statistical Inventory Reconciliation (SIR) Unknown

I. Piping Construction:
 Bare Steel Coated Steel Stainless Steel Fiberglass Flexible Copper Unknown NA Other _____

J. Piping Cathodic Protection: Sacrificial Anodes Impressed Current N/A **Pipe Double Walled?** Yes No

K. Primary Piping System Type: Pressurized piping with → A. Pump auto shutoff - ELLD; B. flow restrictor - MLLD Unknown
 Suction piping with check valve at tank Suction piping with check valve at pump and inspectable Not needed if waste oil

L. Piping Leak Detection Method: Interstitial monitoring → Electronic: NO YES → Sump or cable sensor Yes No
 Tightness testing Electronic line monitor - ELLD SIR Not required Unknown

M. TANK CONTENTS (Current, or previous product (if tank now empty))
 Leaded Unleaded Gasohol E85 Diesel Bio-diesel Aviation Premix Fuel Oil Kerosene Unknown
 New Oil New oil - Low FP Waste/Used Motor Oil Hazardous Waste/Interface* Empty* Sand/Gravel/Slurry*
 Other (specify): _____ Chemical* Name _____ CAS #: _____

* NOT PECFA eligible.

N. If Tank Closed, Abandoned or Out of Service Give date (mo/day/yr): **10-29-2015** **Geo Latitude:** _____ **Geo Longitude:** _____
Has a site assessment been completed? (see reverse side for details) Yes No
Tank Owner Legal Name (please print): **Jon Heller - Agent for Owner** **E-mail Address:** _____

Tank Owner Signature (Note: By signing, signer is accepting legal and financial responsibility for the storage tank system.)

Date: **10-29-2015**

Note: Refer to comments on reverse side of form.



Wisconsin Department of Agriculture, Trade and Consumer Protection
Bureau of Weights and Measures, Storage Tank Regulation
P.O. Box 7837
Madison, WI 53707-7837
(608) 224-4942

FOR OFFICE USE ONLY

TDID#: _____
Reg Obj #: 324 342
Wis. Admin. Code §ATCP 93.140

UNDERGROUND FLAMMABLE/COMBUSTIBLE/HAZARDOUS LIQUID STORAGE TANK REGISTRATION

Underground tanks in Wisconsin that have stored or currently store petroleum or regulated substances must be registered. A separate form is needed for each tank. Send each completed form to the agency designated above. Have you previously registered this tank by submitting a form? Yes No
If yes, are you correcting/updating information only? Yes No

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04 (1)(m) Wis. Stats.)

This registration applies to a tank status that is (check one):

<input type="checkbox"/> In Use	<input type="checkbox"/> Closed - Tank Removed	<input type="checkbox"/> Ownership Change (Indicate new owner name in block 2—attach deed)
<input type="checkbox"/> Newly Installed	<input type="checkbox"/> Closed - Filled with Inert Materials	
<input type="checkbox"/> Abandoned with Product	<input type="checkbox"/> Abandon with Water	
<input type="checkbox"/> Abandoned without Product (empty)	<input type="checkbox"/> Temporarily Out of Service - Provide Date: _____	

Fire Department providing fire coverage where tank is located:
 City Village
 Town: Clear Lake

A. IDENTIFICATION (Please Print)

1. Tank Site Name Circle C Convenience Center <input type="checkbox"/> City <input checked="" type="checkbox"/> Village <input type="checkbox"/> Town: Clear Lake	Site Street Address 426 US Hwy 63 State WISCONSIN Zip Code 54005	Site Telephone Number () -
2. Tank Owner Legal Name CCF Inc <input type="checkbox"/> City <input checked="" type="checkbox"/> Village <input type="checkbox"/> Town: CHASKA	Mailing Address 125 Columbia Ct. #8 State MN Zip Code 55318	Telephone Number () -
3. Property Owner Name (if different than tank owner)	Property Owner Address if different than #1	
4. Class A Operator Name	DOB	Training Method
5. Class B Operator Name	DOB	Training Method

B. Site ID #: _____ **Facility ID #:** 62385 **Customer ID #:** 286174

C. Tank Capacity (gallons): 8000 **Tank Age (age or date installed):** _____ **Vehicle fueling:** Yes No

D. LAND OWNER TYPE (check one) Refer to back
 County State Federal Leased Federal Owned Tribal Nation Municipal Other Government Private

E. OCCUPANCY TYPE (check one) Refer to back
 Retail Fuel Sales Bulk Storage Terminal Storage Mercantile/Commercial Industrial Residential School
 Agricultural (crop or livestock production) Backup or Emergency Generator Gov't Fleet Utility Other (specify): _____

F. Tank Construction:
 Bare Steel Coated Steel Stainless steel Steel - Fiberglass Reinforced Plastic Composite
 Fiberglass Unknown Other (specify): _____ Lined (date): _____

Overfill Protection? Yes No
Spill Containment? Yes No

G. Tank Cathodic Protection: Sacrificial Anodes Impressed Current N/A **Tank Double Walled?** Yes No

H. Primary Tank Leak Detection Method:
 Automatic tank gauging Interstitial monitoring ⇨ Electronic: Yes No Inventory control and tightness testing
 Manual tank gauging (only for tanks of 1,000 gallons or less) Statistical Inventory Reconciliation (SIR) Unknown

I. Piping Construction:
 Bare Steel Coated Steel Stainless Steel Fiberglass Flexible Copper Unknown NA Other _____

J. Piping Cathodic Protection: Sacrificial Anodes Impressed Current N/A **Pipe Double Walled?** Yes No

K. Primary Piping System Type: Pressurized piping with ⇨ A. Pump auto shutoff - ELLD; B. flow restrictor - MLLD Unknown
 Suction piping with check valve at tank Suction piping with check valve at pump and inspectable Not needed if waste oil

L. Piping Leak Detection Method: Interstitial monitoring ⇨ Electronic: NO YES ⇨ Sump or cable sensor Yes No
 Tightness testing Electronic line monitor - ELLD SIR Not required Unknown

M. TANK CONTENTS (Current, or previous product (if tank now empty))
 Leaded Unleaded Gasohol E85 Diesel Bio-diesel Aviation Premix Fuel Oil Kerosene Unknown
 New Oil New oil - Low FP Waste/Used Motor Oil Hazardous Waste/Interface* Empty* Sand/Gravel/Slurry*
 Other (specify): _____ Chemical* Name _____ CAS #: _____

* NOT PECFA eligible.

N. If Tank Closed, Abandoned or Out of Service
 Give date (mo/day/yr): 10-29-2015

Geo Latitude: _____ **Geo Longitude:** _____

Has a site assessment been completed? (see reverse side for details) Yes No

Tank Owner Legal Name (please print): Jon Heller - Agent for Owner **E-mail Address:** _____

Tank Owner Signature (Note: By signing, signer is accepting legal and financial responsibility for the storage tank system.)
 [Signature] **Date:** 10-29-2015

Note: Refer to comments on reverse side of form.



Wisconsin Department of Agriculture, Trade and Consumer Protection
Bureau of Weights and Measures, Storage Tank Regulation
P.O. Box 7837
Madison, WI 53707-7837
(608) 224-4942

FOR OFFICE USE ONLY

TDID#:

Reg Obj #: 324 343

Wis. Admin. Code SATCP 93.140

UNDERGROUND FLAMMABLE/COMBUSTIBLE/HAZARDOUS LIQUID STORAGE TANK REGISTRATION

Underground tanks in Wisconsin that have stored or currently store petroleum or regulated substances must be registered. A separate form is needed for each tank. Send each completed form to the agency designated above. Have you previously registered this tank by submitting a form? Yes No
If yes, are you correcting/updating information only? Yes No

Personal information you provide may be used for purposes other than that for which it was originally collected (s. 15.04 (1)(m) Wis. Stats.)

