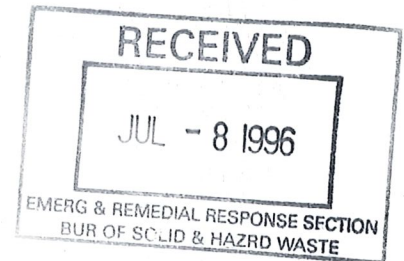


**UNDERGROUND STORAGE TANK REMOVAL SITE ASSESSMENT
WISCONSIN AIR NATIONAL GUARD FACILITY
SUPPORT EQUIPMENT SHOP (BLDG. 401)
3110 MITCHELL STREET
MADISON, WISCONSIN**



PREPARED FOR:

**MEAD & HUNT (ON BEHALF OF WI-ANG)
6501 WATTS ROAD - SUITE 101
MADISON, WISCONSIN 53719**

PREPARED BY:

**NINE SPRINGS ENVIRONMENTAL CONSULTANTS, INC.
2817 FISH HATCHERY ROAD
MADISON, WISCONSIN 53713**

**JULY 1996
NINE SPRINGS PROJECT NUMBER 1013-005**

NINE SPRINGS

ENVIRONMENTAL CONSULTANTS, Inc.

July 1, 1996

Ms. Marilyn Jahnke
WDNR - Southern District
3911 Fish Hatchery Road
Madison, Wisconsin 53711

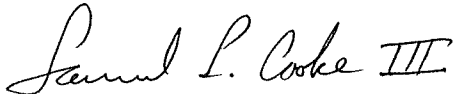
Re: Tank Removal Site Assessment
One Waste Oil Collection Tank (550-gallon UST)
Wisconsin Air National Guard - Truax Field
Support Equipment Shop (Building 401)
3110 Mitchell Street
Madison, Wisconsin

Dear Ms. Jahnke:

The attached tank removal site assessment has been prepared as required by the Wisconsin Department of Natural Resources (WDNR) and the Department of Industry Labor and Human Relations (DILHR). Soil contamination was not detected at the subject site.

Thank you for your consideration and please contact me at (608) 273-9499 with any questions or comments.

Regards,
NINE SPRINGS ENVIRONMENTAL CONSULTANTS, Inc.



Samuel L. Cooke III, P.E.
Principal/Senior Chemical Engineer

cc: Richard Corolewski, Mead & Hunt
Major Keith Geurts, Wisconsin Air National Guard
Ms. Cheryl Peterson, City of Madison Fire Department

Nine Springs Environmental Consultants, Inc.

FIELD OBSERVATION OF TANK REMOVAL

This checklist was copied, with additions and modifications, from the WDNR Tank Removal Checklist. The additions and modifications were made in order that certain items that are required by DILHR, but not by the WDNR, could be included on the same checklist. This checklist is to be used for either underground or aboveground storage tank removal.

A. Site Background Information

Include a narrative describing site background information. Obtain the information through interviews with present and past owners and site inspections. Obtain groundwater information from the United States Geological Survey, the Wisconsin Geologic and Natural History Survey, city water utilities, local health departments, environmental drillers, water well drillers, and published reports. Provide the following information in the narrative:

- _____ 1. Cover letter and report distribution;
See letter prior to this report.
- _____ 2. Tank system owner/operator;
**Wisconsin Air National Guard
3110 Mitchell Street
Madison, Wisconsin 53704**
- _____ 3. Land owner (if different);
Dane County Regional Airport
- _____ 4. Address of tank site;
**Support Equipment Shop (Building 401)
3110 Mitchell Street
Madison, Wisconsin 53704**
- _____ 5. Legal description of site (quarter/quarter, quarter, section, township, and range);
SW¹/₄, NE¹/₄, Section 29, T8N, R10E
- _____ 6. Certified site assessor: name, address, phone number, and certification number;
**Samuel L. Cooke III (Cert. No. 02210)
Nine Springs Environmental Consultants, Inc.
2817 Fish Hatchery Road
Madison, WI 53713
(608) 273-9499**
- _____ 7. Site assessment subcontractors (e.g., drillers): name, address, and phone number;
N/A

- _____ 8. Summary of past and present property use;
The past and present property use is as a vehicle maintenance shop for the Wisconsin Air National Guard - Truax facility.
- _____ 9. Description of tanks removed previously;
Numerous USTs have been removed from the base property but none in the immediate vicinity of the UST were removed for this project.
- _____ 10. Information on past system leaks or repairs;
No leaks have occurred and no repairs have been made to the oil collection UST.
- _____ 11. Results of previous investigation (including geotechnical);
No investigation has been conducted for the waste oil collection UST.
- _____ 12. Other tanks/gas stations/LUST sites on surrounding properties;
There are several LUST sites within the Dane County Regional Airport. Following are some of the sites which are located within 1/2 mile of the Building 401 site: 1) WIANG - F-16 Ramp; 2) WIANG - Motorpool; 3) Coldstream Aviation Corporation; 4) WIANG P.O.L. Facility; and 5) Other facilities known by the WDNR.
- _____ 13. Depth to groundwater and local groundwater use
The typical depth to groundwater at the Dane County Regional Airport varies between 4-7 feet below ground surface (bgs).

B. Tank Activities and Excavation

The site assessment should state the reason why the assessment was done (e.g., the tank removal, relining, closure in place).

- _____ 1. Method(s) of tank closure (e.g., removal, closure in place, DILHR order, and why tank was removed);
The 550-gallon UST was removed.
- _____ 2. Date of removal or abandonment;
The removal date was April 17, 1996.
- _____ 3. DILHR certified remover/cleaner: name, address, phone number, and certification number;
**Mr. Wayne Brattrud (Certification No. 01629)
Ampe Excavating, Inc.
2417 Vondron Road
Madison, WI 53704
(608) 222-7584**

- _____ 4. Subcontractors (e.g., excavators, waste disposal): name, address, and phone number;
Ampe Excavating, Inc.
2417 Vondron Road
Madison, WI 53704
(608) 222-7584
- _____ 5. Description of tanks removed (size, age, substance stored);
550-gallon waste oil collection UST for an oil/water separation system.
- _____ 6. Number of tanks remaining on site;
No USTs remain in the area of the former waste oil UST.
- _____ 7. DILHR representative or third party present at closure and closure assessment (if any);
Ms. Cheryl Peterson (Inspector Certification No. TI-00088)
City of Madison Fire Department
325 West Johnson Street
Madison, WI 53703-2295
(608) 266-4420
- _____ 8. Methods of disposal or treatment of contaminated soil and backfill;
No obviously contaminated materials were present in the excavation.
- _____ 9. Notification of a detected release (during tank closure, change in service or from soil/water sample lab analysis);
Not applicable as there was no apparent release.
- _____ 10. Disposition of the transfer and vent piping (e.g., removed, capped, plugged, etc.).
The vent piping was removed and the steel pipe, which transferred oil from the oil/water separator to the oil collection tank, was capped.

