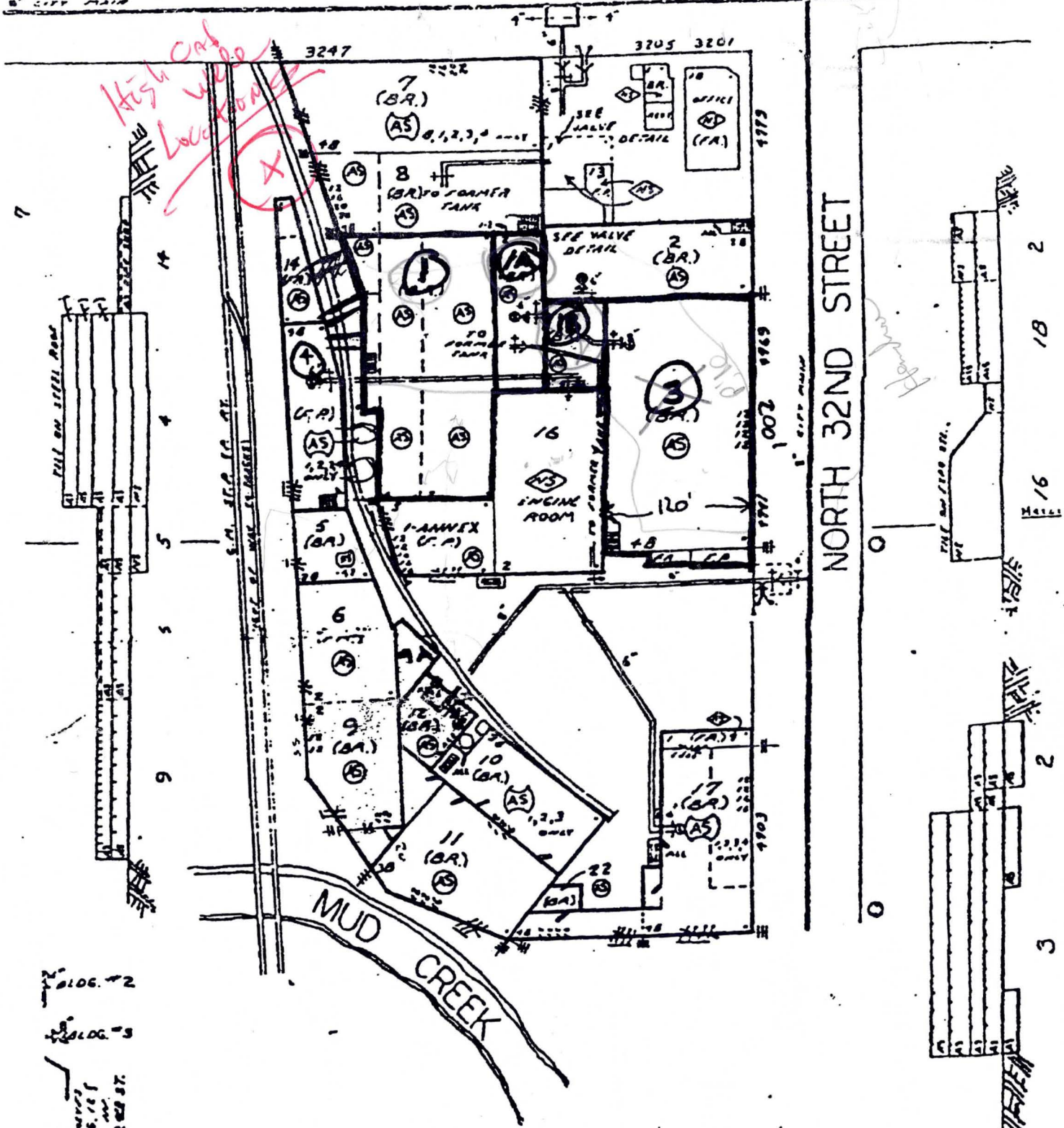


WEST HAMPTON AVE.

NORTH 32ND STREET



Handwritten in red:
 High Cap
 Lock
 (with a red 'X' mark)

Handwritten notes:
 BLDG #2
 BLDG #3
 TO WALKWAY
 ON BLDG #1
 C. W. P. H. ST.
 W. 32ND ST.

Handwritten on yellow background:
 High Cap Well #1
 AL-10-6

NE, NE, NW, NW, NE sec 1, T1N, R21 E Ref. WGS 109

ML-10-G Use as original

TO THE WISCONSIN STATE BOARD OF HEALTH,
WELL DRILLING DIVISION, MADISON, WIS.

WELL LOG PREMISES DIAGRAM, and REPORT

For Official Record of the Board

(TO BE USED FOR THAT PURPOSE ONLY)

Owner Gisenebaum Tanning Co Driller Layne Northwest Co.
 (If a joint ownership give name of responsible official. Also name of each individual holding an interest. Use a separate sheet and attach hereto)
 Address Milwaukee, Wisc. Address 409 N. 11th St. Milwaukee, Wisc.
 Date of Report Dec. 22, 1937 Registration No

Give below the location of the property on which well is drilled

If incorporated village or city Name Lot Blk Street and No

If unincorporated hamlet Name County Twp Highway

If Lake Shore Plat Name of Plat Lake Lot Blk Street

If Subdivision Name County Twp Sec Lot Blk

If Farm County Twp Sec Highway

If School County Twp Sec District

If other public building Xhd County Twp Sec

WELL LOG and REPORT

Kind of casing and liner in feet Kind of shoe indicate grout, screen, seal, etc	WELL DIAGRAM Vertical Lines = in Dia Horizontal Lines = ft Depth Use a red line to show casing	Give depth of formations in feet State if dry or water bearing	Record of FINAL Pumping Test
62 1/2' of Steel Drive Pipe with Forged Steel Drive Shoes Attached	0 2 4 6 8 10 12 14 16 18 20	Drift	Duration of test Hours <u>12</u>
	25 75	16" sd	Pumping Rate G P M <u>400</u>
	30 60	60'	Depth of pump in well Ft <u>185</u>
	75 75	Limestone	Standing water-level (from surface) Ft -----
	100 105	105	Water level when pumping Ft -----
	120 150	123 Linc & Shale	Water End of test Check Clear <input checked="" type="checkbox"/> Cloudy -----
	150 150	Limestone	Turbid -----
	200 200		Was well sterilized before test? Yes <input checked="" type="checkbox"/> No -----
	200 200		Date -----
	200 200		To which Laboratory was sample sent? -----
	200 200		Date -----
	200 200		Was the well sealed on completion? Yes <input checked="" type="checkbox"/> No -----
130' of Steel Liner	200 200	388 Linc & Shale	How high did you leave casing above grade? <u>6"</u>
	200 200	450 shale	Well was completed <u>June 7, 1937</u>
	200 200	578 Limestone	Well Driller <u>Layne - McQuinn</u>
	200 200	825 Sandstone	Signature <u>[Signature]</u>
	200 200		(Be sure to complete the report on the reverse side)
	200 200		back is blank

F 10 341 035-770
High Cap well
Lab results +
Ab Andomment



WGNHS ORIGINAL

GREENEBAUM TANNING CO. WELL, MILWAUKEE, WIS.
337 West St.

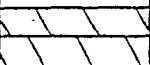
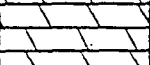
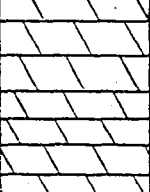
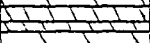


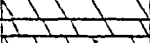
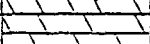

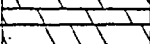
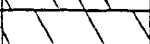
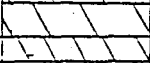

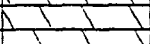
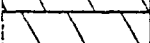
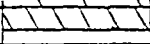





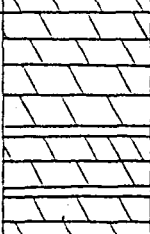
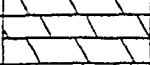
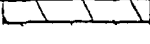
Layne-Northwest Co., Contractors, 1937

Samples examined by F. T. Thwaites, Nos. 99062-99319

See also Nos. 96463-96554

Loc: NE $\frac{1}{4}$, NE $\frac{1}{4}$, NW $\frac{1}{4}$, NW $\frac{1}{4}$, NE $\frac{1}{4}$, Sec. 1, T.7N., R.21E.




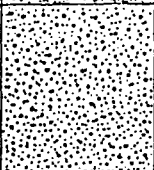
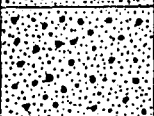
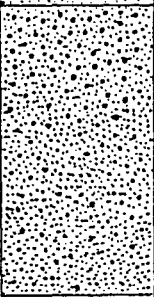

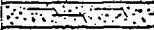

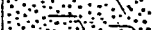













Alt. = 65 C'

D R I F T	0-60	60		Drift, no samples		16" pipe
	60					62.5
N I A G A R A	60-80	20		Dolomite, no samples (Racine)		
	80-105	25		Dolomite, light gray		
	105-123	18		Dolomite, light gray; log: "lime and shale"		
	123-210	87		Dolomite, light gray		15" hole
	210-220	10		Dolomite, light gray; chert, white		
	220-265	45		Dolomite, light gray		
	265-275	10		Dolomite, light gray; chert, white (Waukesha)		
	275-285	10		Dolomite, light gray		
	285-300	15		Dolomite, light gray; chert, white		
	300-315	15		Dolomite, light gray (Byron)		
	315-325	10		Dolomite, light gray, some white chert		
	325-340	15		Dolomite, pink and light gray		
	340-380	40		Dolomite, light gray; chert, white (Mayville)		
328	320-388	8		Dolomite, light gray		
R I C H M O N D	388-410	22		Dolomite, gray		
	410-420	10		Dolomite, light gray, blue specks		
	420-445	25		Dolomite, light brown-gray		
	445-460	15		Dolomite, blue-gray, black specks (n.s. 455-60)		454
	460-515	55		Shale, blue-gray, dolomitic		12" liner
	515-525	10		Dolomite, light gray; shale like above		
	525-578	53		Shale, blue-gray, dolomitic		
	188					
G A L E N A - P L A T T	578-615	37		Dolomite, light brown-gray		584
	615-710	95		Dolomite, light gray; no samples 660-665, 685-690		
	710-730	20		Dolomite, light gray to blue-gray		12" hole
	730-780	50		Dolomite, light gray, some blue-gray		

open

open

Greenebaum Tanning Co., Milwaukee, p 2 (second set of samples)

248	780-790	10		Dolomite, light gray, blue-gray, blue specks
	790-800	10		Dolomite, light gray
	800-826	26		Sandstone, medium to fine, gray, very dolomitic
249	826-895	69		Sandstone, medium to fine, light gray
	895-940	45		Sandstone, coarse to fine, light gray
	940-1075	135		Sandstone, medium to fine, white; no sample 1060-1065
105	1075-1080	5		Sandstone, fine to medium, lt. gy, dol.
	1080-1085	5		shale, red, dolomitic
	1085-1095	10		Sandstone, fine to medium, lt. gy, dolomitic
	1095-1100	5		Sandstone, medium to fine, light gray, dol.
	1100-1135	35		Sandstone, medium, white, some pink, dolomitic
	1135-1150	15		Sandstone, fine to coarse, white
	1150-1180	30		Sandstone, fine to coarse, white, pink dolomitic layers
	1180-1200	20		Sandstone, fine to medium, white
223	1200-1225	25		Sandstone, coarse to medium, white
	1225-1230	5		Sandstone, medium, gray, dolomitic
	1230-1265	35		Sandstone, fine to coarse, white
	1265-1275	10		Sandstone, fine to medium, light gray
	1275-1310	35		Sandstone, fine to medium, light gray, slightly dolomitic
	1310-1350	40		Sandstone, medium to fine, white, light gray
	1350-1355	5		Sandstone, medium to fine, lt. gy, dolomitic
	1355-1390	35		Sandstone, medium to fine, light gray
223	1390-1403	13		Sandstone like above; log "hard pink sandstone"


0800
#510

Formations: Drift; Niagara; Richmond (Maquoketa); Galena-Platteville (includes Decorah, Galena-Black River); St. Peter (may include Dresbach); Eau Claire; Mt. Simon

CORRESPONDENCE/MEMORANDUM

DATE: May 20, 2002

FILE REF: Kaiser Property

TO: Sharon Gayan, Water
Washington Methu, WaterFROM: J. Hnat, R&R 

SUBJECT: Kaiser Property High Capacity Wells

FID: 341055770

FYI:

If and when the two high capacity wells are sampled, the R&R program requests water sampling for the following:

PVOCs
VOCs
PAHs
Metals
PCBs

The reason for this is the well that is currently exposed contains debris to what depth is unknown, the well is an open hole and we don't know if anything has contaminated, or what could have contaminated the potable well.