This registration applies to a tank status that is (check one):

- In Use
 Newly Installed
 Abandoned with Product
 Abandoned without Product (empty)
 Closed - Tank Removed
 Closed - Filled with Inert Materials
 Abandon with Water
 Temporarily Out of Service - Provide Date: _____
 Ownership Change (Indicate new owner name in block 2—attach deed)

Fire Department providing fire coverage where tank is located:

- City Village
 Town: Clear Lake

A. IDENTIFICATION (Please Print)

1. Tank Site Name Circle C Convenience Center <input type="checkbox"/> City <input checked="" type="checkbox"/> Village <input type="checkbox"/> Town: Clear Lake	Site Street Address 426 US Hwy 63 State WISCONSIN Zip Code 54005	Site Telephone Number () -
2. Tank Owner Legal Name CCF Inc <input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town: Chaska	Mailing Address 125 Columbia Ct. # 8 State MN Zip Code 55318	Telephone Number () - County
3. Property Owner Name (if different than tank owner)	Property Owner Address if different than #1	
4. Class A Operator Name	DOB	Training Method Certification #
5. Class B Operator Name	DOB	Training Method Certification #

B. Site ID #:	Facility ID #: 62385	Customer ID #: 286174
C. Tank Capacity (gallons): 8,000	Tank Age (age or date installed):	Vehicle fueling: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

- D. LAND OWNER TYPE (check one) Refer to back
 County State Federal Leased Federal Owned Tribal Nation Municipal Other Government Private

- E. OCCUPANCY TYPE (check one) Refer to back
 Retail Fuel Sales Bulk Storage Terminal Storage Mercantile/Commercial Industrial Residential School
 Agricultural (crop or livestock production) Backup or Emergency Generator Gov't Fleet Utility Other (specify):

F. Tank Construction: <input type="checkbox"/> Bare Steel <input checked="" type="checkbox"/> Coated Steel <input type="checkbox"/> Stainless steel <input type="checkbox"/> Steel - Fiberglass Reinforced Plastic Composite <input type="checkbox"/> Fiberglass <input type="checkbox"/> Unknown <input type="checkbox"/> Other (specify): _____ Lined (date): _____	Overfill Protection? <input type="checkbox"/> Yes <input type="checkbox"/> No Spill Containment? <input type="checkbox"/> Yes <input type="checkbox"/> No
---	--

G. Tank Cathodic Protection: <input type="checkbox"/> Sacrificial Anodes <input type="checkbox"/> Impressed Current <input type="checkbox"/> N/A	Tank Double Walled? <input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

H. Primary Tank Leak Detection Method: <input type="checkbox"/> Automatic tank gauging <input type="checkbox"/> Interstitial monitoring \Rightarrow Electronic: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Manual tank gauging (only for tanks of 1,000 gallons or less) <input type="checkbox"/> Statistical Inventory Reconciliation (SIR) <input type="checkbox"/> Inventory control and tightness testing <input type="checkbox"/> Unknown
--

I. Piping Construction: <input type="checkbox"/> Bare Steel <input type="checkbox"/> Coated Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input type="checkbox"/> Flexible <input type="checkbox"/> Copper <input type="checkbox"/> Unknown <input type="checkbox"/> NA <input type="checkbox"/> Other _____

J. Piping Cathodic Protection: <input type="checkbox"/> Sacrificial Anodes <input type="checkbox"/> Impressed Current <input type="checkbox"/> N/A	Pipe Double Walled? <input type="checkbox"/> Yes <input type="checkbox"/> No
--	--

K. Primary Piping System Type: <input type="checkbox"/> Pressurized piping with \Rightarrow A. <input type="checkbox"/> Pump auto shutoff - ELLD; B. <input type="checkbox"/> flow restrictor - MLLD <input type="checkbox"/> Unknown <input type="checkbox"/> Suction piping with check valve at tank <input type="checkbox"/> Suction piping with check valve at pump and inspectable <input type="checkbox"/> Not needed if waste oil

L. Piping Leak Detection Method: <input type="checkbox"/> Tightness testing <input type="checkbox"/> Interstitial monitoring \Rightarrow Electronic: <input type="checkbox"/> NO <input type="checkbox"/> YES \Rightarrow Sump or cable sensor <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Electronic line monitor - ELLD <input type="checkbox"/> SIR <input type="checkbox"/> Not required <input type="checkbox"/> Unknown

M. TANK CONTENTS (Current, or previous product (if tank now empty)) <input type="checkbox"/> Leaded <input type="checkbox"/> Unleaded <input type="checkbox"/> Gasohol <input type="checkbox"/> E85 <input type="checkbox"/> Diesel <input type="checkbox"/> Bio-diesel <input type="checkbox"/> Aviation <input type="checkbox"/> Premix <input type="checkbox"/> Fuel Oil <input type="checkbox"/> Kerosene <input type="checkbox"/> Unknown <input type="checkbox"/> New Oil <input type="checkbox"/> New oil - Low FP <input type="checkbox"/> Waste/Used Motor Oil <input type="checkbox"/> Hazardous Waste/Interface* <input type="checkbox"/> Empty* <input type="checkbox"/> Sand/Gravel/Slurry* <input type="checkbox"/> Other (specify): _____ <input type="checkbox"/> Chemical* Name _____ CAS #: _____
--

* NOT PECFA eligible.

N. If Tank Closed, Abandoned or Out of Service Give date (mo/day/yr): 10-29-2015	Geo Latitude: _____ Geo Longitude: _____ Has a site assessment been completed? (see reverse side for details) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	---

Tank Owner Legal Name (please print): Jon Heller - Agent for Owner	E-mail Address
---	----------------

Tank Owner Signature (Note: By signing, signer is accepting legal and financial responsibility for the storage tank system.) <i>Jon Heller</i>	Date 10-29-2015
---	--------------------

Note: Refer to comments on reverse side of form.



Wisconsin Department of Agriculture, Trade and Consumer Protection
Bureau of Weights and Measures, Permits and Licensing
P.O. Box 7837
Madison, WI 53707-7837
(608) 224-4942

FOR OFFICE USE ONLY

Wis. Admin. Code §ATCP 93.560

TANK SYSTEM SERVICE AND CLOSURE ASSESSMENT REPORT

CHECK ONE: UNDERGROUND ABOVEGROUND

FOR PORTIONS OF THE FORM THAT DO NOT APPLY, CHECK THE 'N/A' BOX

Complete One Form for Each System Service Event

The information you provide may be used for purposes other than for which it was originally intended (s.15.04 (1) (m), Wis. Stats.).

Part A – To be completed by contractor performing repair or closure

A. TYPE OF SERVICE CLOSURE REPAIR/UPGRADE CHANGE-IN-SERVICE

Indicate portion of system being serviced if a repair, upgrade or change-in-service is being performed

Remote fill Tank Piping Transition/containment sump Spill bucket Dispenser

B. IDENTIFICATION (Please Print)

1. Facility Name <i>Circle C Convenience Center</i>		2. Owner Name <i>CCF Inc.</i>	
Facility Street Address (not P.O. Box) <i>426 US Hwy 63</i>		3. Contact Name Job Title	
Municipality <i>Clear Lake</i>		Mailing Address <i>125 Columbia Ct. #8</i>	
<input type="checkbox"/> City <input checked="" type="checkbox"/> Village <input type="checkbox"/> Town of		Post Office <i>Chaska MN 55018</i>	
Zip Code <i>54005</i>		State <i>MN</i>	
County <i>Polk</i>		Zip Code <i>55018</i>	
4. Primary Service Contractor Section A above <i>Hellers Junk Removal</i>		Service Contractor Street Address <i>3948 State Rd 19 #2</i>	
Service Contractor Telephone No. (include area code) <i>(608) 242-8210</i>		Service Contractor City, State, Zip Code <i>DeForest WI 53532</i>	