C. Tank Cleaning and Disposal

Provide the method used to clean the tank(s) and the final disposal of the tank(s) including:

- _____ 1. Handling of any cleaning wastewater;
Ampe Excavating did not generate any cleaning wastewater.
- _____ 2. Location where tank was cleaned;
The UST's were cleaned on-site.
- _____ 3. Method of tank transport;
Trailer on Ampe Excavating's truck.
- _____ 4. Documentation of emergency waiver to transport tank (if applicable);
N/A

- _____ 5. Names, addresses, and phone numbers of firms dismantling, transporting, and disposing of tank(s).
According to Ampe Excavating, the cleaned UST will be taken to Samuels Recycling Company for scrapping.

NOTE: Tanks and wastewater are regulated as wastes in Wisconsin, and must be disposed of properly under Wisconsin law. Please refer to Attachment 5.

D. Surplus Product Management

Provide the final disposition of any product remaining in the tank at the time of closure, including:

- _____ 1. Types of liquids;
Water and waste oil mixture (mostly water).
- _____ 2. Quantity of liquids;
25 gallons (with sludge) remained in the UST.
- _____ 3. Final disposition of liquids;
Liquids were scooped out into a DOT 17H 55-gallon barrel which was properly labeled.
- _____ 4. Names, addresses and phone numbers of firms storing, transporting, and/or recycling liquids;
Ampe Excavating does not have a special or hazardous waste license so the liquid was left on-site for the Wisconsin Air National Guard to deal with.
- _____ 5. Waste characterization data.
No waste characterization data was gathered during the UST removal activities because Ampe Excavating's contract was to leave the waste on-site.

NOTE: Surplus product is regulated as a flammable and combustible liquid by DILHR. Please refer to attachment 5.

E. Tank Sludge Management

Provide the final disposition of any wastes remaining in the tank at the time of closure, including:

- _____ 1. Types of sludge;
Tar-like, heavy petroleum sludge in the bottom of the tank.
- _____ 2. Quantity of sludge;
5 gallons (The sludge was mixed with the oil/water mixture and put in the 55-gallon drum left on-site.)
- _____ 3. Waste characterization data;
No waste characterization data was gathered.

- _____ 4. Copies of hazardous waste manifests and EPA generator identification numbers (if manifested);
No manifests were obtained by Ampe Excavating.
- _____ 5. Final disposition of sludge;
As with the liquid, the sludge will be handled by the Wisconsin Air National Guard.
- _____ 6. Names, addresses, and phone numbers of firms storing, transporting, recycling, or disposing of sludge;
Sludge was left on-site.
- _____ 7. Waste characterization data.
N/A

NOTE: Tank sludge is regulated as a waste in Wisconsin. It is either a solid waste or a hazardous waste, and can either be tested to determine if it is hazardous, or simply handled as a hazardous waste. Please refer to attachment 5.

F. Site Location Map

Provide a map showing the location of the site relative to nearby towns, streets or major highways. Sections of USGS topographic maps, highway maps, or plat maps with the site location clearly marked are acceptable as a site location map.

G. Site Layout Plan

The site layout/plot plan should be to scale and provide the locations of tanks, piping, dispensers, utilities, buildings, driveways, and parking areas. Show the locations of field and laboratory sampling points and other relevant data. Label all sampling points with identification numbers (or letters) cross-referenced to laboratory and tank information included in the body of the report. Show the limits and depth of the excavation and an outline of the tank system components within the excavated area. Label each tank removed (e.g., 10,000 gallon unleaded). Number tanks of the same number on the tank inventory form. If the location of the pumps or piping cannot be readily depicted in plan view or if they were removed previously, include an explanatory note on the site plan (e.g., "pump above tank"). The plot should be legible. In checklist form, the site plan should show:

- _____ 1. Tanks;
See attached Figure 3.
- _____ 2. Piping;
See attached Figure 3.
- _____ 3. Dispensers;
N/A

- _____ 4. Remote fill pipes;
See attached Figure 3.
- _____ 5. Utilities;
See attached Figure 3.
- _____ 6. Buildings;
See attached Figures 2 and 3.
- _____ 7. Driveways;
See attached Figures 2 and 3.
- _____ 8. Parking areas;
See attached Figures 2 and 3.
- _____ 9. Property lines (if within map area);
N/A
- _____ 10. Field instrument sampling points numbered in accordance with data tables;
See attached Figure 3.
- _____ 11. Lab analysis sampling points numbered in accordance with data tables;
See attached Figure 3.
- _____ 12. Areal extent of excavation;
See attached Figure 3.
- _____ 13. Map scale (between 1"=10' and 1"=20');
See attached Figure 3.
- _____ 14. North arrow;
See attached Figures 1, 2 and 3.
- _____ 15. Descriptive title;
See attached Figures 1, 2 and 3.
- _____ 16. Name of map-maker.
See attached Figures 1, 2 and 3. Glen Yoerger (Nine Springs) drew Figure 3 from a Mead & Hunt supplied site plan.

H. Visual Inspection

- _____ 1. Weather
Sunny, light wind
- _____ a. Temperature;
48-60°F

_____ b. Precipitation (on day of assessment and previous day);
No precipitation on day of assessment or the previous day.

_____ 2. Site Conditions

_____ a. Surface staining;
There were no surface stains.

_____ b. Stressed or dead vegetation;
There was no stressed or dead vegetation.

_____ c. Previously undiscovered or unregistered tanks;
No unregistered tanks were found.

_____ 3. Excavation

_____ a. Excavation depth;
7.5 feet

_____ b. Free product, if present;
No free product was present.

_____ c. Obvious odors, if present;
No odors were present (other than a light septic smell).

_____ d. Soil discoloration, if present;
Native soil was black (high organic content).

_____ e. Oil sheen on excavation water, if present;
No water appeared in the excavation.

_____ f. Soil type/profile (USCS classification), including backfill;
Backfill: sand, yellow (fill)
Native: black, high organic peaty silt with a grey silty clay

_____ g. Freestanding water, if present;
None was present.

_____ (1) Type (runoff, perched, or groundwater)
None was present.

_____ (2) Depth to water
None was present.

_____ (3) Results of pump-out test (if conducted);
None was present.

_____ 4. Tank System Components

- _____ a. Tank condition;
The UST was in excellent condition. The tank was coated and had cathodic protection (the sacrificial anode was very corroded).
- _____ b. Piping condition;
The pipes looked intact.
- _____ c. Possible leak locations;
No leaks were found.