Also, water analyzed for DRO and GRO would just indicate something is there. We would still need the PVOCs for GRO and PAHs for DRO.

Thank you.



State of Wisconsin \ DEPARTMENT OF NATURAL RESOURCES

Scott McCallum, Governor
Darrell Bazzell, Secretary

101 S. Webster St.
Box 7921
Madison, Wisconsin 53707-7921
Telephone 608-266-2621
FAX 608-267-3579
TTY 608-267-6897

January 3, 2002

File:3300/Milwaukee/Hampton Avenue/PVT

Edward L. Kaiser
Kaiser Buildings
3201 N. Hampton Avenue
Milwaukee, WI 53209

WELL ABANDONMENT NOTICE

SUBJECT: High capacity wells located at 3201 N. Hampton Avenue, Milwaukee.

Dear Mr. Kaiser:

Thank you for your cooperation on matters pertaining to two high capacity wells located at the above-mentioned property that you own. Wisconsin Administrative Code s. NR 812.26(2)4 requires the proper abandonment of all wells taken out of service or have not been used for 3 or more years and are not needed in the immediate future as a source of water.

On September 17, 2001 the City of Milwaukee issued an order for the abandonment of these wells. Prior to well abandonment a building (#14) housing one of the wells was razed.

On September 21, 2001 during an inspection visit to your property a feature previously suspected to be one of the wells was identified. The feature was a subsurface pump room pit that was submerged in standing water and had a visible discharge line protruding and debris from the demolition filled the pit.

You made a verbal request at that time for the Department to allow temporary abandonment of this well when found and or identified. It was communicated to you that approval for temporary abandonment of any of these wells was conditional on:

1. Both of the wells being located and identified.
2. Their sanitary condition evaluated.
3. Need for future use of these wells assessed.

The City of Milwaukee-Plumbing inspection was contacted about the improper demolition, and debris from pit required to be removed by the contractor. Not until then was the actual location of the well determined and the well identified. [The 2nd well has not been located yet and must be properly abandoned when identified. Approved guidelines for this well must be obtained from this Department prior to permanent abandonment].

On November 20, 2001 I inspected the well and found it to be in noncompliance with Wisconsin Administrative Code s. NR 812.26 on the following account:

1. The well had no seal on the top.

(Edward Kaiser Property, High Capacity Well Abandonment Notice January 3, 2002)

2. The well has debris in the lower 10 feet (approximate).

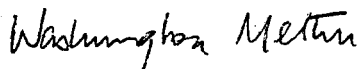
Due to the present unsanitary condition of this well the Department will not approve temporary abandonment of this well and requires that it be properly abandoned.

The following are the guidelines for proper abandonment of this well:

1. All debris and obstacles inside the well must be first removed.
2. The well must be filled in with chlorinated sand-free pea gravel from the 1403-foot depth to the 604-foot depth sounding at 50-foot intervals.
3. Neat cement must be used to fill the well from the 604-foot depth to the surface.

Please complete proper abandonment of this well within 180 days of this notice. If you have any additional questions I can be reached at (414)-263-8695 in Milwaukee.

Sincerely



Washington Methu
Drinking Water & Groundwater Specialist

C: Private DG/2
City of Milwaukee-Plumbing Inspection
File

Inspected By (Name) <i>Washington Methen</i>	Date of Inspection <i>11/20/2001</i>	WUWN -----	Facility ID Number -----	Region <i>SER</i>
Facility Name <i>(PRV)TN NN</i>		Population Served		
Sampler Name		Owner Name <i>Edward L. Kanser</i>		
Mailing Address		Mailing Address <i>Kanser Building 3201 N. Hampton Ave</i>		
City, State, Zip Code		City, State, Zip Code <i>Milwaukee WI 53209</i>		
Telephone Number		Telephone Number <i>(414) - 444 - 2400</i>		
NW 1/4 NE 1/4, Section <u>1</u> , Town <u>7</u> N, Range <u>21</u> W <input checked="" type="checkbox"/> E <input type="checkbox"/>		Civil Town <i>Milwaukee</i>		County <i>Milwaukee</i>

WELL DATA

<input checked="" type="checkbox"/> Drilled	<input type="checkbox"/> Driven	<input type="checkbox"/> Dug	<input type="checkbox"/> Other _____	Casing Diameter <i>16"</i>	Casing Height	Casing Depth
Date Well Constructed	Constructed By		Total Well Depth <i>1403</i>	Depth to Water	Depth to Bedrock	

PUMP/SUPPLY LINE DATA

Pump Type <i>None</i>	Well Discharge Piping <i>None</i>
<input type="checkbox"/> Submersible	Above Ground <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Pressurized <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>
<input type="checkbox"/> Double Pipe Deep Well	Pitless Adapter <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> Concentric <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>
<input type="checkbox"/> Offset <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>	
<input type="checkbox"/> Single Pipe Packer	
<input type="checkbox"/> Other _____	
Pump Installer <i>N/A</i>	Water Treatment Type <i>None</i>
Install Date	Pressure Tank Type <i>None</i>

WELL AND PUMP CODE VIOLATIONS NEEDING CORRECTION (✓ if Noncomplying)

<p>SEAL/CAP</p> <input checked="" type="checkbox"/> Noncomplying Seal or Cap TYPE <i>None</i>	<p>CASING/WELL</p> <input type="checkbox"/> Height Too Low (< 12 inches above grade) (< 8 inches for pre-1991)
<input type="checkbox"/> Electrical Wires Not Enclosed in Conduit	<input type="checkbox"/> Poor Condition (Corroded, Cracked)
PUMP/SUPPLY LINE	<input type="checkbox"/> Location Subject to Flooding
<input type="checkbox"/> Pump Height (< 12 inches)	<input checked="" type="checkbox"/> Unabandoned or Improperly Abandoned Well
<input type="checkbox"/> Unprotected Buried Suction Line	<input type="checkbox"/> Produces Bacterially Unsafe Water
<input type="checkbox"/> Noncomplying Supply Piping Material	WELL PIT/SUBSURFACE PUMPROOM/BASEMENT
<input type="checkbox"/> Pressure Conduit Absent (> 1991) (< 1991, non-residential)	<input type="checkbox"/> Noncomplying Pit or Alcove (Subsurface Pumproom)
<input type="checkbox"/> Noncomplying Check Valve Location	<input type="checkbox"/> Unsanitary or Illegal Basement Location
<input type="checkbox"/> Noncomplying Sampling Faucet or Noncomplying Location of Faucet	<input type="checkbox"/> Unsanitary Dug Well

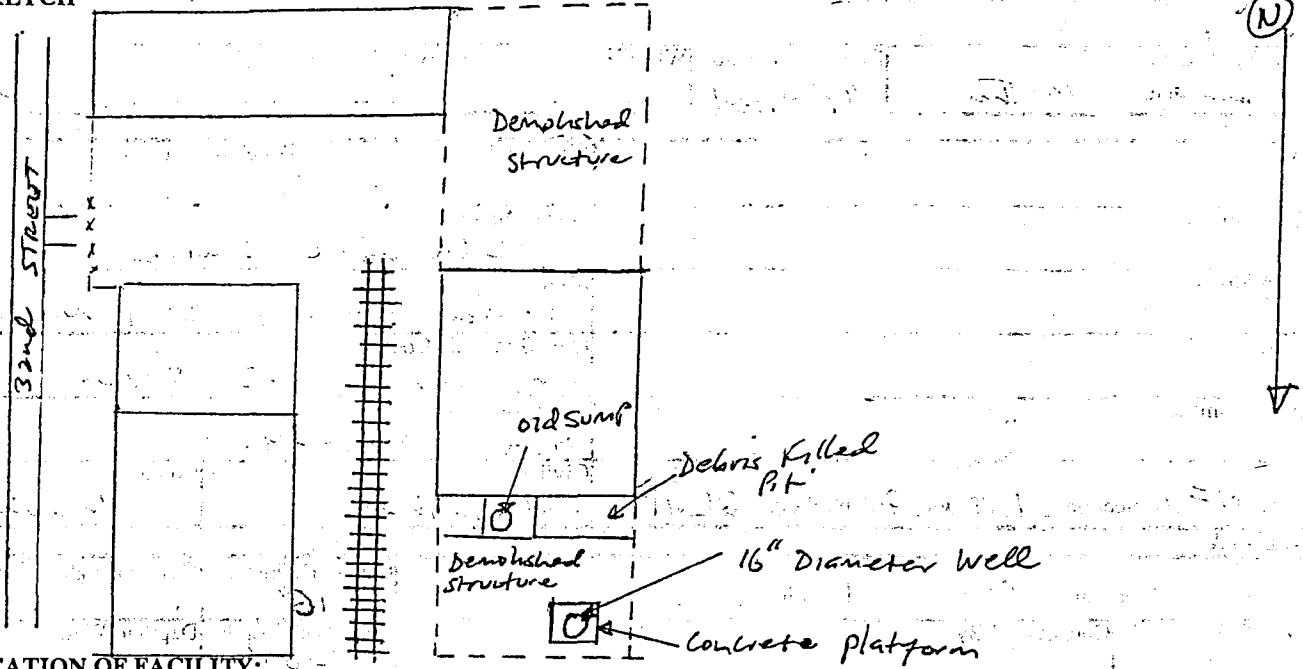
Separation Distance from Well as Required under s. NR 812.08, Wis. Adm. Code