C. TANK SYSTEM DETAIL (Complete for all service activities)

a	b	c	d	e	f	g		h	
Tank ID#	Type of Closure ¹	Tank Material of Construction	Piping Material of Construction	Tank Capacity (gallons)	Contents ²	Release - System Integrity Compromised (e.g. holes, cracks, loose connection, etc)?		If "Yes" to "g", Then Specify Source & Cause of Release ⁵	
						Y	N	Source of Release ³	Cause of Release ⁴
<i>324341</i>	<i>P</i>	<i>C. Steel</i>	<i>Fiber</i>	<i>10,000</i>	<i>UG</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
<i>324342</i>	<i>P</i>	<i>C. Steel</i>	<i>Fiber</i>	<i>8,000</i>	<i>UG</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
<i>324343</i>	<i>P</i>	<i>C. Steel</i>	<i>Fiber</i>	<i>8,000</i>	<i>UG</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
						<input type="checkbox"/>	<input type="checkbox"/>		
						<input type="checkbox"/>	<input type="checkbox"/>		
						<input type="checkbox"/>	<input type="checkbox"/>		

1. Indicate type of closure: P = Permanent, TOS = Temporarily Out-of-Service, CIP = Closure In-Place

2. Indicate type of product: DL = Diesel, LG = Leaded Gasoline, UG = Unleaded Gasoline, FO = Fuel Oil, GH = Gasohol, AF = Aviation Fuel, K = Kerosene, PX = Premix, WO = Waste/Used Motor Oil, FCHZW = Flammable/Combustible Hazardous Waste, OC = Other Chemical (indicate the chemical name(s))

CAS number(s): _____

3. Source of release: T = tank, P = piping, D = dispenser, STP = submersible turbine pump, DP = delivery problem, O = other, UNK = Unknown

4. Cause of release: S = spill, O = overfill, POMD = physical or mechanical damage, C = corrosion, IP = installation problem, O = other, UNK = Unknown

5. Has release been reported to the Department of Natural Resources? Yes No Release not evident at this time

D. CLOSURES (Check applicable box at right in response to all statements in section D)

Written notification was provided to the local agent 5 days in advance of closure date.

Y N

All local permits were obtained before beginning closure.

Y N NA

UST Form TR-WM-137 or AST Form TR-WM-118 filed by owner with the DATCP indicating closure.

Y

N NA

NOTE: TANK INVENTORY FORM TR-WM-137 or TR-WM-118 SIGNED BY THE OWNER MUST BE SUBMITTED WITH EACH CLOSURE or CHANGE-IN-SERVICE CHECKLIST

D.1 TEMPORARILY OUT-OF-SERVICE

1. Product removed.

	Remover Verified	Inspector Verified	NA
a. Product lines drained into tank (or other container) and liquid removed, and	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/>
b. All product removed to bottom of suction line, OR	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/>
c. All product removed to within 1" of bottom.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
2. Fill pipe, gauge pipe, tank truck vapor recovery fittings, and vapor return lines capped.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
3. All product lines at the islands or pumps located elsewhere are removed and capped, OR	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
4. Dispensers/pumps left in place but locked and power disconnected.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
5. Vent lines left open.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/>
6. Inventory form filed indicating temporarily out-of-service (TOS) closure.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/>

D.2. CLOSURE BY REMOVAL OR IN-PLACE

1. General Requirements

a. Product from piping drained into tank (or other container).	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
b. Piping disconnected from tank and removed.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
c. All liquid and residue removed from tank using explosion-proof pumps or hand pumps.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
d. All pump motors and suction hoses bonded to tank or otherwise grounded.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
e. Fill pipes, gauge pipes, vapor recovery connections, submersible pumps and other fixtures removed.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
f. Vent lines left connected until tanks purged.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
g. Tank openings temporarily plugged so vapors exit through vent.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
h. Tank atmosphere reduced to 10% of the lower flammable range (LEL) - see Section E.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>

2. Specific Closure-by-Removal Requirements

a. Tank removed from excavation after PURGING/INERTING; placed on level ground and blocked to prevent movement.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
b. Tank cleaned before being removed from site.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
c. Tank labeled in 2" high letters after removal but before being moved from site.	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
NOTE: COMPLETE TANK LABELING SHOULD INCLUDE WARNING AGAINST REUSE; FORMER CONTENTS; VAPOR STATE; VAPOR FREEING TREATMENT; DATE.			
d. Tank vent hole (1/8" in uppermost part of tank) installed prior to moving the tank from site.	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>
e. Site security is provided while the excavation is open.	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/>

3. Specific Closure-In-Place Requirements

NOTE: CLOSURES IN-PLACE ARE ONLY ALLOWED WITH THE PRIOR WRITTEN APPROVAL OF THE DEPARTMENT OF AGRICULTURE, TRADE AND CONSUMER PROTECTION (DATCP) OR LOCAL AGENT.

a. Tank properly cleaned to remove all sludge and residue.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/>
b. Solid inert material (sand, cyclone boiler slag, or pea gravel recommended) introduced and tank filled.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/>
c. Vent line disconnected or removed.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/>
d. Inventory form filed by owner with the DATCP indicating closure in-place.	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> Y <input type="checkbox"/> N	<input checked="" type="checkbox"/>

E. REPAIR, UPGRADE OR CHANGE-IN-SERVICE

Written notification was provided to the local agent 5 days in advance of service date.

All local permits were obtained before beginning service.

Form TR-WM-137 or TR-WM-118 filed by owner with the DATCP indicating change-in-service.

Y N NA
 Y N NA
 Y N NA

F. METHOD OF VAPOR FREEING OF TANK

Displacement of vapors by eductor or diffused air blower.

Eductor driven by compressed air, bonded and drop tube left in place; vapors discharged minimum of 12 feet above ground.

Diffused air blower bonded and drop tube removed. Air pressure not exceeding 5 psig.

Inert gas using dry ice or liquid carbon dioxide.

Inert gas using CO₂ or N₂ **NOTE: INERT GASSES PRODUCE AN OXYGEN DEFICIENT ATMOSPHERE. LEL METERS MAY NOT FUNCTION ACCURATELY. THE TANK MAY NOT BE ENTERED IN THIS STATE WITHOUT SPECIAL EQUIPMENT.**

Gas introduced through a single opening at a point near the bottom of the tank at the end of the tank opposite the vent.

Gas introduced under low pressure not to exceed 5 psig to reduce static electricity. Gas introducing device grounded.

Readings of 10% or less of the lower flammable range (LEL) or 0% oxygen obtained before removing tank from ground.

Tank atmosphere monitored for flammable or combustible vapor levels prior to and during cleaning and cutting.

Calibrate combustible gas indicator and/or oxygen meter prior to use. Drop tube removed prior to checking atmosphere. Tank space monitored at bottom, middle and upper portion of tank.

G. REMOVER/CLEANER INFORMATION

Jon Heller
Remover/Cleaner Name (print)

Jon Heller
Remover/Cleaner Signature

402888
Certification No.

10-29-2015
Date Signed

I attest that the procedures and information which I have provided as the tank closure contractor are correct and comply with ATCP 93.

Company expected to perform soil contamination assessment

Heller's Junk Removal - 402889

H. INSPECTOR INFORMATION

RICK VAN BLARICOM
Inspector Name (print)

R. Van Blaricom
Inspector Signature

35026
Inspector Cert #

LPO Agency #

CLEAR LAKE
FDID # For Location Where Inspection Performed

715 491 0983
Inspector Telephone Number

10-29-15
Date Signed

Part B – To be completed by environmental professional

Submit original Part B to the WDNR along with a copy of Part A

I. TANK-SYSTEM SITE ASSESSMENT (TSSA)

Site Name: Circle C Convenience Center
 Address: 426 US Hwy 63 Clear Lake WI 54605
 Note: Site name and address must match with Part A Section 1.

To determine if a TSSA is required, see ATCP 93 and section II part B of ASSESSMENT AND REPORTING OF SUSPECTED AND OBVIOUS RELEASES FROM UNDERGROUND AND ABOVEGROUND STORAGE TANK SYSTEMS.

If a TSSA is required, then follow the procedures detailed in ASSESSMENT AND REPORTING OF SUSPECTED AND OBVIOUS RELEASES FROM UNDERGROUND AND ABOVEGROUND STORAGE TANK SYSTEMS.