_____ 5. Confirmation Sample for Obvious Contamination
No obvious contamination was found.

I. Soil Sampling

1. Soil Sample Data Presentation

Provide soil sample results in tabular form and include all of the following data.

- _____ a. Sample ID that clearly correlates to a sample location provided on the site map.

NOTE: Include the sample ID whenever providing information on samples in the report.

- _____ b. Lab result for each sample;
See attached lab report.
- _____ c. Compounds or parameters analyzed for or detected;
See attached lab report.
- _____ d. Units (parts per million or parts per billion);
See attached lab report.
- _____ e. Depth at which sample was taken;
See attached lab report.
- _____ f. Time and date sample was collected;
See attached lab report.
- _____ g. Petroleum product odor if noticed;
No odor was detected.
- _____ h. Soil sample type;
South: Sand (fill)
North: Native (peat)

- _____ i. Relative moisture content of sample.
See attached lab report.

2. Field Screening Results (if applicable)

If field screening was performed, provide the following information. The information may be combined with the soil sample data listed above into one table.

- _____ a. Sample ID that clearly correlated to a sample location provided on the site map.
See S-1 and S-2 on Figure 3.
- _____ b. Peak reading for each sample;
See attached "Soil Sample Headspace Log."
- _____ c. Stable reading for each sample (optional);
N/A
- _____ d. Compounds or parameters analyzed for or detected;
Total volatile organic compounds (as isobutylene).
- _____ e. Units (instrument units as either calibration gas or total organic vapors);
ppm as isobutylene.
- _____ f. Depth at which sample was taken;
S-1 at 6.5 ft below ground surface (bgs) and S-2 at 7.0 ft bgs.
- _____ g. Time and date samples were collected and analyzed;
S-1 at 11:50 a.m. on 4/17/96 and S-2 at 12:15 p.m. on 4/17/96.
- _____ h. Relative moisture content of sample;
Damp to moist.
- _____ i. Petroleum product odor if noticed;
No petroleum odor.
- _____ j. Method of analysis;
Photoionization detector (PID).
- _____ k. Instrument quenching, if applicable;
N/A
- _____ l. Soil sample types.
S-1 was chiefly a sand (fill) and S-2 was from native soil (peat).

3. Lab Reports

Provide the following data from the LUST Standard Data Reporting Form (4400-152) included in attachment 6 in accordance with reference 6. It is not necessary to use the standard form as long as all of the information is provided. For example, standard laboratory reports providing the following and signed by the analyst may be used.

- _____ a. Sample ID;
See attached lab reports.
- _____ b. Internal laboratory ID;
See attached lab reports.
- _____ c. Project name;
See attached lab reports.
- _____ d. Date of sample extraction;
See attached lab reports.
- _____ e. Date of sample analysis;
See attached lab reports.
- _____ f. Flags on data (if applicable);
See attached lab reports.
- _____ g. Wisconsin certified lab number;
See attached lab reports.
- _____ h. Analyst's signature;
See attached lab reports.
- _____ i. Associated quality control data (if applicable);
See attached lab reports.
- _____ j. Copies of chain of custody.
See attached lab reports.

J. Discussion

Include a narrative describing the results of the assessment. The narrative should clearly present the evidence relevant to determining whether a release occurred from the UST system and describe any unusual situations encountered but not covered by this guidance. **In summary, there were no petroleum odors present in the excavation; the UST was in excellent condition (coated with cathodic protection); the soil sample headspace and analytical results showed no signs of petroleum contaminaton being present; and general observations during the UST removal were indicative of a site which is not contaminated with petroleum constituents.**

K. Supporting Documentation and Information

Provide the following information in the body of the report or as appendices or attachments to the report:

- _____ 1. Standard sample collection and sample tool cleaning procedures;
The soil samples were collected using EnCore samplers (stainless steel sampler which does not require handling with a trowel.) A stainless steel trowel was used to collect the % solids sample (trowel was cleaned between uses).
- _____ 2. Copies of lab reports and chain-of-custody forms;
See attached lab reports.
- _____ 3. Field screening documentation in accordance with reference 7;
See attached "Soil Sample Headspace Log."
- _____ 4. Copies of the tank inventory forms (SBD-7437) for each tank closed filled out as completely as possible;
See attached.

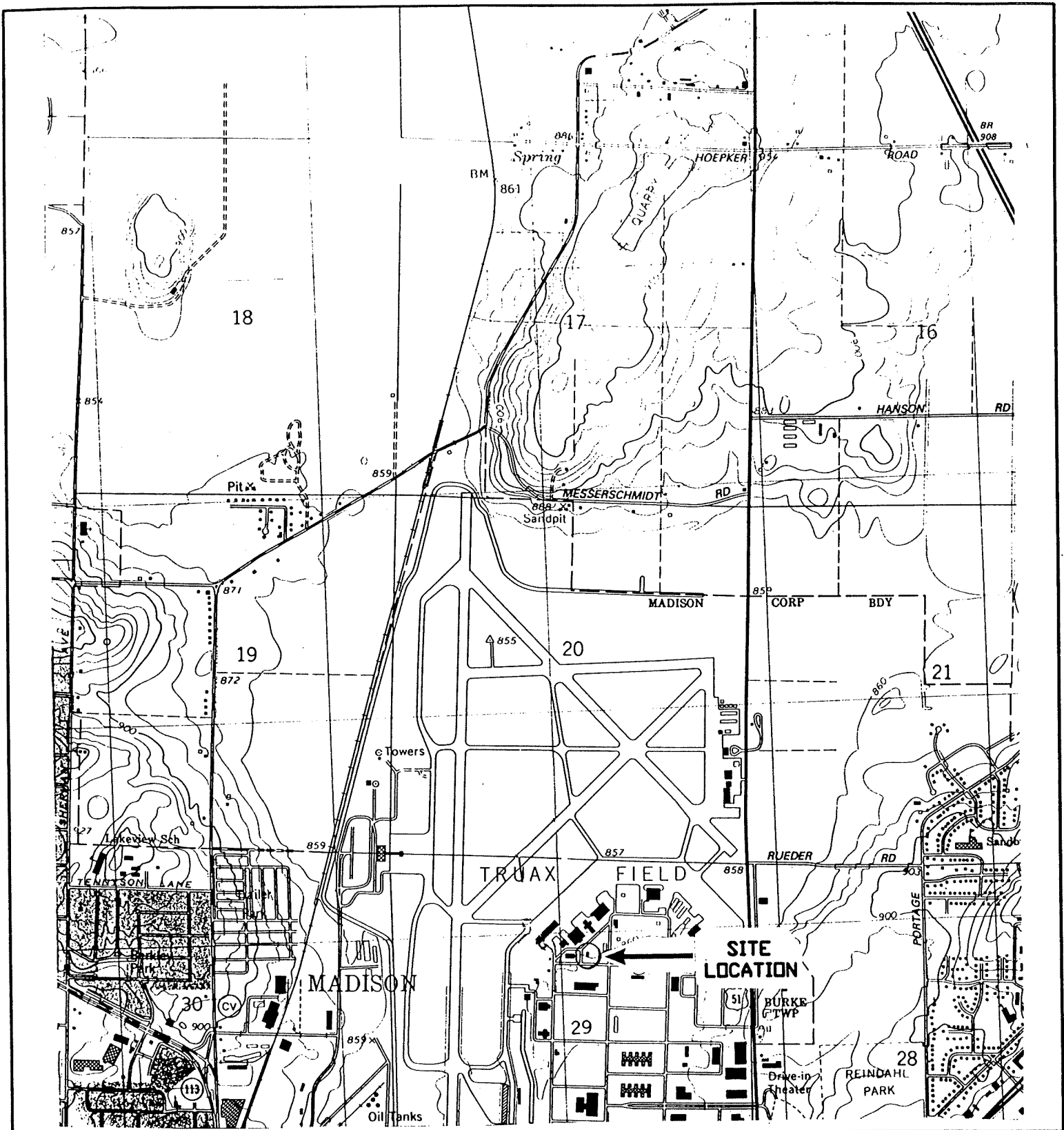
NOTE: The original forms should be submitted to DILHR.