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Septic or Holding Tank, 25 ft., 1951	<input type="checkbox"/> Buried Petroleum Tank, 100 ft., 1975	<input type="checkbox"/> Barn Gutter, 25 ft., 1975
<input type="checkbox"/> Sewage Absorption Unit, 50 ft., 1951	<input type="checkbox"/> Buried Home Heating Oil Tank, 25 ft., 1975	<input type="checkbox"/> Manure Pipe, 25 ft., 1981
<input type="checkbox"/> Grease Trap, 25 ft., 1951	<input type="checkbox"/> Lake, Stream or River, 25 ft., 1975	<input type="checkbox"/> Animal Yard or Shelter, 50 ft., 1975
<input type="checkbox"/> Collector Sewer > 6", 50 ft., 1975, 1994	<input type="checkbox"/> Building/Foundation Drain, 8 ft., 1951	<input type="checkbox"/> Perm. Manure Stack, 250 ft., 1991
<input type="checkbox"/> Building Sewer, 8 ft., 1936	<input type="checkbox"/> Clearwater Sump/Watertight, 8 ft., 1991	<input type="checkbox"/> Silo, 50 ft., 1975
<input type="checkbox"/> Building Overhang, 2 ft., 1936	<input type="checkbox"/> Wastewater Sump/Watertight, 25 ft., 1991	<input type="checkbox"/> Temp. Manure Stack, 150 ft., 1994
<input type="checkbox"/> Downspout or Yard Hydrant, 8 ft., 1951	<input type="checkbox"/> Noncomplying Pit, 8 ft., 1975	

Comments or Repairs Needed: *High Capacity well with no well seal. Well has debris in the lower 10ft. Require permanent abandonment. Demolition Contractor took out structure above well without an approval for well abandonment from DG*

Facility Appears in Compliance <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Follow-Up Date	Phone <input type="checkbox"/>	In Person <input checked="" type="checkbox"/>
Compliance Date	Representative's Signature <i>Washington Methen</i>		Inspector's Signature <i>Washington Methen</i>

FACILITY SKETCH

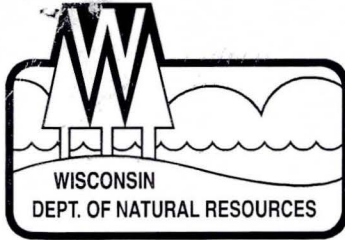


STREET LOCATION OF FACILITY:

SYSTEM SKETCH

ADDITIONAL COMMENTS

THE STRUCTURE ABOVE THE WELL WAS REMOVED BY
 BADGER WRECKING CO WITH ORDERS FROM THE CITY OF
 MILWAUKEE - DEPT. OF NEIGHBORHOOD SERVICES WITHOUT APPROVAL
 FOR WELL ABANDONMENT FROM DNR. THE WELL HAS VISIBLE
 DEBRIS (RAILROAD TIES ETC) IN LOWER 10 FT. OWNER HAS
 BEEN NOTIFIED ABOUT PERMANENT ABANDONMENT PROCEDURES
 FOR THIS WELL AS OF 1/3/2002



State of Wisconsin \ DEPARTMENT OF NATURAL RESOURCES

Scott McCallum, Governor
Darrell Bazzell, Secretary

101 S. Webster St.
Box 7921
Madison, Wisconsin 53707-7921
Telephone 608-266-2621
FAX 608-267-3579
TTY 608-267-6897

January 3, 2002

File:3300/Milwaukee/Hampton Avenue/PVT

Edward L. Kaiser
Kaiser Buildings
3201 N. Hampton Avenue
Milwaukee, WI 53209

WELL ABANDONMENT NOTICE

FID 341 055770

SUBJECT: High capacity wells located at 3201 N. Hampton Avenue, Milwaukee.

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Please complete proper abandonment of this well within 180 days of this notice. If you have any additional questions I can be reached at (414)-263-8695 in Milwaukee.

Sincerely

Washington Methu

Washington Methu
Drinking Water & Groundwater Specialist

C: Private DG/2
City of Milwaukee-Plumbing Inspection
File

Inspected By (Name) <i>Washington Methun</i>	Date of Inspection <i>11/20/2001</i>	WUWN _____	Facility ID Number _____	Region <i>SEB</i>
---	---	---------------	-----------------------------	----------------------

Facility Name <i>(PRV)TN NN</i>	Population Served _____
------------------------------------	----------------------------

Sampler Name _____	Owner Name <i>Edward L. Kaiser</i>
-----------------------	---------------------------------------

Mailing Address _____	Mailing Address <i>Kaiser Building, 3201 N. Hampton Ave</i>
--------------------------	--

City, State, Zip Code _____	City, State, Zip Code <i>Milwaukee, WI 53209</i>
--------------------------------	---

Telephone Number _____	Telephone Number <i>(414) - 444 - 2400</i>
---------------------------	---

NW 1/4 NE 1/4, Section <u>1</u> , Town <u>7</u> N, Range <u>21</u> W <input checked="" type="checkbox"/> E <input type="checkbox"/>	Civil Town <i>Milwaukee</i>	County <i>Milwaukee</i>
---	--------------------------------	----------------------------

WELL DATA			
<input checked="" type="checkbox"/> Drilled	<input type="checkbox"/> Driven	<input type="checkbox"/> Dug	<input type="checkbox"/> Other _____
Casing Diameter <i>16"</i>		Casing Height _____	Casing Depth _____
Date Well Constructed _____	Constructed By _____	Total Well Depth <i>1403'</i>	Depth to Water _____
		Depth to Bedrock _____	

PUMP/SUPPLY LINE DATA			
Pump Type <i>None</i>	Well Discharge Piping <i>None</i>		
<input type="checkbox"/> Submersible	<input type="checkbox"/> Double Pipe Deep Well	Offset	Y <input type="checkbox"/> N <input type="checkbox"/>
<input type="checkbox"/> Shallow Well	<input type="checkbox"/> Single Pipe Packer	Other	
Pump Installer <i>N/A</i>	Install Date _____	Pressure Tank Type <i>None</i>	Water Treatment Type <i>None</i>
			Y <input type="checkbox"/> N <input type="checkbox"/>
			Y <input type="checkbox"/> N <input type="checkbox"/>

WELL AND PUMP CODE VIOLATIONS NEEDING CORRECTION (√ if Noncomplying)	
SEAL/CAP	CASING/WELL
<input checked="" type="checkbox"/> Noncomplying Seal or Cap TYPE <i>None</i>	<input type="checkbox"/> Height Too Low (< 12 inches above grade) (< 8 inches for pre-1991)
<input type="checkbox"/> Electrical Wires Not Enclosed in Conduit	<input type="checkbox"/> Poor Condition (Corroded, Cracked)
PUMP/SUPPLY LINE	<input type="checkbox"/> Location Subject to Flooding
<input type="checkbox"/> Pump Height (< 12 inches)	<input checked="" type="checkbox"/> Unabandoned or Improperly Abandoned Well
<input type="checkbox"/> Unprotected Buried Suction Line	<input type="checkbox"/> Produces Bacterially Unsafe Water
<input type="checkbox"/> Noncomplying Supply Piping Material	WELL PIT/SUBSURFACE PUMPROOM/BASEMENT
<input type="checkbox"/> Pressure Conduit Absent (> 1991) (< 1991, non-residential)	<input type="checkbox"/> Noncomplying Pit or Alcove (Subsurface Pumproom)
<input type="checkbox"/> Noncomplying Check Valve Location	<input type="checkbox"/> Unsanitary or Illegal Basement Location
<input type="checkbox"/> Noncomplying Sampling Faucet or Noncomplying Location of Faucet	<input type="checkbox"/> Unsanitary Dug Well

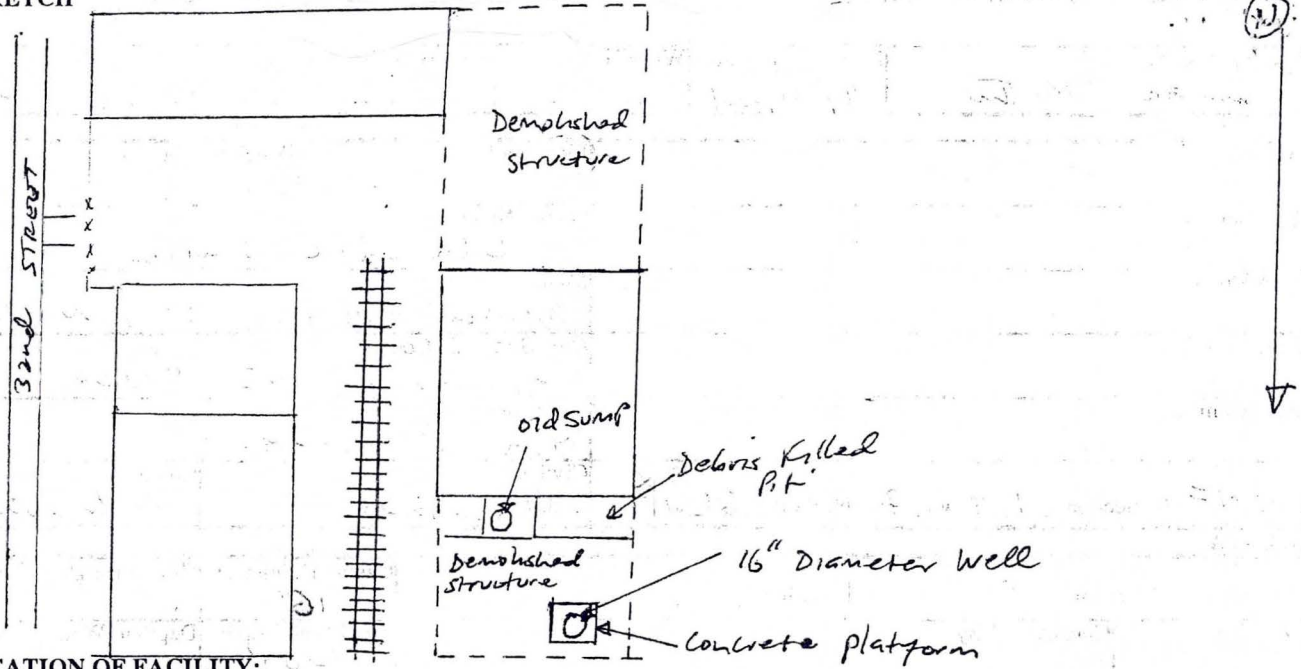
Separation Distance from Well as Required under s. NR 812.08, Wis. Adm. Code

<input type="checkbox"/>	Septic or Holding Tank, 25 ft., 1951	<input type="checkbox"/>	Buried Petroleum Tank, 100 ft., 1975	<input type="checkbox"/>	Barn Gutter, 25 ft., 1975
<input type="checkbox"/>	Sewage Absorption Unit, 50 ft., 1951	<input type="checkbox"/>	Buried Home Heating Oil Tank, 25 ft., 1975	<input type="checkbox"/>	Manure Pipe, 25 ft., 1981
<input type="checkbox"/>	Grease Trap, 25 ft., 1951	<input type="checkbox"/>	Lake, Stream or River, 25 ft., 1975	<input type="checkbox"/>	Animal Yard or Shelter, 50 ft., 1975
<input type="checkbox"/>	Collector Sewer > 6", 50 ft., 1975, 1994	<input type="checkbox"/>	Building/Foundation Drain, 8 ft., 1951	<input type="checkbox"/>	Perm. Manure Stack, 250 ft., 1991
<input type="checkbox"/>	Building Sewer, 8 ft., 1936	<input type="checkbox"/>	Clearwater Sump/Watertight, 8 ft., 1991	<input type="checkbox"/>	Silo, 50 ft., 1975
<input type="checkbox"/>	Building Overhang, 2 ft., 1936	<input checked="" type="checkbox"/>	Wastewater Sump/Watertight, 25 ft., 1991	<input type="checkbox"/>	Temp. Manure Stack, 150 ft., 1994
<input type="checkbox"/>	Downspout or Yard Hydrant, 8 ft., 1951	<input type="checkbox"/>	Noncomplying Pit, 8 ft., 1975		