1. Site Information

- a. Has there been a previously documented release at this site? Y N
 If yes, provide the DATCP # _____, or DNR BRRT's # 03-49-274529
- b. Number of active tanks¹ at facility prior to completion of current services USTs 3 ASTs _____
 (NOTE 1: Do not include previously closed systems or system components.)
- c. Excavation/trench dimensions (in feet). (Photos must be provided.)

EXCAVATION/TRENCH #	LENGTH	WIDTH	DEPTH
<u>1</u>	<u>30 Ft.</u>	<u>30 ft</u>	<u>12 ft.</u>
<u>2</u>	<u>8 ft</u>	<u>8 ft</u>	<u>4 ft</u>
<u>3</u>	<u>8 ft</u>	<u>8 ft</u>	<u>4 ft</u>
<u>4</u>	<u>5'</u>	<u>5 ft</u>	<u>4 ft.</u>

2. Visual Excavation/Trench Inspection (Photos must be provided for "Yes" responses, except item b.)

- Do any of the following conditions exist in or about the excavation(s)?
- a. Stained soils: Y N
 - b. Petroleum odor: Y N
 - c. Water In excavation/trench: Y N
 - d. Free product in the excavation/trench: Y N
 - e. Sheen or free product on water: Y N

3. Geology/Hydrogeology

- a. Depth to groundwater _____ feet
- b. Indicate type of geology² S GR
 (Note 2: Use these symbols individually or in combination as appropriate: C = Clay, SLT = Silt, S = Sand, Gr = Gravel)

4. Receptors

- a. Water supply well(s) within 250 feet of the facility? Y N If yes, specify _____
- b. Surface water(s) within 1000 feet of the facility? Y N If yes, specify _____

5. Sampling

- a. Follow the procedures detailed in ASSESSMENT AND REPORTING OF SUSPECTED AND OBVIOUS RELEASES FROM UNDERGROUND AND ABOVEGROUND STORAGE TANK SYSTEMS.
- b. Complete Tables 1 and 2 as appropriate. (Attach chain-of-custody and laboratory analytical reports.)
- c. Attach a detailed map of site features and sample locations.

J. NOTE RELEVANT OBSERVATIONS, SPECIFIC PROBLEMS OR CONCERNS BELOW

Ground water encountered between 5 + 6 feet Below Grade.

TABLE 1 SOIL FIELD SCREENING & GRO/DRO LABORATORY ANALYTICAL RESULTS-FOR PETROLEUM PRODUCTS

Sample ID #	Sample Location & Soil/Geologic Description	Sample Collection Method				Depth Below Tank/Piping (feet)	Field Screening Result (ppm)	GRO (mg/kg)	DRO (mg/kg)
		Grab	Shelby Tube	Direct Push	Split Spoon				
40124404 001	Tank NW Corner	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5' BG	—	—	—
002	Tank NW Side	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5' BG	—	—	—
003	Tank N Center	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5' BG	—	—	—
004	Tank NE Side	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5' BG	—	—	—
005	Tank NE Corner	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5' BG	—	—	—
006	Tank SE Corner	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5' BG	—	—	—
007	Tank SE Side	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5' BG	—	—	—
008	Tank S Center	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5' BG	—	—	—
009	Tank SW Side	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5' BG	—	—	—
010	Tank SW Corner	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5' BG	—	—	—
011	West Dispenser	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5' BG	—	—	—
012	East Dispenser	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5' BG	—	—	—
013	Vent line	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2' BP	—	—	—

TABLE 2 SOIL LABORATORY ANALYTICAL RESULTS-FOR PETROLEUM PRODUCTS

Sample ID #	BENZENE	TOLUENE	ETHYLBENZENE	MTBE	TRIMETHYL - BENZENES (TOTAL)	XYLENES (TOTAL)	NAPHTHALENE
	ug/kg	ug/kg	ug/kg	ug/kg	ug/kg	ug/kg	ug/kg
001	<25	<25	<25	<25	<25	<50	<25
002	<25	<25	<25	<25	<25	<50	<25
003	<25	<25	<25	<25	<25	<50	<25
004	<25	<25	<25	<25	<25	<50	<25
005	<25	<25	<25	<25	<25	<50	<25
006	<25	<25	<25	<25	<25	<50	<25
007	<25	<25	<25	<25	<25	<50	<25
008	<25	<25	<25	<25	<25	<50	<25
009	<25	<25	<25	<25	<25	<50	<25
010	<25	<25	<25	<25	<25	<50	<25
011	<25	<25	<25	<25	<25	<50	<25
012	<25	<25	<25	<25	<25	<50	<25
013	<25	<25	<25	<25	<25	<50	<25

K. TANK-SYSTEM SITE ASSESSMENT INFORMATION

As a tank-system site assessor certified under Wis. Admin. Code section SPS 305.83, it is my opinion that there is no indication of a release of a regulated substance to the environment.

Sampling at the site indicates there has been a release to the environment. Pursuant to Wis. Admin. Code section ATCP 93.585 (2) (a) and Wis. Stats. section 292.11 (2) (a), the owner or operator or contractor performing work under chapter ATCP 93 shall immediately report any release of a regulated substance to the Wisconsin Department of Natural Resources. Failure to do so may result in forfeitures of a minimum of \$10 and a maximum of \$5000 for each violation under Wis. Stats. section 168.26 (5). Each day of continued violation and each tank are treated as separate offenses.

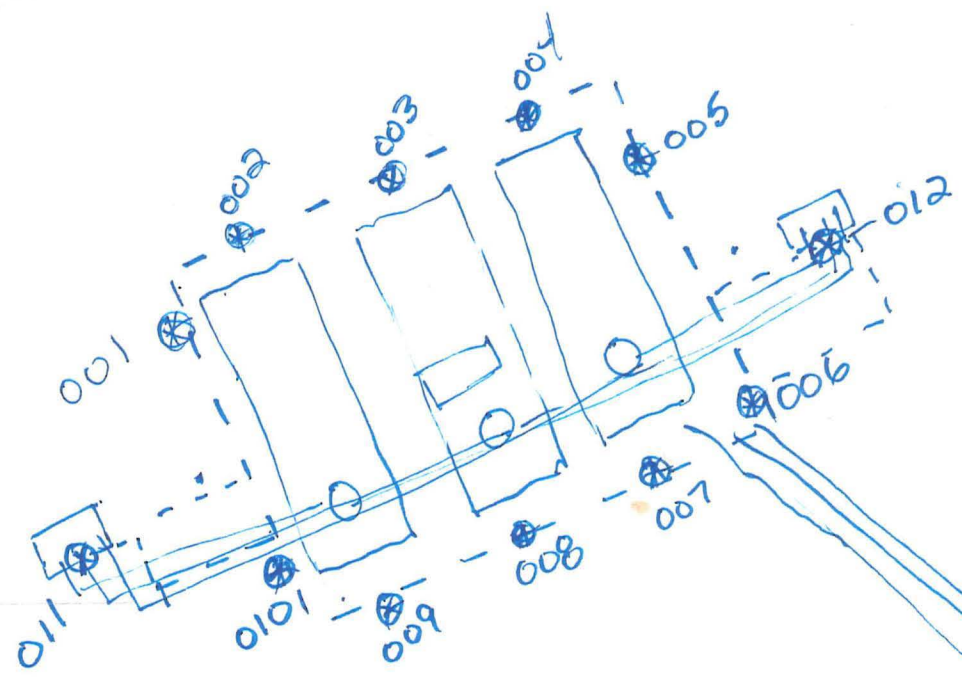
Jon J. Heller
 Tank-System Site Assessor Name (print)
 608-242-8210
 Tank-System Site Assessor Telephone Number

Jon J. Heller
 Tank-System Site Assessor Signature
 12-14-2015
 Date Signed

402889
 Certification Number #
 Heller's Junk Removal
 Company Name

55th Street.