- _____ 5. Additional documentation for surplus product and tank waste management (e.g., manifests, bills of lading, EPA generator identification numbers, receipt for the scrapped tank);
No additional documentation was required.
- _____ 6. Boring logs and abandonment forms (if applicable);
N/A
- _____ 7. Photographs (optional).
See attached.

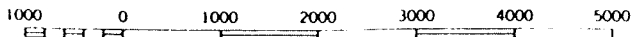
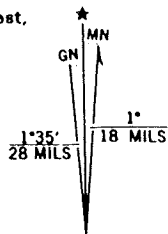
- L. Other Information Requested by DNR or DILHR
No other information was requested or required.

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FIGURES



Base map taken from USGS 7.5 minute quadrangle DeForest, Wisconsin (1983).



WISCONSIN AIR NATIONAL GUARD
TRUAX FIELD - MADISON, WISCONSIN
BUILDING 401

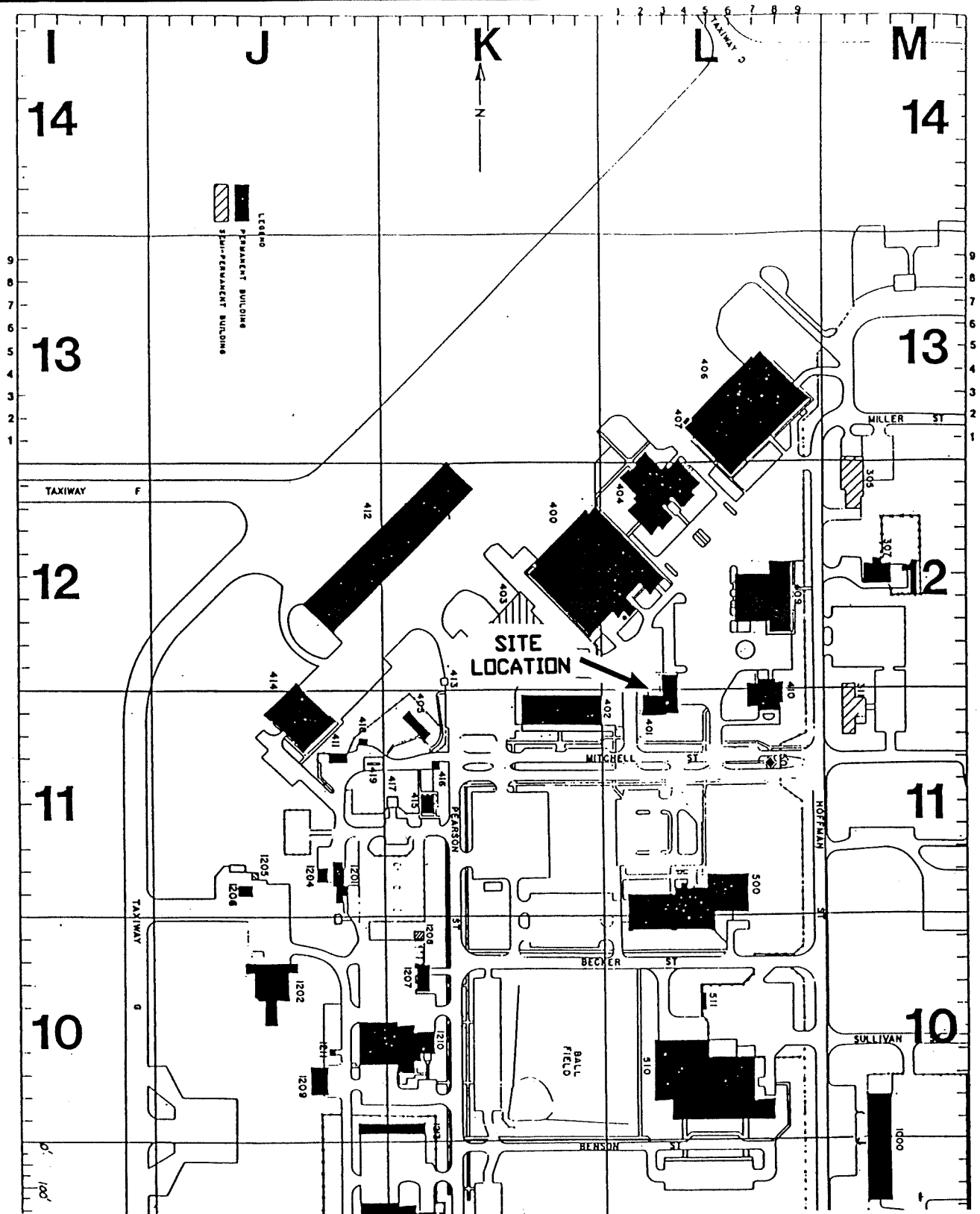
FIGURE 1
SITE LOCATION MAP

PROJECT 1013-005

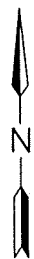
NINE SPRINGS

MAY 1996

ENVIRONMENTAL CONSULTANTS, Inc.