Comments or Repairs Needed: *High Capacity well with no well seal. Well has debris in the lower 10 ft. Require permanent abandonment. Demolition Contractor took out structure above well without an approval for well abandonment from DG*

Facility Appears in Compliance	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Follow-Up Date	_____	Phone	<input type="checkbox"/>	In Person	<input checked="" type="checkbox"/>
Compliance Date	_____	Representative's Signature	_____		Inspector's Signature	<i>Washington Methun</i>	

FACILITY SKETCH

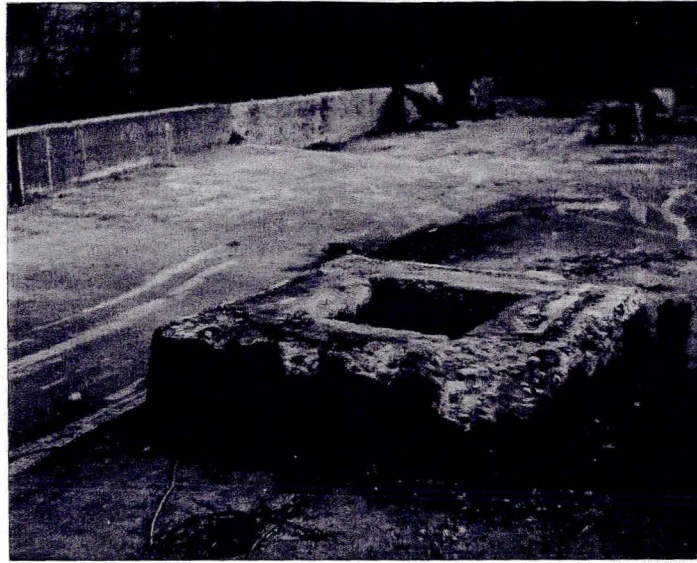


STREET LOCATION OF FACILITY:

SYSTEM SKETCH

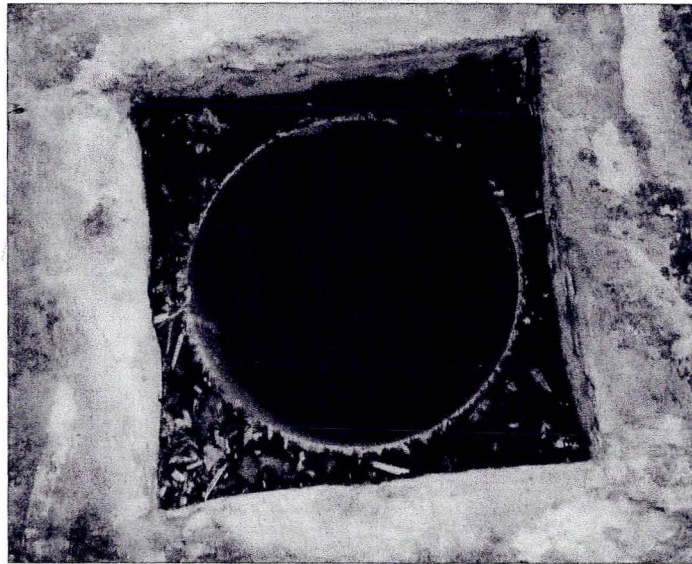
ADDITIONAL COMMENTS

THE STRUCTURE ABOVE THIS WELL WAS REMOVED BY
 BADGER WRECKING CO WITH ORDERS FROM THE CITY OF
 MILWAUKEE - DEPT. OF NEIGHBORHOOD SERVICES WITHOUT APPROVAL
 FOR WELL ABANDONMENT FROM DNR. THE WELL HAS VISIBLE
 DEBRIS (RAILROAD TIES ETC) IN LOWER 10 FT. OWNER HAS
 BEEN NOTIFIED ABOUT PERMANENT ABANDONMENT PROCEDURES
 FOR THIS WELL AS OF 1/3/2002.



Greenbarr Tanning Co 4/20/2001
32nd + Hampton { Ed Kaiser }
Milwaukee PROPERTY Wm

Heat well



Greenbarr Tanning Co 4/20/2001
32nd + Hampton [Ed Kaiser]
Milwaukee PROPERTY Wm

GREENEBAUM TANNING CO. WELL, MILWAUKEE, WIS.

337 West St.

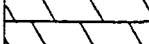
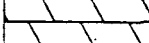
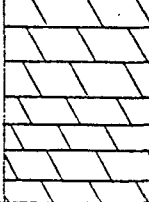

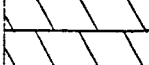

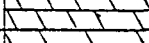
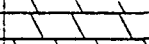
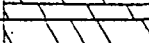
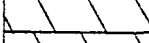
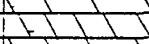
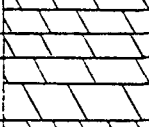






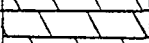
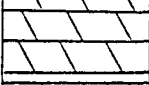
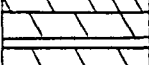
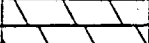
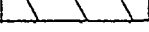
Layne-Northwest Co., Contractors, 1937

Samples examined by F. T. Thwaites, Nos. 99062-99319


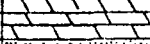
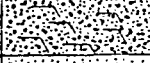
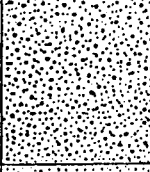
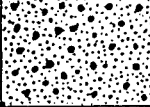
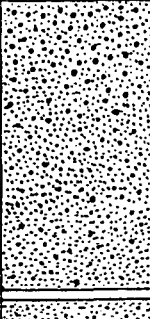










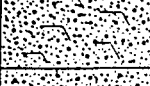


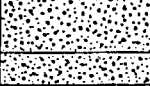

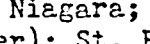
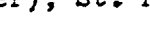
See also Nos. 96463-96554

Loc: NE $\frac{1}{4}$, NE $\frac{1}{4}$, NW $\frac{1}{4}$, NW $\frac{1}{4}$, NE $\frac{1}{4}$, Sec. 1, T.7N., R.21E.

Alt. = 65 0'

D R I F T	0-60	60		Drift, no samples		16" pipe
	60					62.5
N I A G A R A	60-80	20		Dolomite, no samples (Racine)		
	80-105	25		Dolomite, light gray		
	105-123	18		Dolomite, light gray; log: "lime and shale"		
	123-210	87		Dolomite, light gray		15" hole
	210-220	10		Dolomite, light gray; chert, white		
	220-265	45		Dolomite, light gray		
	265-275	10		Dolomite, light gray; chert, white (Waukesha)		
	275-285	10		Dolomite, light gray		
	285-300	15		Dolomite, light gray; chert, white		
	300-315	15		Dolomite, light gray (Byron)		
	315-325	10		Dolomite, light gray, some white chert		
	325-340	15		Dolomite, pink and light gray		
	340-380	40		Dolomite, light gray; chert, white (Mayville)		
	328	320-388	8		Dolomite, light gray	
R I C H M O N D	388-410	22		Dolomite, gray		
	410-420	10		Dolomite, light gray, blue specks		
	420-445	25		Dolomite, light brown-gray		
	445-460	15		Dolomite, blue-gray, black specks (n.s. 455-60)		454
	460-515	55		Shale, blue-gray, dolomitic		12" liner
	515-525	10		Dolomite, light gray; shale like above		
	525-578	53		Shale, blue-gray, dolomitic		
188						
G A L E N A - P L A T T	578-615	37		Dolomite, light brown-gray		584
	615-710	95		Dolomite, light gray; no samples 660-665, 685-690		
	710-730	20		Dolomite, light gray to blue-gray		12" hole
	730-					

Greenebaum Tanning Co., Milwaukee, p 2 (second set of samples)

248	780-790	10		Dolomite, light gray, blue-gray, blue specks
	790-800	10		Dolomite, light gray
	800-826	26		Sandstone, medium to fine, gray, very dolomitic
249	826-895	69		Sandstone, medium to fine, light gray
	895-940	45		Sandstone, coarse to fine, light gray
	940-1075	135		Sandstone, medium to fine, white; no sample 1060-1065
105	1075-1080	5		Ss. fine to medium, lt. gy, dol; shale, red
	1080-1085	5		shale, red, dolomitic
	1085-1095	10		Sandstone, fine to medium, lt. gy, dolomitic
	1095-1100	5		Sandstone, medium to fine, light gray, dol.
	1100-1135	35		Sandstone, medium, white, some pink, dolomitic
	1135-1150	15		Sandstone, fine to coarse, white
	1150-1180	30		Sandstone, fine to coarse, white, pink dolomitic layers
	1180-1200	20		Sandstone, fine to medium, white
	1200-1225	25		Sandstone, coarse to medium, white
	1225-1230	5		Sandstone, medium, gray, dolomitic
223	1230-1265	35		Sandstone, fine to coarse, white
	1265-1275	10		Sandstone, fine to medium, light gray
	1275-1310	35		Sandstone, fine to medium, light gray, slightly dolomitic
	1310-1350	40		Sandstone, medium to fine, white, light gray
	1350-1355	5		Sandstone, medium to fine, lt. gy, dolomitic
	1355-1390	35		Sandstone, medium to fine, light gray
	1390-1403	13		Sandstone like above; log "hard pink sandstone"

Formations: Drift; Niagara; Richmond (Maquoketa); Galena-Platteville (includes Decorah, Galena-Black River); St. Peter (may include Dresbach); Eau Claire; Mt. Simon

use as original

TO THE WISCONSIN STATE BOARD OF HEALTH,
WELL DRILLING DIVISION, MADISON, WIS.

WELL LOG PREMISES DIAGRAM, and REPORT

For Official Record of the Board

(TO BE USED FOR THAT PURPOSE ONLY)

Owner Gieseborn Tanning Co Driller Layne Northwest Co.
 (If a joint venture give name of responsible official. Also name of each individual holding an interest. Use a separate sheet and attach hereto)
 Address Milwaukee, Wisc. Address 109 N. 11th St. Milwaukee, Wisc.
 (City, village, township, county) Date of Report Dec. 22. 1937
 Registration No _____

Give below the location of the property on which well is drilled

If incorporated village or city Name _____ Lot _____ Blk _____ Street and No _____

If unincorporated hamlet Name _____ County _____ Twp _____ Hk, hwy _____

If Lake Shore Plat Name of Plat _____ Lake _____ Lot _____ Blk _____ Street _____

If Subdivision Name _____ County _____ Twp _____ Sec _____ Lot _____ Blk _____

If Farm _____ County _____ Twp _____ Sec _____ Highway _____

If School _____ County _____ Twp _____ Sec _____ District _____

If other public building _____ Kind _____ County _____ Twp _____ Sec _____

WELL LOG and REPORT

Kind of casing and liner in feet Kind of shoe. Indicate grout, screen, seal, etc	WELL DIAGRAM Vertical Lines = in Dia Horizontal Lines = ft Depth Use a red line to show casing	Give depth of formations in feet State if dry or water bearing	Record of FINAL Pumping Test
<u>62 1/2' of Steel Drive Pipe with Forged Steel Drive Shoes Attached</u>	0 2 4 6 8 10 12 14 16 18 20 22 24	Drift	Duration of test Hours <u>1 1/2</u>
	33	16" sd	Pumping Rate G P M <u>400</u>
	50	60'	Depth of pump in well Ft <u>180</u>
	62 1/2	Limestone	Standing water-level (from surface) Ft _____
	75		Water level when pumping Ft _____
	100	105	Water End of test Check Clear <input checked="" type="checkbox"/> Cloudy _____
	123	123 Linc & Shale	Turbid _____
	15"		Was well sterilized before test? Yes <input checked="" type="checkbox"/> No _____
	198	Limestone	Date _____
	200		To which Laboratory was sample sent? Date _____
	388	388	Was the well sealed on completion? Yes <input checked="" type="checkbox"/> No _____
<u>130' of Steel LINER SBA</u>	450	450 Linc & Shale	How high did you leave casing above grade? <u>6</u>
	578	Shale	Well was completed <u>June 7</u> 19 <u>37</u>
	800	800 Limestone	Well Driller <u>Layne Northwest Co.</u> Signature <u>[Signature]</u> (Be sure to complete the report on the reverse side) back is blank
	12"	Sandstone	
	1403	1403	