Hwy 63



W26 Hwy 63
Clear Lake W1

Vent.
013

November 11, 2015

Robyn Seymour
Seymour Environmental Services, INC.
2531 Dyreson Road
Mc Farland, WI 53558

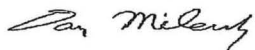
RE: Project: CCF CLEAR LAKE
Pace Project No.: 40124404

Dear Robyn Seymour:

Enclosed are the analytical results for sample(s) received by the laboratory on November 10, 2015. The results relate only to the samples included in this report. Results reported herein conform to the most current TNI standards and the laboratory's Quality Assurance Manual, where applicable, unless otherwise noted in the body of the report.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Dan Milewsky
dan.milewsky@pacelabs.com
Project Manager

Enclosures



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..



CERTIFICATIONS

Project: CCF CLEAR LAKE
Pace Project No.: 40124404

Green Bay Certification IDs

1241 Bellevue Street, Green Bay, WI 54302
Florida/NELAP Certification #: E87948
Illinois Certification #: 200050
Kentucky Certification #: 82
Louisiana Certification #: 04168
Minnesota Certification #: 055-999-334
Virginia VELAP ID: 460263

North Dakota Certification #: R-150
South Carolina Certification #: 83006001
Texas Certification #: T104704529-14-1
US Dept of Agriculture #: S-76505
Virginia VELAP ID: 460263
Virginia VELAP Certification ID: 460263
Wisconsin Certification #: 405132750

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..

SAMPLE SUMMARY

Project: CCF CLEAR LAKE
Pace Project No.: 40124404

Lab ID	Sample ID	Matrix	Date Collected	Date Received
40124404001	TANK N.W. CORNER	Solid	11/02/15 13:00	11/10/15 07:40
40124404002	TANK N.W. SIDE	Solid	11/02/15 13:20	11/10/15 07:40
40124404003	TANK N CENTER	Solid	11/02/15 13:40	11/10/15 07:40
40124404004	TANK NE SIDE	Solid	11/02/15 14:00	11/10/15 07:40
40124404005	TANK NE CORNER	Solid	11/02/15 14:20	11/10/15 07:40
40124404006	TANK S.E. CORNER	Solid	11/02/15 14:40	11/10/15 07:40
40124404007	TANK S.E. SIDE	Solid	11/02/15 15:00	11/10/15 07:40
40124404008	TANK S CENTER	Solid	11/02/15 15:20	11/10/15 07:40
40124404009	TANK S.W. SIDE	Solid	11/02/15 15:40	11/10/15 07:40
40124404010	TANK S.W. CORNER	Solid	11/02/15 16:00	11/10/15 07:40
40124404011	WEST DISPENSER	Solid	11/02/15 16:20	11/10/15 07:40
40124404012	EAST DISPENSER	Solid	11/02/15 16:40	11/10/15 07:40
40124404013	VENT LINE	Solid	11/03/15 08:00	11/10/15 07:40

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..

SAMPLE ANALYTE COUNT

Project: CCF CLEAR LAKE
Pace Project No.: 40124404

Lab ID	Sample ID	Method	Analysts	Analytes Reported
40124404001	TANK N.W. CORNER	WI MOD GRO	LCF	10
		ASTM D2974-87	SKW	1
40124404002	TANK N.W. SIDE	WI MOD GRO	LCF	10
		ASTM D2974-87	SKW	1
40124404003	TANK N CENTER	WI MOD GRO	LCF	10
		ASTM D2974-87	SKW	1
40124404004	TANK NE SIDE	WI MOD GRO	LCF	10
		ASTM D2974-87	SKW	1
40124404005	TANK NE CORNER	WI MOD GRO	LCF	10
		ASTM D2974-87	SKW	1
40124404006	TANK S.E. CORNER	WI MOD GRO	LCF	10
		ASTM D2974-87	SKW	1
40124404007	TANK S.E. SIDE	WI MOD GRO	LCF	10
		ASTM D2974-87	SKW	1
40124404008	TANK S CENTER	WI MOD GRO	LCF	10
		ASTM D2974-87	SKW	1
40124404009	TANK S.W. SIDE	WI MOD GRO	LCF	10
		ASTM D2974-87	SKW	1
40124404010	TANK S.W. CORNER	WI MOD GRO	LCF	10
		ASTM D2974-87	SKW	1
40124404011	WEST DISPENSER	WI MOD GRO	LCF	10
		ASTM D2974-87	SKW	1
40124404012	EAST DISPENSER	WI MOD GRO	LCF	10
		ASTM D2974-87	SKW	1
40124404013	VENT LINE	WI MOD GRO	LCF	10
		ASTM D2974-87	SKW	1

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..

ANALYTICAL RESULTS

Project: CCF CLEAR LAKE
Pace Project No.: 40124404

Sample: TANK N.W. CORNER Lab ID: 40124404001 Collected: 11/02/15 13:00 Received: 11/10/15 07:40 Matrix: Solid

Results reported on a "dry weight" basis and are adjusted for percent moisture, sample size and any dilutions.

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV									
Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.									
Benzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 22:43	71-43-2	W
Ethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 22:43	100-41-4	W
Methyl-tert-butyl ether	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 22:43	1634-04-4	W
Naphthalene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 22:43	91-20-3	W
Toluene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 22:43	108-88-3	W
1,2,4-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 22:43	95-63-6	W
1,3,5-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 22:43	108-67-8	W
m&p-Xylene	<50.0	ug/kg	100	50.0	1	11/10/15 10:57	11/10/15 22:43	179601-23-1	W
o-Xylene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 22:43	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	102	%	80-120		1	11/10/15 10:57	11/10/15 22:43	98-08-8	
Percent Moisture									
Analytical Method: ASTM D2974-87									
Percent Moisture	11.7	%	0.10	0.10	1		11/10/15 12:49		

Sample: TANK N.W. SIDE Lab ID: 40124404002 Collected: 11/02/15 13:20 Received: 11/10/15 07:40 Matrix: Solid

Results reported on a "dry weight" basis and are adjusted for percent moisture, sample size and any dilutions.

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV									
Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.									
Benzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:09	71-43-2	W
Ethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:09	100-41-4	W
Methyl-tert-butyl ether	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:09	1634-04-4	W
Naphthalene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:09	91-20-3	W
Toluene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:09	108-88-3	W
1,2,4-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:09	95-63-6	W
1,3,5-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:09	108-67-8	W
m&p-Xylene	<50.0	ug/kg	100	50.0	1	11/10/15 10:57	11/10/15 23:09	179601-23-1	W
o-Xylene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:09	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	99	%	80-120		1	11/10/15 10:57	11/10/15 23:09	98-08-8	
Percent Moisture									
Analytical Method: ASTM D2974-87									
Percent Moisture	15.1	%	0.10	0.10	1		11/10/15 12:49		

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..



ANALYTICAL RESULTS

Project: CCF CLEAR LAKE
 Pace Project No.: 40124404

Sample: TANK N CENTER Lab ID: 40124404003 Collected: 11/02/15 13:40 Received: 11/10/15 07:40 Matrix: Solid
Results reported on a "dry weight" basis and are adjusted for percent moisture, sample size and any dilutions.

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.									
Benzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:34	71-43-2	W
Ethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:34	100-41-4	W
Methyl-tert-butyl ether	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:34	1634-04-4	W
Naphthalene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:34	91-20-3	W
Toluene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:34	108-88-3	W
1,2,4-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:34	95-63-6	W
1,3,5-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:34	108-67-8	W
m&p-Xylene	<50.0	ug/kg	100	50.0	1	11/10/15 10:57	11/10/15 23:34	179601-23-1	W
o-Xylene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/10/15 23:34	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	100	%	80-120		1	11/10/15 10:57	11/10/15 23:34	98-08-8	
Percent Moisture Analytical Method: ASTM D2974-87									
Percent Moisture	14.5	%	0.10	0.10	1		11/10/15 12:49		

Sample: TANK NE SIDE Lab ID: 40124404004 Collected: 11/02/15 14:00 Received: 11/10/15 07:40 Matrix: Solid
Results reported on a "dry weight" basis and are adjusted for percent moisture, sample size and any dilutions.