NOTE: Base map taken from WANG Grid Map (July 24, 1985)



WISCONSIN AIR NATIONAL GUARD
TRUAX FIELD - MADISON, WISCONSIN
BUILDING 401

FIGURE 2
DETAILED SITE LOCATION MAP

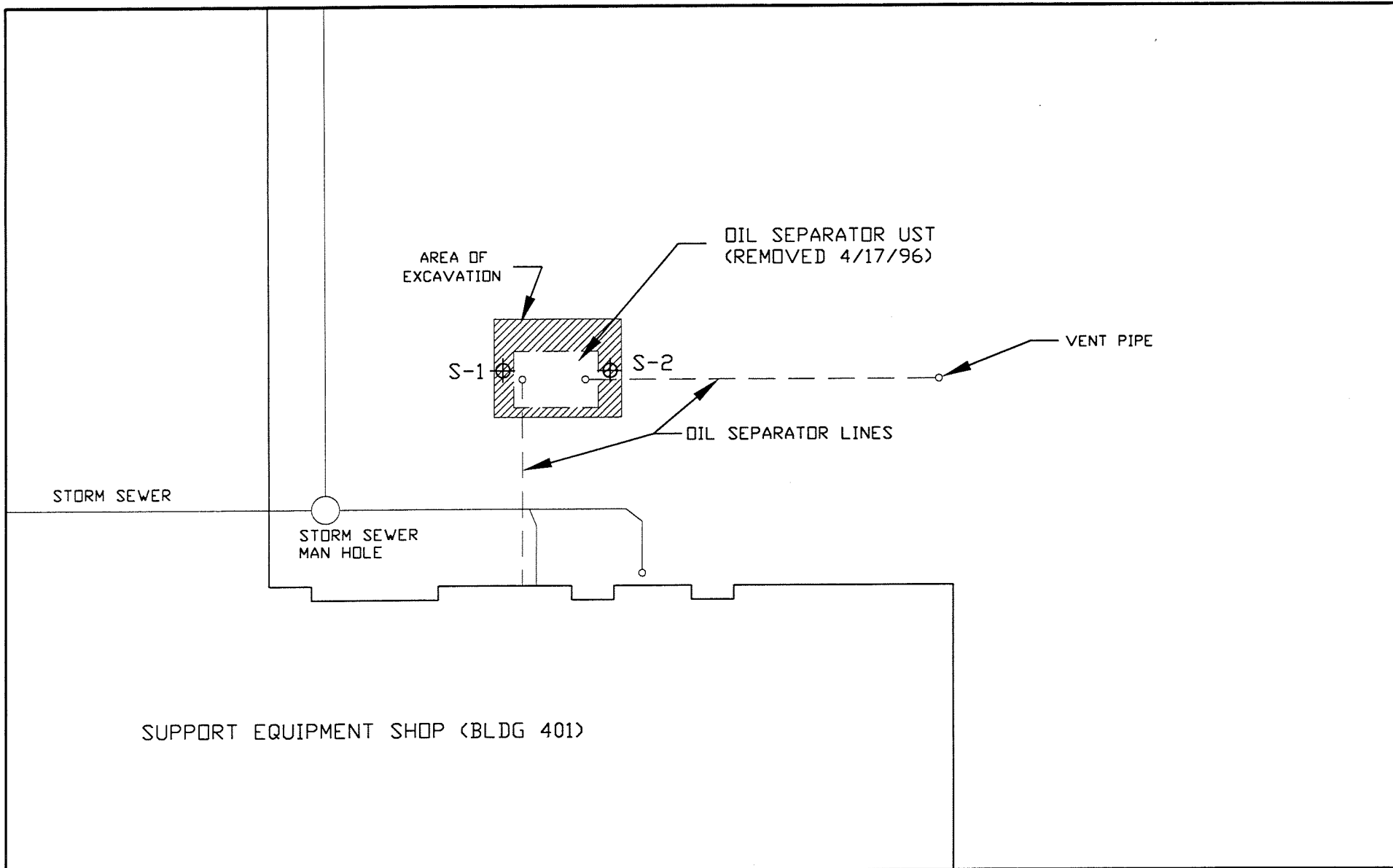
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MAY 1996

DRAWN BY GEY

NINE SPRINGS

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LEGEND

⊕ SOIL SAMPLE LOCATION

NORTH 

SCALE 1" = 10'

WISCONSIN AIR NATIONAL GUARD
SUPPORT EQUIPMENT SHOP (BLDG 401)
MADISON, WISCONSIN

FIGURE 3
SITE LAYOUT MAP

PROJECT 1013-005

MAY 1996

DRAWN BY GEY

NINE SPRINGS
ENVIRONMENTAL CONSULTANTS, Inc.

PHOTOGRAPHS

Photograph Log

- 1) View looking to the north of the waste oil collection UST prior to it being removed from the excavation. Note the vent pipe to the right of the backhoe tire.
- 2) View looking to the northeast of the waste oil collection UST prior to it being removed from the excavation. Note the UST fill line protruding from the southeast corner of the excavation. The fill line originated at the oil/water separator within Building 401.
- 3) View looking southwest of the waste oil collection UST as it is being removed from the excavation. Note the sacrificial anode hanging from the UST on the left-hand side.
- 4) View of the waste oil collection UST bottom and south end. Note the excellent condition of the outer surface.
- 5) View of the cleaned and marked UST prior to it being hauled from the site.

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APPENDIX

ANG ID #401-1
UNDERGROUND
PETROLEUM PRODUCT
TANK INVENTORY

Send Completed Form To:
Safety & Buildings Division
P.O. Box 7969
Madison, WI 53707
Telephone (608) 267-5280

For Office Use Only:

Tank ID # 13010 1560

This form is to be completed pursuant to Section 101.142, Wis. Stats., to register all underground tanks in Wisconsin that have stored or currently store petroleum or regulated substances. Please see the reverse side for additional information on this program. An underground storage tank is defined as any tank with at least 10 percent of its total volume (included piping) located below ground level. A separate form is needed for each tank. Send each completed form to the agency designated in the top right corner.

This registration applies to a tank that is (check one):			Fire Department Providing Fire Coverage Where Tank Is Located Is In:	
1. <input checked="" type="checkbox"/> In Use	4. <input type="checkbox"/> Abandoned - Tank Removed	8. <input type="checkbox"/> Changed Ownership	<input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of	
2. <input type="checkbox"/> Abandoned With Product	6. <input type="checkbox"/> Abandoned - Filled With Inert Material	(Indicate new owner in section A. 4. below)	<input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of	
3. <input type="checkbox"/> Abandoned No Product (empty) or With Water	7. <input type="checkbox"/> Out of Service		ANG Fire Dept.	