WGNHS ORIGINAL

See ML-70

ML-9-U
USGS

LOG OF WELL DRILLED AT J. GREENEBAUM TANNING COMPANY, NORTH MILWAUKEE

NE, NW, NE Sec. 1, T. 7, R. 21 E.

per
ML-10

		Thwaites interpretation	
16 inch pipe	53 feet	Drift	0 - 53 feet
Limestone, struck at	53 feet	Niagara	53- 370
Shale	370 feet	Richmond	370- 563
Lime and shale	374 feet		
Shale	450 feet		
Lime	563 feet	Galena	563- 795
Bottom of 12 1/2 inch hole	584 feet		
Sand	795 feet	St. Peter	795-1050
Red Marl	1050 feet	Eau Claire	1050-1604
Sand	1052 feet		
Bottom of hole	1604 feet		
10 inch pipe			

- Courtesy of the owners. December 7, 1927.

USGS log shows depth of 1100ft., but this could just be a measured depth - the well is pretty old.

-NKG 1-22-74



See ML-70

ML-9-U
USGS

LOG OF WELL DRILLED AT J. GREENEBAUM TANNING COMPANY, NORTH MILWAUKEE

NE, NW, NE Sec. 1, T. 7, R. 21 E.
per
ML-10

		Thwaites interpretation	
16 inch pipe	53 feet	Drift	0 - 53 feet
Limestone, struck at	53 feet	Niagara	53- 370
Shale	370 feet	Richmond	370- 563
Lime and shale	374 feet		
Shale	450 feet		
Lime	563 feet	Galena	563- 795
Bottom of 12 1/2 inch hole	584 feet		
Sand	795 feet	St. Peter	795-1050
Red Marl	1050 feet	Eau Claire	1050-1604
Sand	1052 feet		
Bottom of hole	1604 feet		
10 inch pipe			

- Courtesy of the owners. December 7, 1927.

USGS log shows depth of 1100ft., but
this could just be a measured
depth - the well is pretty old.

-NRG 1-22-92



For any additional information, please phone **Inspector Michele Burke** at **[414]-286-3357** between the hours of **7:00-9:00am Monday through Friday**.

Per Commissioner of Neighborhood Services By-

Michele Burke
Inspector

FAILURE TO COMPLY

Failure to correct the violations noted herein within the time set, or failure to comply with the order as modified by an appellate board and maintain compliance, may subject you to prosecution and to daily penalties of \$150 to \$10,000 in the manner provided in Section 200-19.

RIGHT TO APPEAL

You may file an appeal within 14 days. The Milwaukee Code of Ordinances requires that a written appeal of this order be received by the Standards and Appeals Commission by the compliance date. If service of this order is made by mail, the appeal shall be received by the compliance date plus 5 days. For further information, contact the Code Appeals Secretary, Municipal Building, 1st Floor, 841 N. Broadway, Milwaukee, Wisconsin 53202, phone 414-286-2503. There is a fee for filing this application. Failure to appeal an order issued by the Department shall create a rebuttable presumption that a violation existed on the date of the issuance of the order (200-17-8).

TENANT RENT WITHHOLDING

Uncorrected violations on properties may allow tenants to deposit their rent in an escrow account in the Department of Neighborhood Services under Section 200-22. The Commissioner may withdraw monies from such escrow accounts to make repairs to protect the health, safety and welfare of tenants.

REINSPECTION FEES

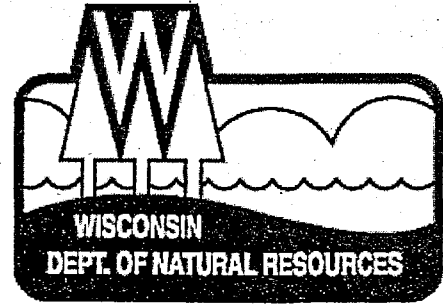
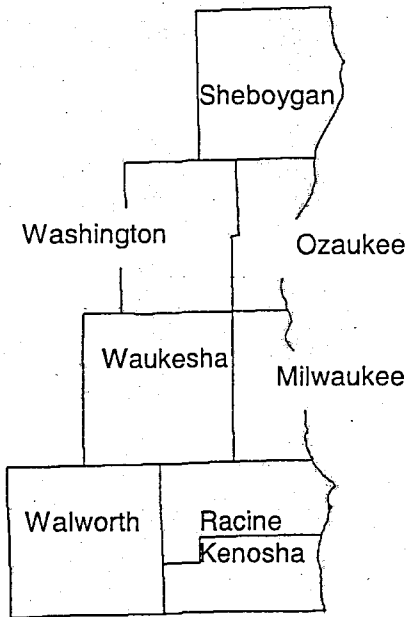
In accordance with Section 200-33-48, a fee may be charged for any reinspection, except no fee shall be charged for the final reinspection when compliance is recorded. **The fee is \$50 for the first reinspection, \$75 for the second, \$150 for the third, and \$300 for the fourth and all subsequent reinspections. Reinspection fees shall be a lien upon the real estate where the reinspections were made and shall be assessed and collected as a special tax.**

RETROACTIVITY RULE

In accordance with Section 225-02, Comm 82.21, 82.30, 82.31 and 82.41 shall apply retroactively if upon inspection of any part of an existing plumbing system a condition is identified that tends to create a potential health hazard.

TRADUCCION EN ESPAÑOL

Si Ud. necesita ayuda para la traducción de esta información, comuníquese con el 'Centro Hispano' Council for the Spanish Speaking, Inc., 614 W. National Avenue, Milwaukee, WI 53204. Teléfono: (414)384-3700.



Department of Natural Resources

Southeast Region

2300 N. Dr. Martin Luther King Dr
 PO Box 12436
 Milwaukee, WI 53212

Fax Number: 414-263-8483

TO: GARY Leake Phone # 920 568 2521
 Agency/Region: Superior Fax # 920 568 2537
 From: J Hnat Phone # 414 263 8644
 Date: 10/17/02 Number of pages (including cover sheet) 12
 Subject: Water Sample Results, Kaiser High Cap Well

<p>Administration & Technology</p> <p>Fran Findley Kathy Schultz</p> <p>Community Assistance</p> <p>Tom Blotz Dave Dahms Mary Ellen Franson Dan Kaemmerer Gene Park</p> <p>Drinking Water/ Ground Water</p> <p>Chad Czarkowski Frank Fuja Pat Iwanski Washington Methu</p>	<p>Enforcement</p> <p>Pat Chung John Keim Deb Roszak Vanessa Thompson</p> <p>Environmental Assessment</p> <p>Joanne Kline Maureen Millman Mike Thompson</p> <p>Fisheries</p> <p>Matt Coffaro</p> <p>Watershed</p> <p>Jim Fratrack</p>	<p>Remediation & Redevelopment and Waste Management</p> <p>Andy Boettcher Walt Ebersohl Scott Ferguson John Hnat Frances Koonce Ron Kroepff Sylvia Rosenbaum Frank Schultz Victoria Stovall</p> <p>Transportation</p> <p>Eva Larson Jerry Medinger</p>
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**Wisconsin Department of Natural Resources
Laboratory Report**

08/27/2002

Lab: 113133790

Sample: IN002514

Page 1 of 3

Laboratory: Wisconsin State Laboratory of Hygiene

DNR ID 113133790

2601 Agriculture Dr

Madison

WI 53707

Phone : 800-442-4618

Fax Phone : 608-224-6276

Sample:

Field #: SAMPLE01

Sample #: IN002514

Collection Start: 07/30/2002 10:03 am

Collection End: 07/30/2002 11:10 am

Collected by: HNAT/METHU

Waterbody/Outfall Id:

ID #: 341055770

ID Point #: HC001

County: Milwaukee

Account #: RR024

Sample Location: HIGH CAP WELL #1 - KAISER PROP, 4763 N 32ND ST, MILWAUKEE WI

Sample Description: DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY/BAILER 60FT

Sample Source: W

Sample Depth: F60

Date Reported: 08/27/2002

Sample Status: COMPLETE

Project No:

F10 341055770

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
ARSENIC, AA FURN (SM 3113B)		08/01/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1002	ARSENIC TOTAL	7440382	2.7	UG/L	1		3

Analysis Method		Analysis Date	Lab Comment				
CADMIUM, AA FURN (SM 3113B)		08/06/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1027	CADMIUM TOTAL	7440439	ND	UG/L	0.05		0.15

Analysis Method		Analysis Date	Lab Comment				
CHROMIUM, AA FURN (SM 3113B)		08/08/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1034	CHROMIUM TOTAL	7440473	ND	UG/L	1		3

Analysis Method		Analysis Date	Lab Comment				
CONDUCTIVITY PH & ALK (SM2510B/EPA07/31/2002 150.1/SM2320B)		08/27/2002	SAMPLE RECEIVED WITH PRESERVATIVE, NO TEST DONE				
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
410	ALKALINITY TOTAL CaCO3	E1640192	**	MGL		1.	
95	CONDUCTIVITY AT 25C	E1640291	**	UMHOS/CM		1	
403	PH LAB	E1644285	**	SU		1	

Analysis Method		Analysis Date	Lab Comment			
CYANIDE (SM 4500CN-E)		08/02/2002				

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Sample: IN002514

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<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
1007	BARIUM TOTAL	7440393	2.	UG/L	2		5

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Sample: ON000272

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Laboratory: Wisconsin State Laboratory of Hygiene
2601 Agriculture Dr
Madison WI 53707
Phone: 800-442-4618 Fax Phone: 608-224-6276

DNR ID 113133790

Sample:

Field #: SAMPLE 01	Sample #: ON000272
Collection Start: 07/30/2002 10:03 am	Collection End: 07/30/2002 11:10 am
Collected by: J. HNAT & WASHINGTON	Waterbody/Outfall Id:
ID #: 341055770	ID Point #: HC001
County: Milwaukee	Account #: RR024
Sample Location: HIGH CAP WELL, KAISER PROP., 4763 N. 32ND ST., MILWAUKEE, WI	
Sample Description: DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY	
Sample Source: W	Sample Depth: F 60
Date Reported: 08/12/2002	Sample Status: COMPLETE
Project No:	

Analyses and Results:

Analysis Method	Analysis Date	Lab Comment					
TEMPERATURE ON RECEIPT-ICED - 09508/01/2002							
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
136	TEMPERATURE AT LAB	E1645696	ICED			9999999	