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.									
Benzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:00	71-43-2	W
Ethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:00	100-41-4	W
Methyl-tert-butyl ether	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:00	1634-04-4	W
Naphthalene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:00	91-20-3	W
Toluene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:00	108-88-3	W
1,2,4-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:00	95-63-6	W
1,3,5-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:00	108-67-8	W
m&p-Xylene	<50.0	ug/kg	100	50.0	1	11/10/15 10:57	11/11/15 00:00	179601-23-1	W
o-Xylene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:00	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	99	%	80-120		1	11/10/15 10:57	11/11/15 00:00	98-08-8	1q
Percent Moisture Analytical Method: ASTM D2974-87									
Percent Moisture	13.3	%	0.10	0.10	1		11/10/15 12:49		

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
 without the written consent of Pace Analytical Services, Inc.

ANALYTICAL RESULTS

Project: CCF CLEAR LAKE
Pace Project No.: 40124404

Sample: TANK NE CORNER Lab ID: 40124404005 Collected: 11/02/15 14:20 Received: 11/10/15 07:40 Matrix: Solid

Results reported on a "dry weight" basis and are adjusted for percent moisture, sample size and any dilutions.

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV									
Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.									
Benzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:26	71-43-2	W
Ethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:26	100-41-4	W
Methyl-tert-butyl ether	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:26	1634-04-4	W
Naphthalene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:26	91-20-3	W
Toluene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:26	108-88-3	W
1,2,4-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:26	95-63-6	W
1,3,5-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:26	108-67-8	W
m&p-Xylene	<50.0	ug/kg	100	50.0	1	11/10/15 10:57	11/11/15 00:26	179601-23-1	W
o-Xylene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:26	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	101	%	80-120		1	11/10/15 10:57	11/11/15 00:26	98-08-8	
Percent Moisture									
Analytical Method: ASTM D2974-87									
Percent Moisture	11.2	%	0.10	0.10	1		11/10/15 12:49		

Sample: TANK S.E. CORNER Lab ID: 40124404006 Collected: 11/02/15 14:40 Received: 11/10/15 07:40 Matrix: Solid

Results reported on a "dry weight" basis and are adjusted for percent moisture, sample size and any dilutions.

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV									
Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.									
Benzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:52	71-43-2	W
Ethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:52	100-41-4	W
Methyl-tert-butyl ether	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:52	1634-04-4	W
Naphthalene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:52	91-20-3	W
Toluene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:52	108-88-3	W
1,2,4-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:52	95-63-6	W
1,3,5-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:52	108-67-8	W
m&p-Xylene	<50.0	ug/kg	100	50.0	1	11/10/15 10:57	11/11/15 00:52	179601-23-1	W
o-Xylene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 00:52	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	99	%	80-120		1	11/10/15 10:57	11/11/15 00:52	98-08-8	
Percent Moisture									
Analytical Method: ASTM D2974-87									
Percent Moisture	10.2	%	0.10	0.10	1		11/10/15 12:49		

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..

ANALYTICAL RESULTS

Project: CCF CLEAR LAKE
Pace Project No.: 40124404

Sample: TANK S.E. SIDE Lab ID: 40124404007 Collected: 11/02/15 15:00 Received: 11/10/15 07:40 Matrix: Solid
Results reported on a "dry weight" basis and are adjusted for percent moisture, sample size and any dilutions.

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.									
Benzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 03:52	71-43-2	W
Ethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 03:52	100-41-4	W
Methyl-tert-butyl ether	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 03:52	1634-04-4	W
Naphthalene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 03:52	91-20-3	W
Toluene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 03:52	108-88-3	W
1,2,4-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 03:52	95-63-6	W
1,3,5-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 03:52	108-67-8	W
m&p-Xylene	<50.0	ug/kg	100	50.0	1	11/10/15 10:57	11/11/15 03:52	179601-23-1	W
o-Xylene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 03:52	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	100	%	80-120		1	11/10/15 10:57	11/11/15 03:52	98-08-8	
Percent Moisture Analytical Method: ASTM D2974-87									
Percent Moisture	10.4	%	0.10	0.10	1		11/10/15 12:49		

Sample: TANK S CENTER Lab ID: 40124404008 Collected: 11/02/15 15:20 Received: 11/10/15 07:40 Matrix: Solid
Results reported on a "dry weight" basis and are adjusted for percent moisture, sample size and any dilutions.

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.									
Benzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:17	71-43-2	W
Ethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:17	100-41-4	W
Methyl-tert-butyl ether	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:17	1634-04-4	W
Naphthalene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:17	91-20-3	W
Toluene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:17	108-88-3	W
1,2,4-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:17	95-63-6	W
1,3,5-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:17	108-67-8	W
m&p-Xylene	<50.0	ug/kg	100	50.0	1	11/10/15 10:57	11/11/15 04:17	179601-23-1	W
o-Xylene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:17	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	100	%	80-120		1	11/10/15 10:57	11/11/15 04:17	98-08-8	
Percent Moisture Analytical Method: ASTM D2974-87									
Percent Moisture	11.9	%	0.10	0.10	1		11/10/15 12:49		

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..

ANALYTICAL RESULTS

Project: CCF CLEAR LAKE
Pace Project No.: 40124404

Sample: TANK S.W. SIDE Lab ID: 40124404009 Collected: 11/02/15 15:40 Received: 11/10/15 07:40 Matrix: Solid
Results reported on a "dry weight" basis and are adjusted for percent moisture, sample size and any dilutions.

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.									
Benzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:43	71-43-2	W
Ethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:43	100-41-4	W
Methyl-tert-butyl ether	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:43	1634-04-4	W
Naphthalene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:43	91-20-3	W
Toluene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:43	108-88-3	W
1,2,4-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:43	95-63-6	W
1,3,5-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:43	108-67-8	W
m&p-Xylene	<50.0	ug/kg	100	50.0	1	11/10/15 10:57	11/11/15 04:43	179601-23-1	W
o-Xylene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 04:43	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	101	%	80-120		1	11/10/15 10:57	11/11/15 04:43	98-08-8	
Percent Moisture Analytical Method: ASTM D2974-87									
Percent Moisture	12.0	%	0.10	0.10	1		11/10/15 12:49		

Sample: TANK S.W. CORNER Lab ID: 40124404010 Collected: 11/02/15 16:00 Received: 11/10/15 07:40 Matrix: Solid
Results reported on a "dry weight" basis and are adjusted for percent moisture, sample size and any dilutions.

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.									
Benzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:09	71-43-2	W
Ethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:09	100-41-4	W
Methyl-tert-butyl ether	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:09	1634-04-4	W
Naphthalene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:09	91-20-3	W
Toluene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:09	108-88-3	W
1,2,4-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:09	95-63-6	W
1,3,5-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:09	108-67-8	W
m&p-Xylene	<50.0	ug/kg	100	50.0	1	11/10/15 10:57	11/11/15 05:09	179601-23-1	W
o-Xylene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:09	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	101	%	80-120		1	11/10/15 10:57	11/11/15 05:09	98-08-8	
Percent Moisture Analytical Method: ASTM D2974-87									
Percent Moisture	10.0	%	0.10	0.10	1		11/10/15 12:49		

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..

ANALYTICAL RESULTS

Project: CCF CLEAR LAKE
Pace Project No.: 40124404

Sample: WEST DISPENSER Lab ID: 40124404011 Collected: 11/02/15 16:20 Received: 11/10/15 07:40 Matrix: Solid
Results reported on a "dry weight" basis and are adjusted for percent moisture, sample size and any dilutions.

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.									
Benzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:35	71-43-2	W
Ethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:35	100-41-4	W
Methyl-tert-butyl ether	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:35	1634-04-4	W
Naphthalene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:35	91-20-3	W
Toluene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:35	108-88-3	W
1,2,4-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:35	95-63-6	W
1,3,5-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:35	108-67-8	W
m&p-Xylene	<50.0	ug/kg	100	50.0	1	11/10/15 10:57	11/11/15 05:35	179601-23-1	W
o-Xylene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 05:35	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	100	%	80-120		1	11/10/15 10:57	11/11/15 05:35	98-08-8	
Percent Moisture Analytical Method: ASTM D2974-87									
Percent Moisture	10.6	%	0.10	0.10	1		11/10/15 12:49		

Sample: EAST DISPENSER Lab ID: 40124404012 Collected: 11/02/15 16:40 Received: 11/10/15 07:40 Matrix: Solid
Results reported on a "dry weight" basis and are adjusted for percent moisture, sample size and any dilutions.