A. IDENTIFICATION: (Please Print)

1. Installation Name <u>Truax Field (Air National Guard)</u>			2. Mailing Name if Different Than #1		
Installation Street Address <u>3110 Mitchell Street</u>			Mailing Address if Different Than #1		
<input checked="" type="checkbox"/> City	<input type="checkbox"/> Village	<input type="checkbox"/> Town of:	<input type="checkbox"/> City	<input type="checkbox"/> Village	<input type="checkbox"/> Town of:
State <u>WI</u>		Zip Code <u>53704</u>	County <u>Dane</u>		
3. Name of Contact Person <u>Charles R. Ross, MSgt</u>			4. Owner Name if Different Than #3		
Street Address <u>3110 Mitchell Str. Bldg 1210</u>			Street Address		
<input checked="" type="checkbox"/> City	<input type="checkbox"/> Town	State <u>WI</u>	Zip Code <u>53704</u>	<input type="checkbox"/> City	<input type="checkbox"/> Town
<input type="checkbox"/> Village of: <u>Madison</u>				<input type="checkbox"/> Village of:	
County <u>Dane</u>		Telephone No. (include area code) <u>(608) 241-6271</u>		County	
5. Tank Age (date installed, if known: or years old) <u>1983</u>		6. Tank Capacity (gallons) <u>550</u>		7. Tank Manufacturer's Name (if known) <u>UNKNOWN</u>	

B. TYPE OF USER (check one):

1. <input type="checkbox"/> Gas Station	2. <input type="checkbox"/> Bulk Storage	3. <input type="checkbox"/> Utility	4. <input type="checkbox"/> Mercantile
5. <input type="checkbox"/> Industrial	6. <input checked="" type="checkbox"/> Government	7. <input type="checkbox"/> School	8. <input type="checkbox"/> Residential
9. <input type="checkbox"/> Agricultural	10. <input type="checkbox"/> Other (specify):		

C. TANK CONSTRUCTION:

1. <input type="checkbox"/> Bare Steel	2. <input checked="" type="checkbox"/> Cathodically Protected and Coated Steel (a. <input checked="" type="checkbox"/> Sacrificial Anodes or b. <input type="checkbox"/> Impressed Current)	5. <input type="checkbox"/> Other (specify):
3. <input type="checkbox"/> Coated Steel	4. <input type="checkbox"/> Fiberglass	9. <input type="checkbox"/> Unknown
6. <input type="checkbox"/> Relined	7. <input type="checkbox"/> Steel - Fiberglass Reinforced Plastic Composite	
Approval: 1. <input type="checkbox"/> Nat'l Std. 2. <input type="checkbox"/> UL 3. <input type="checkbox"/> Other:		
Is Tank Double Walled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Spill Containment? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Overfill Protection Provided? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, identify type:		
Tank leak detection method: 1. <input type="checkbox"/> Automatic tank gauging 2. <input type="checkbox"/> Vapor monitoring 3. <input type="checkbox"/> Groundwater monitoring		
4. <input type="checkbox"/> Inventory control and tightness testing 5. <input type="checkbox"/> Interstitial monitoring 6. <input checked="" type="checkbox"/> Not required at present		


D. PIPING CONSTRUCTION

1. <input type="checkbox"/> Bare Steel	2. <input type="checkbox"/> Cathodically Protected and Coated or Wrapped Steel (a. <input type="checkbox"/> Sacrificial Anodes or b. <input type="checkbox"/> Impressed Current)	3. <input checked="" type="checkbox"/> Coated Steel
4. <input type="checkbox"/> Fiberglass	5. <input type="checkbox"/> Other (specify):	9. <input type="checkbox"/> Unknown
Piping System Type: 1. <input type="checkbox"/> Pressurized piping with: a. <input type="checkbox"/> auto shutoff; b. <input type="checkbox"/> alarm; or c. <input type="checkbox"/> flow restrictor 2. <input type="checkbox"/> Suction piping with check valve at tank		
3. <input type="checkbox"/> Suction piping with check valve at pump and inspectable <u>Drain Pipe from Oil/Water Separator</u>		
Piping leak detection method: used if pressurized or check valve at tank: 1. <input type="checkbox"/> Vapor monitoring 2. <input type="checkbox"/> Interstitial monitoring		
3. <input type="checkbox"/> Groundwater monitoring 4. <input type="checkbox"/> Tightness testing 5. <input type="checkbox"/> Line Leak Detector 6. <input checked="" type="checkbox"/> Not Required		
Approval: 1. <input type="checkbox"/> Nat'l Std 2. <input type="checkbox"/> UL 3. <input type="checkbox"/> Other:		Double Walled: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

E. TANK CONTENTS

1. <input type="checkbox"/> Diesel	2. <input type="checkbox"/> Leaded	3. <input type="checkbox"/> Unleaded	4. <input type="checkbox"/> Fuel Oil
5. <input type="checkbox"/> Gasohol	6. <input type="checkbox"/> Other	7. <input type="checkbox"/> Empty	8. <input type="checkbox"/> Sand/Gravel/Slurry
9. <input type="checkbox"/> Unknown	10. <input type="checkbox"/> Premix	11. <input checked="" type="checkbox"/> Waste Oil	12. <input type="checkbox"/> Propane
13. <input type="checkbox"/> Chemical *		14. <input type="checkbox"/> Kerosene	15. <input type="checkbox"/> Aviation

* If # 13 is checked, indicate the chemical name(s) or number(s) of the chemical or waste.

If Tank Abandoned, Give Date (mo/day/yr):	Has a site assessment been completed? (see reverse side for details) <input type="checkbox"/> Yes <input type="checkbox"/> No	
If installation of a new tank is being reported, indicate who performed the installation inspection:		
1. <input type="checkbox"/> Fire Department	2. <input type="checkbox"/> DILHR	3. <input type="checkbox"/> Other (identify)
Signature of Person Completing Report: 		Date Signed: <u>14 Nov 90</u>

**UNDERGROUND
PETROLEUM PRODUCT
TANK INVENTORY**

Send Completed Form To:
Safety & Buildings Division
P.O. Box 7969
Madison, WI 53707
Telephone (608) 267-5280

Information Required By Sec. 101.142, Wis. Stats.