Analysis Method	Analysis Date	Lab Comment					
NEUTRAL EXTRACT - PCBS - 1210 08/01/2002 SEE ON000272.MM1							
Lab Memo	<p>WISCONSIN STATE LABORATORY OF HYGIENE (WSLH) SAMPLE ON000272, WATER FROM THE HIGH CAP WELL AT THE KAISER PROPERTY IN MILWAUKEE, APPEARS THAT IT IS NOT A HOMOGENEOUS SAMPLE. THIS SAMPLE WAS ANALYZED IN DUPLICATE AS PART OF OUR ROUTINE QUALITY CONTROL PROGRAM. (THIS MEANS THAT TWO OF THE THREE ONE LITER BOTTLES THAT WERE SUBMITTED TO THE LABORATORY WERE TESTED.) PCB-AROCLOR 1260 WAS DETECTED IN ONE OF THE BOTTLES AT 0.23 UG/L. IN THE OTHER BOTTLE, PCB-AROCLOR 1260 WAS DETECTD AT 0.096 UG/L. THE THIRD BOTTLE THAT WAS COLLECTED FROM THIS SITE WAS ALSO ANALYZED BECAUSE OF THE DIFFERENCE IN THESE RESULTS. PCB-AROCLOR 1260 WAS DETECTED IN THE THIRD BOTTLE AT 0.16 UG/L. THE LIMIT OF DETECTION (LOD) FOR PCBS IN A ONE LITER WATER SAMPLE IS 0.18 UG/L. THE OTHER ELEMENTS OF OUR QUALITY CONTROL PROGRAM FOR THIS SAMPLE ARE WITHIN THE ACCEPTANCE CRITERIA. THE PHYSICAL APPEARANCE OF THE SAMPLE IN EACH BOTTLE WAS ALSO VERY DIFFERENT. FROM THIS INFORMATION, IT APPEARS THAT THIS SAMPLE IS NOT HOMOGENEOUS.</p> <p>IF YOU HAVE ANY QUESTIONS, CONTACT DAVID DEGENHARDT (608) 224-6269.</p>						
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
39508	PCB 1260	11096825	0.23	UG/L	0.18		0.50

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<i>Analysis Method</i>		<i>Analysis Date</i>		<i>Lab Comment</i>			
NEUTRAL EXTRACTABLE PESTICIDES - FUSION/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
99430	PREP PESTICIDES BY NEUTRAL EXTRACTION		COMPLE TE				

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Sample: ON000268

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Laboratory: Wisconsin State Laboratory of Hygiene
2601 Agriculture Dr
Madison WI 53707
Phone : 800-442-4618 Fax Phone : 608-224-6276

DNR ID 113133790

Sample:

Field #:	SAMPLE 01	Sample #:	ON000268
Collection Start:	07/30/2002 10:03 am	Collection End:	07/30/2002 11:10 am
Collected by:	J. HNAT & WASHINGTON	Waterbody/Outfall Id:	
ID #:	341055770	ID Point #:	HC001
County:	Milwaukee	Account #:	RR024
Sample Location:	HIGH CAP WELL, KAISER PROP., 4763 N. 32ND ST., MILWAUKEE, WI		
Sample Description:	DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY		
Sample Source:	W	Sample Depth:	F 60
Date Reported:	08/06/2002	Sample Status:	COMPLETE
Project No:			

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
VOCS IN WATER - EPA METHOD 8260B		08/01/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
77562	1,1,1,2-TETRACHLOROETHANE	630206	ND	UG/L	0.50		1.7
34506	1,1,1-TRICHLOROETHANE	71556	ND	UG/L	0.50		1.7
34516	1,1,2,2-TETRACHLOROETHANE	79345	ND	UG/L	0.50		1.7
34511	1,1,2-TRICHLOROETHANE	79005	ND	UG/L	0.50		1.7
34496	1,1-DICHLOROETHANE	75343	ND	UG/L	0.50		1.7
34501	1,1-DICHLOROETHYLENE	75354	ND	UG/L	0.50		1.7
77168	1,1-DICHLOROPROPENE	563586	ND	UG/L	0.50		1.7
77613	1,2,3-TRICHLOROBENZENE	87616	ND	UG/L	0.50		1.7
77443	1,2,3-TRICHLOROPROPANE	96184	ND	UG/L	1.0		3.3
34551	1,2,4-TRICHLOROBENZENE	120821	ND	UG/L	0.50		1.7
77222	1,2,4-TRIMETHYLBENZENE	95636	ND	UG/L	0.50		1.7
38437	1,2-DIBROMO-3- CHLOROPROPANE	96128	ND	UG/L	1.0		3.3
77651	1,2-DIBROMOETHANE	106934	ND	UG/L	0.50		1.7
34536	1,2-DICHLOROBENZENE	95501	ND	UG/L	0.50		1.7
34531	1,2-DICHLOROETHANE	107062	ND	UG/L	0.50		1.7
34546	1,2-DICHLOROETHYLENE	156605	ND	UG/L	0.50		1.7
77093	1,2-DICHLOROETHYLENE CIS	156592	ND	UG/L	0.50		1.7
34541	1,2-DICHLOROPROPANE	78875	ND	UG/L	0.50		1.7
77226	1,3,5-TRIMETHYLBENZENE	108678	ND	UG/L	0.50		1.7

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Sample: ON000268

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<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
34566	1,3-DICHLOROBENZENE	541731	ND	UGL	0.50		1.7
77173	1,3-DICHLOROPROPANE	142289	ND	UGL	0.50		1.7
34704	1,3-DICHLOROPROPENE-CIS	10061015	ND	UGL	0.50		1.7
34699	1,3-DICHLOROPROPENE-TRANS	10061026	ND	UGL	1.0		3.3
34571	1,4-DICHLOROBENZENE	106467	ND	UGL	0.50		1.7
77170	2,2-DICHLOROPROPANE	594207	ND	UGL	1.0		3.3
78133	4-METHYL-2-PENTANONE	108101	ND	UGL	3.0		10.
81552	ACETONE	67641	ND	UGL	3.0		10.
34030	BENZENE	71432	ND	UGL	0.50		1.7
81555	BROMOBENZENE	108861	ND	UGL	0.50		1.7
77297	BROMOCHLOROMETHANE	74975	ND	UGL	0.50		1.7
32101	BROMODICHLOROMETHANE	75274	ND	UGL	0.50		1.7
32104	BROMOFORM	75252	ND	UGL	1.0		3.3
34413	BROMOMETHANE	74839	ND	UGL	1.0		3.3
77350	BUTYLBENZENE SEC	135988	ND	UGL	0.50		1.7
77353	BUTYLBENZENE TERT	98066	ND	UGL	0.50		1.7
77041	CARBON DISULFIDE	75150	ND	UGL	3.0		10.
32102	CARBON TETRACHLORIDE	56235	ND	UGL	0.50		1.7
34301	CHLOROBENZENE	108907	ND	UGL	0.50		1.7
34311	CHLOROETHANE	75003	ND	UGL	1.0		3.3
32106	CHLOROFORM	67663	ND	UGL	0.50		1.7
34418	CHLOROMETHANE	74873	ND	UGL	1.0		3.3
32105	DIBROMOCHLOROMETHANE	124481	ND	UGL	1.0		3.3
77596	DIBROMOMETHANE	74953	ND	UGL	0.50		1.7
34668	DICHLORODIFLUOROMETHANE	75718	ND	UGL	1.0		3.3
81577	DIISOPROPYL ETHER	108203	ND	UGL	3.0		10.
34371	ETHYLBENZENE	100414	ND	UGL	0.50		1.7
34391	HEXACHLOROBUTADIENE	87683	ND	UGL	0.50		1.7
77223	ISOPROPYLBENZENE	98828	ND	UGL	0.50		1.7
85795	M/P-XYLENE	136777612	ND	UGL	1.0		3.3
81595	METHYL ETHYL KETONE	78933	ND	UGL	3.0		10.
78032	METHYL TERT BUTYL ETHER	1634044	ND	UGL	1.0		3.3
34423	METHYLENE CHLORIDE	75092	ND	UGL	1.0		3.3
77342	N-BUTYLBENZENE	104518	ND	UGL	0.50		1.7

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Sample: ON000268

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<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
81590	N-HEXANE	110543	ND	UGL	1.0		3.3
77224	N-PROPYLBENZENE	103651	ND	UGL	0.50		1.7
34696	NAPHTHALENE	91203	ND	UGL	0.50		1.7
77275	O-CHLOROTOLUENE	95498	ND	UGL	0.50		1.7
77135	O-XYLENE	95476	ND	UGL	0.50		1.7
77277	P-CHLOROTOLUENE	106434	ND	UGL	0.50		1.7
77356	P-ISOPROPYLTOLUENE	99876	ND	UGL	0.50		1.7
77128	STYRENE	100425	ND	UGL	0.50		1.7
34475	TETRACHLOROETHYLENE	127184	ND	UGL	0.50		1.7
81607	TETRAHYDROFURAN	109999	ND	UGL	3.0		10.
34010	TOLUENE	108883	ND	UGL	0.50		1.7
39180	TRICHLOROETHYLENE	79016	ND	UGL	0.50		1.7
34488	TRICHLOROFLUOROMETHANE	75694	ND	UGL	1.0		3.3
81611	TRICHLOROTRIFLUOROETHANE	26523648	ND	UGL	3.0		10.
39175	VINYL CHLORIDE	75014	ND	UGL	0.50		1.7

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>					
VOCS IN WATER - PREP - EPA METHOD 5080B/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
99385	PREP VOCS IN WATER METHOD 8260B		COMPLE TE				

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>					
TEMPERATURE ON RECEIPT-ICED - 09507/31/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
136	TEMPERATURE AT LAB	E1645696	ICED			9999999	

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Laboratory Report**

08/28/2002

Lab: 113133790

Sample: ON000273

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Laboratory: Wisconsin State Laboratory of Hygiene
2601 Agriculture Dr
Madison WI 53707
Phone : 800-442-4618 Fax Phone : 608-224-6276

DNR ID 113133790

Sample:

Field #: SAMPLE 01	Sample #: ON000273
Collection Start: 07/30/2002 10:03 am	Collection End: 07/30/2002 11:10 am
Collected by: J. HNAT & WASHINGTON	Waterbody/Outfall Id:
ID #: 341055770	ID Point #: HC001
County: Milwaukee	Account #: RR024
Sample Location: HIGH CAP WELL, KAISER PROP., 4763 N. 32 ND ST., MILWAUKEE, WI	
Sample Description: DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY	
Sample Source: W	Sample Depth: F 60
Date Reported: 08/28/2002	Sample Status: COMPLETE
Project No:	

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
SEMI-VOLATILES IN EFFLUENT-BNAS - METHOD 8270/625		08/06/2002	LOD NOT ACHIEVABLE DUE TO DILUTION-*D.				
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
34551	1,2,4-TRICHLOROBENZENE	120821	*D <20.	UG/L	10.		33.
34536	1,2-DICHLOROBENZENE	95501	*D <22.	UG/L	11.		37.
34346	1,2-DIPHENYLHYDRAZINE	122667	*D <10.	UG/L	5.0		17.
34566	1,3-DICHLOROBENZENE	541731	*D <22.	UG/L	11.		37.
34571	1,4-DICHLOROBENZENE	106467	*D <22.	UG/L	11.		37.
79147	2,4,5-TRICHLOROPHENOL	95954	*D <20.	UG/L	10.		33.
34621	2,4,6-TRICHLOROPHENOL	88062	*D <40.	UG/L	20.		67.
34601	2,4-DICHLOROPHENOL	120832	*D <40.	UG/L	20.		67.
34606	2,4-DIMETHYLPHENOL	105679	*D <50.	UG/L	25.		84.
34616	2,4-DINITROPHENOL	51285	*D <30.	UG/L	15.		50.
34611	2,4-DINITROTOLUENE	121142	*D <10.	UG/L	5.0		17.
34626	2,6-DINITROTOLUENE	606202	*D <20.	UG/L	10.		33.
34278	2-CHLOROETHOXY METHANE BIS	111911	*D <22.	UG/L	11.		37.
34273	2-CHLOROETHYL ETHER BIS	111444	*D <26.	UG/L	13.		43.
34581	2-CHLORONAPHTHALENE	91587	*D <20.	UG/L	10.		33.
34586	2-CHLOROPHENOL	95578	*D <56.	UG/L	28.		94.
39100	2-ETHYLHEXYL PHTHALATE BIS	117817	*D <10.	UG/L	5.0		17.
34657	2-METHYL-4,6-DINITROPHENOL	534521	*D <30.	UG/L	15.		50.
77416	2-METHYLNAPHTHALENE	91576	*D <20.	UG/L	10.		33.