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.									
Benzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:00	71-43-2	W
Ethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:00	100-41-4	W
Methyl-tert-butyl ether	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:00	1634-04-4	W
Naphthalene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:00	91-20-3	W
Toluene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:00	108-88-3	W
1,2,4-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:00	95-63-6	W
1,3,5-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:00	108-67-8	W
m&p-Xylene	<50.0	ug/kg	100	50.0	1	11/10/15 10:57	11/11/15 06:00	179601-23-1	W
o-Xylene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:00	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	101	%	80-120		1	11/10/15 10:57	11/11/15 06:00	98-08-8	1q
Percent Moisture Analytical Method: ASTM D2974-87									
Percent Moisture	10.6	%	0.10	0.10	1		11/10/15 12:49		

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..

ANALYTICAL RESULTS

Project: CCF CLEAR LAKE
Pace Project No.: 40124404

Sample: VENT LINE Lab ID: 40124404013 Collected: 11/03/15 08:00 Received: 11/10/15 07:40 Matrix: Solid

Results reported on a "dry weight" basis and are adjusted for percent moisture, sample size and any dilutions.

Parameters	Results	Units	LOQ	LOD	DF	Prepared	Analyzed	CAS No.	Qual
WIGRO GCV		Analytical Method: WI MOD GRO Preparation Method: TPH GRO/PVOC WI ext.							
Benzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:26	71-43-2	W
Ethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:26	100-41-4	W
Methyl-tert-butyl ether	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:26	1634-04-4	W
Naphthalene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:26	91-20-3	W
Toluene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:26	108-88-3	W
1,2,4-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:26	95-63-6	W
1,3,5-Trimethylbenzene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:26	108-67-8	W
m&p-Xylene	<50.0	ug/kg	100	50.0	1	11/10/15 10:57	11/11/15 06:26	179601-23-1	W
o-Xylene	<25.0	ug/kg	50.0	25.0	1	11/10/15 10:57	11/11/15 06:26	95-47-6	W
Surrogates									
a,a,a-Trifluorotoluene (S)	101	%	80-120		1	11/10/15 10:57	11/11/15 06:26	98-08-8	
Percent Moisture		Analytical Method: ASTM D2974-87							
Percent Moisture	12.6	%	0.10	0.10	1		11/10/15 12:49		

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..

QUALITY CONTROL DATA

Project: CCF CLEAR LAKE
Pace Project No.: 40124404

QC Batch: GCV/15328 Analysis Method: WI MOD GRO
QC Batch Method: TPH GRO/PVOC WI ext. Analysis Description: WIGRO Solid GCV
Associated Lab Samples: 40124404001, 40124404002, 40124404003, 40124404004, 40124404005, 40124404006, 40124404007, 40124404008, 40124404009, 40124404010, 40124404011, 40124404012, 40124404013

METHOD BLANK: 1255550 Matrix: Solid
Associated Lab Samples: 40124404001, 40124404002, 40124404003, 40124404004, 40124404005, 40124404006, 40124404007, 40124404008, 40124404009, 40124404010, 40124404011, 40124404012, 40124404013

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
1,2,4-Trimethylbenzene	ug/kg	<25.0	50.0	11/10/15 21:00	
1,3,5-Trimethylbenzene	ug/kg	<25.0	50.0	11/10/15 21:00	
Benzene	ug/kg	<25.0	50.0	11/10/15 21:00	
Ethylbenzene	ug/kg	<25.0	50.0	11/10/15 21:00	
m&p-Xylene	ug/kg	<50.0	100	11/10/15 21:00	
Methyl-tert-butyl ether	ug/kg	<25.0	50.0	11/10/15 21:00	
Naphthalene	ug/kg	<25.0	50.0	11/10/15 21:00	
o-Xylene	ug/kg	<25.0	50.0	11/10/15 21:00	
Toluene	ug/kg	<25.0	50.0	11/10/15 21:00	
a,a,a-Trifluorotoluene (S)	%	101	80-120	11/10/15 21:00	

Parameter	Units	LABORATORY CONTROL SAMPLE & LCSD: 1255551 1255552								Qualifiers
		Spike Conc.	LCS Result	LCSD Result	LCS % Rec	LCSD % Rec	% Rec Limits	RPD	Max RPD	
1,2,4-Trimethylbenzene	ug/kg	1000	955	1010	95	101	80-120	5	20	
1,3,5-Trimethylbenzene	ug/kg	1000	945	996	94	100	80-120	5	20	
Benzene	ug/kg	1000	971	1030	97	103	80-120	6	20	
Ethylbenzene	ug/kg	1000	967	1020	97	102	80-120	5	20	
m&p-Xylene	ug/kg	2000	1920	2010	96	101	80-120	5	20	
Methyl-tert-butyl ether	ug/kg	1000	1020	1070	102	107	80-120	5	20	
Naphthalene	ug/kg	1000	942	1020	94	102	80-120	8	20	
o-Xylene	ug/kg	1000	983	1030	98	103	80-120	5	20	
Toluene	ug/kg	1000	964	1020	96	102	80-120	6	20	
a,a,a-Trifluorotoluene (S)	%				102	103	80-120			

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..

QUALITY CONTROL DATA

Project: CCF CLEAR LAKE
Pace Project No.: 40124404

QC Batch:	PMST/12092	Analysis Method:	ASTM D2974-87
QC Batch Method:	ASTM D2974-87	Analysis Description:	Dry Weight/Percent Moisture
Associated Lab Samples:	40124404001, 40124404002, 40124404003, 40124404004, 40124404005, 40124404006, 40124404007, 40124404008, 40124404009, 40124404010, 40124404011, 40124404012, 40124404013		

SAMPLE DUPLICATE: 1255722

Parameter	Units	40124375002 Result	Dup Result	RPD	Max RPD	Qualifiers
Percent Moisture	%	6.2	6.4	2	10	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..

QUALIFIERS

Project: CCF CLEAR LAKE
Pace Project No.: 40124404

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.
ND - Not Detected at or above LOD.
J - Estimated concentration at or above the LOD and below the LOQ.
LOD - Limit of Detection adjusted for dilution factor and percent moisture.
LOQ - Limit of Quantitation adjusted for dilution factor and percent moisture.
S - Surrogate
1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.
Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.
LCS(D) - Laboratory Control Sample (Duplicate)
MS(D) - Matrix Spike (Duplicate)
DUP - Sample Duplicate
RPD - Relative Percent Difference
NC - Not Calculable.
SG - Silica Gel - Clean-Up
U - Indicates the compound was analyzed for, but not detected at or above the adjusted LOD.
N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.
Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.
TNI - The NELAC Institute.

ANALYTE QUALIFIERS

1q Sample received overweight. Values should be considered an estimate.
W Non-detect results are reported on a wet weight basis.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..

QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: CCF CLEAR LAKE
Pace Project No.: 40124404

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
40124404001	TANK N.W. CORNER	TPH GRO/PVOC WI ext.	GCV/15328	WI MOD GRO	GCV/15329
40124404002	TANK N.W. SIDE	TPH GRO/PVOC WI ext.	GCV/15328	WI MOD GRO	GCV/15329
40124404003	TANK N CENTER	TPH GRO/PVOC WI ext.	GCV/15328	WI MOD GRO	GCV/15329
40124404004	TANK NE SIDE	TPH GRO/PVOC WI ext.	GCV/15328	WI MOD GRO	GCV/15329
40124404005	TANK NE CORNER	TPH GRO/PVOC WI ext.	GCV/15328	WI MOD GRO	GCV/15329
40124404006	TANK S.E. CORNER	TPH GRO/PVOC WI ext.	GCV/15328	WI MOD GRO	GCV/15329
40124404007	TANK S.E. SIDE	TPH GRO/PVOC WI ext.	GCV/15328	WI MOD GRO	GCV/15329
40124404008	TANK S CENTER	TPH GRO/PVOC WI ext.	GCV/15328	WI MOD GRO	GCV/15329
40124404009	TANK S.W. SIDE	TPH GRO/PVOC WI ext.	GCV/15328	WI MOD GRO	GCV/15329
40124404010	TANK S.W. CORNER	TPH GRO/PVOC WI ext.	GCV/15328	WI MOD GRO	GCV/15329
40124404011	WEST DISPENSER	TPH GRO/PVOC WI ext.	GCV/15328	WI MOD GRO	GCV/15329
40124404012	EAST DISPENSER	TPH GRO/PVOC WI ext.	GCV/15328	WI MOD GRO	GCV/15329
40124404013	VENT LINE	TPH GRO/PVOC WI ext.	GCV/15328	WI MOD GRO	GCV/15329
40124404001	TANK N.W. CORNER	ASTM D2974-87	PMST/12092		
40124404002	TANK N.W. SIDE	ASTM D2974-87	PMST/12092		
40124404003	TANK N CENTER	ASTM D2974-87	PMST/12092		
40124404004	TANK NE SIDE	ASTM D2974-87	PMST/12092		
40124404005	TANK NE CORNER	ASTM D2974-87	PMST/12092		
40124404006	TANK S.E. CORNER	ASTM D2974-87	PMST/12092		
40124404007	TANK S.E. SIDE	ASTM D2974-87	PMST/12092		
40124404008	TANK S CENTER	ASTM D2974-87	PMST/12092		
40124404009	TANK S.W. SIDE	ASTM D2974-87	PMST/12092		
40124404010	TANK S.W. CORNER	ASTM D2974-87	PMST/12092		
40124404011	WEST DISPENSER	ASTM D2974-87	PMST/12092		
40124404012	EAST DISPENSER	ASTM D2974-87	PMST/12092		
40124404013	VENT LINE	ASTM D2974-87	PMST/12092		

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, Inc..

(Please Print Clearly)

UPPER MIDWEST REGION

MN: 612-607-1700 WI: 920-469-2436

Company Name: Seymour Environmental
 Branch/Location: McFarland WI
 Project Contact: Jon Heller
 Phone: 608-242-8210
 Project Number:
 Project Name: CCF Clear Lake
 Project State: WI
 Sampled By (Print): Jon Heller
 Sampled By (Sign): *[Signature]*
 PO #:
 Regulatory Program:



CHAIN OF CUSTODY

***Preservation Codes**
 A=None B=HCL C=H2SO4 D=HNO3 E=DI Water F=Methanol G=NaOH
 H=Sodium Bisulfate Solution I=Sodium Thiosulfate J=Other

FILTERED?
(YES/NO)
 PRESERVATION
(CODE)*

Y/N	Pick Letter	Analysis Requested
		PVOC/Alpha

Quote #:
 Mail To Contact:
 Mail To Company:
 Mail To Address:
 Invoice To Contact:
 Invoice To Company:
 Invoice To Address:
 Invoice To Phone:

CLIENT COMMENTS	LAB COMMENTS (Lab Use Only)	Profile #
	1-4ozp ^A 1-40mlv ^F	

Data Package Options (billable)
 EPA Level III
 EPA Level IV

MS/MSD
 On your sample (billable)
 NOT needed on your sample

Matrix Codes
 A = Air W = Water
 B = Biota DW = Drinking Water
 C = Charcoal GW = Ground Water
 O = Oil SW = Surface Water
 S = Soil WW = Waste Water
 SI = Sludge WP = Wipe

PACE LAB #	CLIENT FIELD ID	COLLECTION		MATRIX
		DATE	TIME	
001	Tank N.W. Corner	11-2	1:00	S
002	Tank N.W. Side	11-2	1:20	S
003	Tank N Center	11-2	1:40	S
004	Tank NE side	11-2	2:00	S
005	Tank NE Corner	11-2	2:20	S
006	Tank S.E. Corner	11-2	2:40	S
007	Tank SE Side	11-2	3:00	S
008	Tank S. Center	11-2	3:20	S
009	Tank S.W. Side	11-2	3:40	S
010	Tank SW Corner	11-2	4:00	S
011	West Dispenser	11-2	4:20	S
012	East Dispenser	11-2	4:40	S
013	Vent line	11-3	8:00	S

Rush Turnaround Time Requested - Prelims
 (Rush TAT subject to approval/surcharge)
 Date Needed:
 Transmit Prelim Rush Results by (complete what you want):
 Email #1:
 Email #2:
 Telephone:
 Fax:
 Samples on HOLD are subject to special pricing and release of liability

Relinquished By: *[Signature]* Date/Time: 11-9-15 12:15
 Relinquished By: *[Signature]* Date/Time: 11-10-15 07:40
 Relinquished By: Date/Time:
 Relinquished By: Date/Time:
 Relinquished By: Date/Time:

Received By: *[Signature]* Date/Time: 11-9-15 07:40
 Received By: *[Signature]* Date/Time: 11-10-15 07:40
 Received By: Date/Time:
 Received By: Date/Time:
 Received By: Date/Time:

PACE Project No. 40124404
 Receipt Temp = 20.1°C
 Sample Receipt pH OK / Adjusted
 Cooler Custody Seal Present / ~~Not Present~~
 Intact / Not Intact

Sample Condition Upon Receipt

Pace Analytical Services, Inc.
1241 Bellevue Street, Suite 9
Green Bay, WI 54302

Pace Analytical

Client Name: Seymour Env.

Project #: **WO#: 40124404**

Courier: Fed Ex UPS Client Pace Other: Durham

Tracking #: 1083377



Custody Seal on Cooler/Box Present: yes no Seals intact: yes no

Custody Seal on Samples Present: yes no Seals intact: yes no

Packing Material: Bubble Wrap Bubble Bags None Other

Thermometer Used: N/A Type of Ice: Wet Blue Dry None Samples on ice, cooling process has begun

Cooler Temperature: Uncorr: ~~KOT~~ /Corr: Biological Tissue is Frozen: yes no

Temp Blank Present: yes no no

Temp should be above freezing to 6°C for all sample except Biota.
Frozen Biota Samples should be received ≤ 0°C.

Person examining contents:
Date: 11-10-15
Initials: [Signature]

Comments:

Chain of Custody Present:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
Chain of Custody Relinquished:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name & Signature on COC:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	4.
Samples Arrived within Hold Time:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5.
- VOA Samples frozen upon receipt	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date/Time:
Short Hold Time Analysis (<72hr):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	6.
Rush Turn Around Time Requested:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7.
Sufficient Volume:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.
Correct Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.
-Pace Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
-Pace IR Containers Used:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Containers Intact:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10.
Filtered volume received for Dissolved tests	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11.
Sample Labels match COC:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12. <u>No collect date or time on all 4ozp.</u>
-Includes date/time/ID/Analysis Matrix:	<u>MARKS SW</u>	<u>11-10-15</u>
All containers needing preservation have been checked. (Non-Compliance noted in 13.)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13. <input type="checkbox"/> HNO3 <input type="checkbox"/> H2SO4 <input type="checkbox"/> NaOH <input type="checkbox"/> NaOH + ZnAct
All containers needing preservation are found to be in compliance with EPA recommendation. (HNO3, H2SO4 ≤2; NaOH+ZnAct ≥9, NaOH ≥12)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
exceptions: <u>VOA</u> coliform, TOC, TOX, TOH, O&G, WIDROW, Phenolics, OTHER:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Initial when completed
		Lab Std #ID of preservative
		Date/Time:
Headspace in VOA Vials (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14.
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15.
Trip Blank Custody Seals Present	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased):		

Client Notification/ Resolution: If checked, see attached form for additional comments
 Person Contacted: _____ Date/Time: _____
 Comments/ Resolution: _____

Project Manager Review: AMH for DM Date: 11/10/15