For Office Use Only:
Tank ID #

Underground tanks in Wisconsin that have stored or currently store petroleum or regulated substances must be registered. Please see the reverse side for additional information on this program. An underground storage tank is defined as any tank with at least 10 percent of its total volume (included piping) located below ground level. A separate form is needed for each tank. Send each completed form to the agency designated in the top right corner. Have you previously registered this tank by submitting a form? YES NO If yes, are you correcting/updating information only? Yes No

This registration applies to a tank that is (check one):			Fire Department Providing Fire Coverage Where Tank Located:	
1A. <input type="checkbox"/> In Use or 1B. <input type="checkbox"/> Newly Installed	4. <input checked="" type="checkbox"/> Closed - Tank Removed	8. <input type="checkbox"/> Changed Ownership	Dane County Regional Airport Fire Department	
2. <input type="checkbox"/> Abandoned With Product	6. <input type="checkbox"/> Closed - Filled With Inert Material	(Indicate new owner below)		
3. <input type="checkbox"/> Abandoned No Product (empty) or With Water	7. <input type="checkbox"/> Out of Service - Provide Date: _____			

A. IDENTIFICATION: (Please Print)

1. Tank Site Name Wisconsin Air National Guard-Bldg 401	Site Address 3110 Mitchell Street	Site Telephone No. (608) 245-4342
<input checked="" type="checkbox"/> City Madison <input type="checkbox"/> Village <input type="checkbox"/> Town of:	State WI	Zip Code 53704
2. Owner Name (mail sent here unless indicated otherwise in #3 below) Wisconsin Air Nat'l Guard-Base Civil Engineering	Owner Mailing Address (mail sent here unless indicated otherwise in #3) 3110 Mitchell Street	
<input checked="" type="checkbox"/> City Madison <input type="checkbox"/> Village <input type="checkbox"/> Town of:	State WI	Zip Code 53704
3. Alternate Mailing Name If Different Than #2 (same as No. 2)	Alternate Mailing Street Address If Different From #2	
<input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of:	State	Zip Code
4. Tank Age (date installed, if known: or years old) 1983	5. Tank Capacity (gallons) 550	6. Tank Manufacturer's Name (if known) UNKNOWN

B. TYPE OF USER (check one):

1. <input type="checkbox"/> Gas Station	2. <input type="checkbox"/> Bulk Storage	3. <input type="checkbox"/> Utility	4. <input type="checkbox"/> Mercantile
5. <input type="checkbox"/> Industrial	6. <input checked="" type="checkbox"/> Government	7. <input type="checkbox"/> School	8. <input type="checkbox"/> Residential
9. <input type="checkbox"/> Agricultural	10. <input type="checkbox"/> Other (specify): _____		

C. TANK CONSTRUCTION:

1. <input type="checkbox"/> Bare Steel	2. <input checked="" type="checkbox"/> Cathodically Protected and Coated Steel (A. <input checked="" type="checkbox"/> Sacrificial Anodes or B. <input type="checkbox"/> Impressed Current)	3. <input type="checkbox"/> Coated Steel
4. <input type="checkbox"/> Fiberglass	5. <input type="checkbox"/> Other (specify): _____	6. <input type="checkbox"/> Relined - Date _____
7. <input type="checkbox"/> Steel - Fiberglass Reinforced Plastic Composite	8. <input type="checkbox"/> Unknown	

Approval: 1. <input type="checkbox"/> Nat'l Std. 2. <input checked="" type="checkbox"/> UL 3. <input type="checkbox"/> Other:	Is Tank Double Walled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Overfill Protection Provided? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, identify type:	Spill Containment? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Tank leak detection method: 1. Automatic tank gauging 2. Vapor monitoring 3. Groundwater monitoring 4. Inventory control and tightness testing 5. Interstitial monitoring 6. Not required at present 7. Manual Tank Gauging (only for tanks of 1,000 gallons or less)

D. PIPING CONSTRUCTION

1. <input type="checkbox"/> Bare Steel	2. <input checked="" type="checkbox"/> Cathodically Protected and Coated or Wrapped Steel (A. <input type="checkbox"/> Sacrificial Anodes or B. <input type="checkbox"/> Impressed Current)	3. <input type="checkbox"/> Coated Steel
4. <input type="checkbox"/> Fiberglass	5. <input type="checkbox"/> Other (specify): _____	6. <input type="checkbox"/> Unknown

Piping System Type: 1. Pressurized piping with: A. auto shutoff; B. alarm; or C. flow restrictor 2. Suction piping with check valve at tank 3. Suction piping with check valve at pump and inspectable Gravity Flow

Piping leak detection method: used if pressurized or check valve at tank: 1. Vapor monitoring 2. Interstitial monitoring 3. Groundwater monitoring 4. Tightness testing 5. Line Leak Detector 6. Not Required

Approval: 1. <input type="checkbox"/> Nat'l Std 2. <input type="checkbox"/> UL 3. <input type="checkbox"/> Other:	Double Walled: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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E. TANK CONTENTS

1. <input type="checkbox"/> Diesel	2. <input type="checkbox"/> Leaded	3. <input type="checkbox"/> Unleaded	4. <input type="checkbox"/> Fuel Oil
5. <input type="checkbox"/> Gasohol	6. <input type="checkbox"/> Other	7. <input type="checkbox"/> Empty	8. <input type="checkbox"/> Sand/Gravel/Slurry
9. <input type="checkbox"/> Unknown	10. <input type="checkbox"/> Premix	11. <input checked="" type="checkbox"/> Waste Oil	12. <input type="checkbox"/> Propane
13. <input type="checkbox"/> Chemical *	14. <input type="checkbox"/> Kerosene	15. <input type="checkbox"/> Aviation	

* If # 13 is checked, indicate the chemical name(s) or number(s) of the chemical or waste.

If Tank Closed, Give Date (mo/day/yr): 04/17/96	Has a site assessment been completed? (see reverse side for details) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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If installation of a new tank is being reported, indicate who performed the installation inspection:

1. <input type="checkbox"/> Fire Department	2. <input type="checkbox"/> DILHR	3. <input type="checkbox"/> Other (identify) _____
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Name of Owner or Operator (please print): Keith W. Geurts	Indicate Whether: <input checked="" type="checkbox"/> Owner or <input type="checkbox"/> Operator
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Signature of Owner or Operator: <i>Keith W. Geurts</i>	Date Signed: 1 May 1996
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Soil Sample Headspace Log

Client Name Mead & Hunt (for WI Air National Guard)
Project Location 3142 Mitchell Street, Madison, WI 53703
Field Crew S. Cooke
Scope of Work (Summary) Site Assessment for a UST removal. Waste Oil collection tank from an oil/water separator

Project No. 1013-005
Date 4/17/96

Sample I.D.	Sample Moisture*	Headspace Result**	Comments (e.g. odor)
S-1	moist to damp	4.2	No odor other than slight organic/septic odor
S-2	moist to damp	5.3	No odor other than slight organic/septic odor

* Sample moisture: saturated, wet, moist, damp, dry
** Headspace results are provided in instrument units as isobutylene (calib. gas)
Required Information:
Ambient Outside Temp 48-60 °F, Equilibration Temp 70 °F, Cloud Cover yes no, Humidity 30% RH,
Wind from the NSE (W), Wind Speed light mph, Precipitation None
Instrument Make & Model Photo vac, Date of last factory calibration N/A
Field Calibration Gas Isobutylene, Date & Time of Field Calibration 4/17/96 11:00am
Lamp Energy 10.6 eV, Instrument Gain Setting N/A, Comments (erratic readings, cleaning/repairs, etc.) Instrument working well



EN CHEM
INC.