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Lab: 113133790

Sample: ON000273

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Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
77152	2-METHYLPHENOL	95487	*D <22.	UG/L	11.		37.
78142	2-NITROANILINE	88744	*D <20.	UG/L	10.		33.
34594	2-NITROPHENOL	88755	*D <50.	UG/L	25.		84.
34591	2-NITROPHENOL	88755	*D <30.	UG/L	15.		50.
34631	3,3'-DICHLOROBENZIDINE	91941	NA				
78300	3-NITROANILINE	99092	NA				
34636	4-BROMOPHENYL PHENYL ETHER	101553	*D <20.	UG/L	10.		33.
34452	4-CHLORO-3-METHYLPHENOL	59507	*D <22.	UG/L	11.		37.
73529	4-CHLOROANILINE	106478	NA				
34641	4-CHLOROPHENYL PHENYL ETHER	7005723	*D <20.	UG/L	10.		33.
77146	4-METHYLPHENOL	106445	*D <24.	UG/L	12.		40.
73605	4-NITROANILINE	100016	*D <100.	UG/L	50.		160.
34205	ACENAPHTHENE	83329	*D <20.	UG/L	10.		33.
34200	ACENAPHTHYLENE	208968	*D <20.	UG/L	10.		33.
34220	ANTHRACENE	120127	*D <10.	UG/L	5.0		17.
39120	BENZIDINE	92875	NA				
34526	BENZO (A) ANTHRACENE	56553	*D <20.	UG/L	10.		33.
34247	BENZO (A) PYRENE	50328	*D <20.	UG/L	10.		33.
34230	BENZO (B) FLUORANTHENE	205992	*D <20.	UG/L	10.		33.
34521	BENZO (G H I) PERLYENE	191242	*D <20.	UG/L	10.		33.
34242	BENZO (K) FLUORANTHENE	207089	*D <10.	UG/L	5.0		17.
77247	BENZOIC ACID	65850	*D <40.	UG/L	20.		67.
77147	BENZYL ALCOHOL	100516	*D <20.	UG/L	10.		33.
34283	BIS 2-CHLOROISOPROPYL ETHER	39638329	*D <24.	UG/L	12.		40.
34292	BUTYL BENZYL PHTHALATE	85687	*D <10.	UG/L	5.0		16.
34320	CHRYSENE	218019	*D <20.	UG/L	10.		33.
39110	DI-N-BUTYL PHTHALATE	84742	*D <10.	UG/L	5.0		16.
34556	DIBENZO (A H) ANTHRACENE	53703	*D <20.	UG/L	10.		33.
81302	DIBENZOFURAN	132649	*D <10.	UG/L	5.0		17.
34336	DIETHYL PHTHALATE	84662	*D <10.	UG/L	5.0		16.
34341	DIMETHYL PHTHALATE	131113	*D <20.	UG/L	10.		33.
34596	DIOCTYL PHTHALATE	117840	*D <10.	UG/L	5.0		17.
34366	FLUORANTHENE	206440	*D <10.	UG/L	5.0		17.
34381	FLUORENE	86737	*D <10.	UG/L	5.0		17.

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Lab: 113133790

Sample: ON000273

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<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
39700	HEXACHLOROBENZENE	118741	*D <20.	UGL	10.		33.
34391	HEXACHLOROBUTADIENE	87683	*D <20.	UGL	10.		33.
34386	HEXACHLOROCYCLOPENTADIENE	77474	*D <20.	UGL	10.		33.
34396	HEXACHLOROETHANE	67721	*D <20.	UGL	10.		33.
34403	INDENO (1,2,3-C D) PYRENE	193395	*D <20.	UGL	10.		33.
34408	ISOPHORONE	78591	*D <20.	UGL	10.		33.
34428	N-NITROSODI-N-PROPYLAMINE	621647	*D <20.	UGL	10.		33.
34438	N-NITROSODIMETHYLAMINE	62759	*D <20.	UGL	10.		33.
34433	N-NITROSODIPHENYLAMINE	86306	*D <20.	UGL	10.		33.
34696	NAPHTHALENE	91203	*D <24.	UGL	12.		40.
34447	NITROBENZENE	98953	*D <24.	UGL	12.		40.
39032	PENTACHLOROPHENOL	87865	*D <30.	UGL	15.		50.
34461	PHENANTHRENE	85018	*D <10.	UGL	5.0		17.
34694	PHENOL	108952	*D <34.	UGL	17.		57.
34469	PYRENE	129000	*D <20.	UGL	10.		33.

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>					
TEMPERATURE ON RECEIPT-ICED - 09507/31/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
136	TEMPERATURE AT LAB	E1645696	ICED			9999999	

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>					
SEMI-VOLATILES-EFFLUENT-PREP-BNAS08/01/2002 METHOD 3510C							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
99478	PREP SEMI VOLATILES, EPA METHOD 3510C		COMPLE TE			0	

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Lab: 113133790

Sample: IN002514

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Laboratory: Wisconsin State Laboratory of Hygiene
2601 Agriculture Dr
Madison WI 53707
Phone: 800-442-4618 Fax Phone: 608-224-6276

DNR ID 113133790

Sample:

Field #: **SAMPLE01** Sample #: **IN002514**
 Collection Start: **07/30/2002 10:03 am** Collection End: **07/30/2002 11:10 am**
 Collected by: **HNAT/METHU** Waterbody/Outfall Id:
 ID #: **341055770** ID Point #: **HC001**
 County: **Milwaukee** Account #: **RR024**
 Sample Location: **HIGH CAP WELL #1 - KAISER PROP, 4763 N 32ND ST, MILWAUKEE WI**
 Sample Description: **DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY/BAILER 60FT**
 Sample Source: **W** Sample Depth: **F60**
 Date Reported: **08/27/2002** Sample Status: **COMPLETE**
 Project No:

Analyses and Results:

Analysis Method		Analysis Date		Lab Comment			
ARSENIC, AA FURN (SM 3113B)		08/01/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1002	ARSENIC TOTAL	7440382	2.7	UG/L	1		3

Analysis Method		Analysis Date		Lab Comment			
CADMIUM, AA FURN (SM 3113B)		08/06/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1027	CADMIUM TOTAL	7440439	ND	UG/L	0.05		0.15

Analysis Method		Analysis Date		Lab Comment			
CHROMIUM, AA FURN (SM 3113B)		08/08/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1034	CHROMIUM TOTAL	7440473	ND	UG/L	1		3

Analysis Method		Analysis Date		Lab Comment			
CONDUCTIVITY PH & ALK (SM2510B/EPA07/31/2002 150.1/SM2320B)				SAMPLE RECEIVED WITH PRESERVATIVE, NO TEST DONE			
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
410	ALKALINITY TOTAL CaCO3	E1640192	**	MGL		1.	
95	CONDUCTIVITY AT 25C	E1640291	**	UMHOS/CM		1	
403	PH LAB	E1644285	**	SU		1	

Analysis Method		Analysis Date		Lab Comment			
CYANIDE (SM 4500CN-E)		08/02/2002					

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Lab: 113133790

Sample: IN002514

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<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
1007	BARIUM TOTAL	7440393	2.	UG/L	2		5

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Laboratory Report**

08/27/2002

Lab: 113133790

Sample: ON000272

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Laboratory: Wisconsin State Laboratory of Hygiene

DNR ID 113133790

2601 Agriculture Dr

Madison

WI 53707

Phone: 800-442-4618

Fax Phone: 608-224-6276

Sample:

Field #: SAMPLE 01

Sample #: ON000272

Collection Start: 07/30/2002 10:03 am

Collection End: 07/30/2002 11:10 am

Collected by: J. HNAT & WASHINGTO

Waterbody/Outfall Id:

ID #: 341055770

ID Point #: HC001

County: Milwaukee

Account #: RR024

Sample Location: HIGH CAP WELL, KAISER PROP., 4763 N. 32ND ST., MILWAUKEE, WI

Sample Description: DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY

Sample Source: W

Sample Depth: F 60

Date Reported: 08/12/2002

Sample Status: COMPLETE

Project No:

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
TEMPERATURE ON RECEIPT-ICED - 09508/01/2002							
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
136	TEMPERATURE AT LAB	E1645696	ICED			9999999	

Analysis Method		Analysis Date	Lab Comment				
NEUTRAL EXTRACT - PCBS - 1210		08/01/2002	SEE ON000272.MM1				
Lab Memo	<p>WISCONSIN STATE LABORATORY OF HYGIENE (WSLH) SAMPLE ON000272, WATER FROM THE HIGH CAP WELL AT THE KAISER PROPERTY IN MILWAUKEE, APPEARS THAT IT IS NOT A HOMOGENEOUS SAMPLE. THIS SAMPLE WAS ANALYZED IN DUPLICATE AS PART OF OUR ROUTINE QUALITY CONTROL PROGRAM. (THIS MEANS THAT TWO OF THE THREE ONE LITER BOTTLES THAT WERE SUBMITTED TO THE LABORATORY WERE TESTED.) PCB-AROCOR 1260 WAS DETECTED IN ONE OF THE BOTTLES AT 0.23 UG/L. IN THE OTHER BOTTLE, PCB-AROCOR 1260 WAS DETECTD AT 0.096 UG/L. THE THIRD BOTTLE THAT WAS COLLECTED FROM THIS SITE WAS ALSO ANALYZED BECAUSE OF THE DIFFERENCE IN THESE RESULTS. PCB-AROCOR 1260 WAS DETECTED IN THE THIRD BOTTLE AT 0.16 UG/L. THE LIMIT OF DETECTION (LOD) FOR PCBS IN A ONE LITER WATER SAMPLE IS 0.18 UG/L. THE OTHER ELEMENTS OF OUR QUALITY CONTROL PROGRAM FOR THIS SAMPLE ARE WITHIN THE ACCEPTANCE CRITERIA. THE PHYSICAL APPEARANCE OF THE SAMPLE IN EACH BOTTLE WAS ALSO VERY DIFFERENT. FROM THIS INFORMATION, IT APPEARS THAT THIS SAMPLE IS NOT HOMOGENEOUS.</p> <p>IF YOU HAVE ANY QUESTIONS, CONTACT DAVID DEGENHARDT (608) 224-6269.</p>						
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
39508	PCB 1260	11096825	0.23	UG/L	0.18		0.50