...chemistry for the environment

1795 Industrial Drive
Green Bay, WI 54302
414-469-2436
800-7-ENCHEM
FAX: 414-469-8827

Lab Certification No. 405132750
Location : WANG-OIL UST REMOVAL/#1013-005
En Chem Proj# : 9604380
Date Reported : 04/23/1996

Report to: NINE SPRINGS ENVIRONMENTAL CONSULT., INC

Thank you for using En Chem! Samples were analyzed according to strict EPA or Wisconsin DNR methodology. Any comments or problems associated with the receipt of or analysis are reported below:

Sample no. 178054: DRO sample weight was 15.2 grams.



1795 Industrial Drive
Green Bay, WI 54302
414-469-2436
800-7-ENCHEM
FAX: 414-469-8827

Lab Certification No. 405132750
Location : WANG-OIL UST REMOVAL/#1013-005
Your Sample ID: S-1
Sample Desc. : SOUTH UST (6.5FT)
Sample Matrix : SOIL Date Collected: 04/17/1996
En Chem Proj# : 9604380 Date Received : 04/19/1996
En Chem Lab # : 178053 Date Reported : 04/23/1996

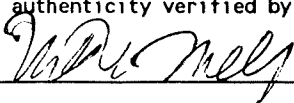
Report to: NINE SPRINGS ENVIRONMENTAL CONSULT., INC
5335 EAST LACY ROAD
MADISON, WI 53711

Bill to: NINE SPRINGS ENVIRONMENTAL CONSULT., INC

Analysis	Parameter	Result	Units	Detection Limit	Prep Method	Prep Date	Analysis Method	Analysis Date	Analysis Analyzed By
TOTSOLID	Total Solids	47	percent				SM2540G	04/22/1996	PHS
DRO-S	Diesel Range Organics(DRO)-Soil	ND	mg/kg	8.3		04/22/1996	WDNR MOD DRO	04/22/1996	PHS
	Soil spike	84 %	RECOV	50					
	Soil spike duplicate	87 %	RECOV	50					

"ND" Indicates no detectable analyte at or above the listed detection limit. All results reported on a dry weight basis. All subcontracted analyses are performed by Wisconsin DNR certified laboratories.

These results have been reviewed and their authenticity verified by:





EN CHEM INC.

...chemistry for the environment

1795 Industrial Drive
Green Bay, WI 54302
414-469-2436
800-7-ENCHEM
FAX: 414-469-8827

Lab Certification No. 405132750
Location : WANG-OIL UST REMOVAL/#1013-005
Your Sample ID: S-2
Sample Desc. : NORTH UST (7.0FT)
Sample Matrix : SOIL Date Collected: 04/17/1996
En Chem Proj# : 9604380 Date Received : 04/19/1996
En Chem Lab # : 178054 Date Reported : 04/23/1996

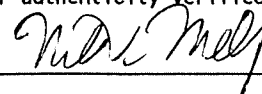
Report to: NINE SPRINGS ENVIRONMENTAL CONSULT., INC
5335 EAST LACY ROAD
MADISON, WI 53711

Bill to: NINE SPRINGS ENVIRONMENTAL CONSULT., INC

Analysis	Parameter	Result	Units	Detection Limit	Prep Method	Prep Date	Analysis Method	Analysis Date	Analyzed By
TOTSOLID	Total Solids	88	percent				SM2540G	04/22/1996	PHS
DRO-S	Diesel Range Organics(DRO)-Soil	ND	mg/kg	7.5		04/22/1996	WDNR MOD DRO	04/22/1996	PHS
	Soil spike	84	% RECOV	50					
	Soil spike duplicate	87	% RECOV	50					

"ND" Indicates no detectable analyte at or above the listed detection limit. All results reported on a dry weight basis. All subcontracted analyses are performed by Wisconsin DNR certified laboratories.

These results have been reviewed and their authenticity verified by:





Company Name: *Nine Springs Environmental Consultants Inc.*



Branch or Location: *Madison, WI*

Project Contact: *Sam Cooke*

Telephone: *(608) 273-9499*

Project Number: *1013-005*

Project Name: *WANG - Oil UST Removal (550gal)*

Project Location: *Texas Field - Madison, WI*

Sampled By (Print): *Sam Cooke*

Regulatory Program (circle): UST RCRA CLP SDWA

1241 Bellevue St., Suite 9
Green Bay, WI 54302
414-469-2436 • 1-800-736-2436
FAX 414-469-8827

2231 Catlin Ave., Suite 420
Superior, WI 54880
715-392-5844 • 1-800-837-8238
FAX 715-392-5843

CHAIN OF CUSTODY

Patricia J. ...

NR720 Confirmation Analysis Required? *Yes*

(En Chem will confirm unless otherwise instructed.)

Mail Report To: *Sam Cooke*

Company: *Nine Springs Env'l Consultants*

Address: *2817 Fish Hatchery Rd.
Madison, WI 53713*

Invoice To: *Sam Cooke*

Company: *Nine Springs Env'l Consultants*

Address: *2817 Fish Hatchery Rd.
Madison, WI 53713*

P.O. No.: *1013-005A* Quote No.:

Field ID	Sample Description	Collection		Field Screen	Matrix	Filt'd Y/N	Preserv*	Analysis Requested	SHADED AREA FOR LABORATORY USE ONLY			
		Date	Time						Good Cond.	Total Bottles	Comments	Laboratory Number
S-1	South UST (6.5ft)	4/17/96	11 ⁵⁰	7.5	Soil	N/A	Cold	DRO, No solids	X	1-502 1-encore	3090	178053
S-2	North UST (7.0ft)	4/17/96	12 ¹⁵	24.1	Soil	N/A	Cold	DRO, No solids	↓	↓	2663	178054

***Preservation Code**
 A=None B=HCL C=H2SO4
 D=HN03 E=EnCore F=Methanol**
 G=NaOH O=Other (Indicate)

Relinquished By: *Sam Cooke* Date/Time: *4/19/96 1015* Received By: *Steve ...* En Chem Project No. *9604380*

Relinquished By: *Phil Hoop* Date/Time: *4/19/96 1115* Received By: *Phil Hoop* Sample Receipt Temp. *(Must be rec'd at 4°C)*

Relinquished By: *Phil Hoop* Date/Time: *4-19-96 1450* Received By (En Chem): *Phil Hoop 4-19-96 1450* *onice*

**If not using En Chem's methanol, indicate volume of methanol added and mark the appropriate samples.