Wisconsin Department of Natural Resources
Laboratory Report

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Lab: 113133790

Sample: ON000272

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<i>Analysis Method</i>		<i>Analysis Date</i>		<i>Lab Comment</i>			
NEUTRAL EXTRACTABLE PESTICIDES - RIBIDR/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
99430	PREP PESTICIDES BY NEUTRAL EXTRACTION		COMPLE TE				

**Wisconsin Department of Natural Resources
Laboratory Report**

08/27/2002

Lab: 113133790

Sample: ON000268

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Laboratory: Wisconsin State Laboratory of Hygiene
2601 Agriculture Dr
Madison WI 53707
Phone: 800-442-4618 Fax Phone: 608-224-6276

DNR ID 113133790

Sample:

Field #: SAMPLE 01	Sample #: ON000268
Collection Start: 07/30/2002 10:03 am	Collection End: 07/30/2002 11:10 am
Collected by: J. HNAT & WASHINGTON	Waterbody/Outfall Id:
ID #: 341055770	ID Point #: HC001
County: Milwaukee	Account #: RR024
Sample Location: HIGH CAP WELL, KAISER PROP., 4763 N. 32ND ST., MILWAUKEE, WI	
Sample Description: DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY	
Sample Source: W	Sample Depth: F 60
Date Reported: 08/06/2002	Sample Status: COMPLETE
Project No:	

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
VOCS IN WATER - EPA METHOD 8260B		08/01/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
77562	1,1,1,2-TETRACHLOROETHANE	630206	ND	UGL	0.50		1.7
34506	1,1,1-TRICHLOROETHANE	71556	ND	UGL	0.50		1.7
34516	1,1,2,2-TETRACHLOROETHANE	79345	ND	UGL	0.50		1.7
34511	1,1,2-TRICHLOROETHANE	79005	ND	UGL	0.50		1.7
34496	1,1-DICHLOROETHANE	75343	ND	UGL	0.50		1.7
34501	1,1-DICHLOROETHYLENE	75354	ND	UGL	0.50		1.7
77168	1,1-DICHLOROPROPENE	563586	ND	UGL	0.50		1.7
77613	1,2,3-TRICHLOROBENZENE	87616	ND	UGL	0.50		1.7
77443	1,2,3-TRICHLOROPROPANE	96184	ND	UGL	1.0		3.3
34551	1,2,4-TRICHLOROBENZENE	120821	ND	UGL	0.50		1.7
77222	1,2,4-TRIMETHYLBENZENE	95636	ND	UGL	0.50		1.7
38437	1,2-DIBROMO-3- CHLOROPROPANE	96128	ND	UGL	1.0		3.3
77651	1,2-DIBROMOETHANE	106934	ND	UGL	0.50		1.7
34536	1,2-DICHLOROBENZENE	95501	ND	UGL	0.50		1.7
34531	1,2-DICHLOROETHANE	107062	ND	UGL	0.50		1.7
34546	1,2-DICHLOROETHYLENE	156605	ND	UGL	0.50		1.7
77093	1,2-DICHLOROETHYLENE CIS	156592	ND	UGL	0.50		1.7
34541	1,2-DICHLOROPROPANE	78875	ND	UGL	0.50		1.7
77226	1,3,5-TRIMETHYLBENZENE	108678	ND	UGL	0.50		1.7

**Wisconsin Department of Natural Resources
Laboratory Report**

08/27/2002

Lab: 113133790

Sample: ON000268

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<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
34566	1,3-DICHLOROBENZENE	541731	ND	UGL	0.50		1.7
77173	1,3-DICHLOROPROPANE	142289	ND	UGL	0.50		1.7
34704	1,3-DICHLOROPROPENE-CIS	10061015	ND	UGL	0.50		1.7
34699	1,3-DICHLOROPROPENE-TRANS	10061026	ND	UGL	1.0		3.3
34571	1,4-DICHLOROBENZENE	106467	ND	UGL	0.50		1.7
77170	2,2-DICHLOROPROPANE	594207	ND	UGL	1.0		3.3
78133	4-METHYL-2-PENTANONE	108101	ND	UGL	3.0		10.
81552	ACETONE	67641	ND	UGL	3.0		10.
34030	BENZENE	71432	ND	UGL	0.50		1.7
81555	BROMOBENZENE	108861	ND	UGL	0.50		1.7
77297	BROMOCHLOROMETHANE	74975	ND	UGL	0.50		1.7
32101	BROMODICHLOROMETHANE	75274	ND	UGL	0.50		1.7
32104	BROMOFORM	75252	ND	UGL	1.0		3.3
34413	BROMOMETHANE	74839	ND	UGL	1.0		3.3
77350	BUTYLBENZENE SEC	135988	ND	UGL	0.50		1.7
77353	BUTYLBENZENE TERT	98066	ND	UGL	0.50		1.7
77041	CARBON DISULFIDE	75150	ND	UGL	3.0		10.
32102	CARBON TETRACHLORIDE	56235	ND	UGL	0.50		1.7
34301	CHLOROBENZENE	108907	ND	UGL	0.50		1.7
34311	CHLOROETHANE	75003	ND	UGL	1.0		3.3
32106	CHLOROFORM	67663	ND	UGL	0.50		1.7
34418	CHLOROMETHANE	74873	ND	UGL	1.0		3.3
32105	DIBROMOCHLOROMETHANE	124481	ND	UGL	1.0		3.3
77596	DIBROMOMETHANE	74953	ND	UGL	0.50		1.7
34668	DICHLORODIFLUOROMETHANE	75718	ND	UGL	1.0		3.3
81577	DIISOPROPYL ETHER	108203	ND	UGL	3.0		10.
34371	ETHYLBENZENE	100414	ND	UGL	0.50		1.7
34391	HEXACHLOROBUTADIENE	87683	ND	UGL	0.50		1.7
77223	ISOPROPYLBENZENE	98828	ND	UGL	0.50		1.7
85795	M/P-XYLENE	136777612	ND	UGL	1.0		3.3
81595	METHYL ETHYL KETONE	78933	ND	UGL	3.0		10.
78032	METHYL TERT BUTYL ETHER	1634044	ND	UGL	1.0		3.3
34423	METHYLENE CHLORIDE	75092	ND	UGL	1.0		3.3
77342	N-BUTYLBENZENE	104518	ND	UGL	0.50		1.7

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Lab: 113133790

Sample: ON000268

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<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
81590	N-HEXANE	110543	ND	UG/L	1.0		3.3
77224	N-PROPYLBENZENE	103651	ND	UG/L	0.50		1.7
34696	NAPHTHALENE	91203	ND	UG/L	0.50		1.7
77275	O-CHLOROTOLUENE	95498	ND	UG/L	0.50		1.7
77135	O-XYLENE	95476	ND	UG/L	0.50		1.7
77277	P-CHLOROTOLUENE	106434	ND	UG/L	0.50		1.7
77356	P-ISOPROPYLTOLUENE	99876	ND	UG/L	0.50		1.7
77128	STYRENE	100425	ND	UG/L	0.50		1.7
34475	TETRACHLOROETHYLENE	127184	ND	UG/L	0.50		1.7
81607	TETRAHYDROFURAN	109999	ND	UG/L	3.0		10.
34010	TOLUENE	108883	ND	UG/L	0.50		1.7
39180	TRICHLOROETHYLENE	79016	ND	UG/L	0.50		1.7
34488	TRICHLOROFLUOROMETHANE	75694	ND	UG/L	1.0		3.3
81611	TRICHLOROTRIFLUOROETHANE	26523648	ND	UG/L	3.0		10.
39175	VINYL CHLORIDE	75014	ND	UG/L	0.50		1.7

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>					
VOCS IN WATER - PREP - EPA METHOD 5080B/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
99385	PREP VOCS IN WATER METHOD 8260B		COMPLE TE				

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>					
TEMPERATURE ON RECEIPT-ICED - O9507/31/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
136	TEMPERATURE AT LAB	E1645696	ICED			9999999	

**Wisconsin Department of Natural Resources
Laboratory Report**

08/28/2002

Lab: 113133790

Sample: ON000273

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Laboratory: Wisconsin State Laboratory of Hygiene
2601 Agriculture Dr
Madison WI 53707
Phone : 800-442-4618 Fax Phone : 608-224-6276

DNR ID 113133790

Sample:

Field #: SAMPLE 01	Sample #: ON000273
Collection Start: 07/30/2002 10:03 am	Collection End: 07/30/2002 11:10 am
Collected by: J. HNAT & WASHINGTON	Waterbody/Outfall Id:
ID #: 341055770	ID Point #: HC001
County: Milwaukee	Account #: RR024
Sample Location: HIGH CAP WELL, KAISER PROP., 4763 N. 32 ND ST., MILWAUKEE, WI	
Sample Description: DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY	
Sample Source: W	Sample Depth: F 60
Date Reported: 08/28/2002	Sample Status: COMPLETE
Project No:	

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
SEMI-VOLATILES IN EFFLUENT-BNAS - METHOD 8270/625		08/06/2002	LOD NOT ACHIEVABLE DUE TO DILUTION-*D.				
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
34551	1,2,4-TRICHLOROBENZENE	120821	*D <20.	UG/L	10.		33.
34536	1,2-DICHLOROBENZENE	95501	*D <22.	UG/L	11.		37.
34346	1,2-DIPHENYLHYDRAZINE	122667	*D <10.	UG/L	5.0		17.
34566	1,3-DICHLOROBENZENE	541731	*D <22.	UG/L	11.		37.
34571	1,4-DICHLOROBENZENE	106467	*D <22.	UG/L	11.		37.
79147	2,4,5-TRICHLOROPHENOL	95954	*D <20.	UG/L	10.		33.
34621	2,4,6-TRICHLOROPHENOL	88062	*D <40.	UG/L	20.		67.
34601	2,4-DICHLOROPHENOL	120832	*D <40.	UG/L	20.		67.
34606	2,4-DIMETHYLPHENOL	105679	*D <50.	UG/L	25.		84.
34616	2,4-DINITROPHENOL	51285	*D <30.	UG/L	15.		50.
34611	2,4-DINITROTOLUENE	121142	*D <10.	UG/L	5.0		17.
34626	2,6-DINITROTOLUENE	606202	*D <20.	UG/L	10.		33.
34278	2-CHLOROETHOXY METHANE BIS	111911	*D <22.	UG/L	11.		37.
34273	2-CHLOROETHYL ETHER BIS	111444	*D <26.	UG/L	13.		43.
34581	2-CHLORONAPHTHALENE	91587	*D <20.	UG/L	10.		33.
34586	2-CHLOROPHENOL	95578	*D <56.	UG/L	28.		94.
39100	2-ETHYLHEXYL PHTHALATE BIS	117817	*D <10.	UG/L	5.0		17.
34657	2-METHYL-4,6-DINITROPHENOL	534521	*D <30.	UG/L	15.		50.
77416	2-METHYLNAPHTHALENE	91576	*D <20.	UG/L	10.		33.

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Laboratory Report**

08/28/2002

Lab: 113133790

Sample: ON000273

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<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
77152	2-METHYLPHENOL	95487	*D <22.	UGL	11.		37.
78142	2-NITROANILINE	88744	*D <20.	UGL	10.		33.
34594	2-NITROPHENOL	88755	*D <50.	UGL	25.		84.
34591	2-NITROPHENOL	88755	*D <30.	UGL	15.		50.
34631	3,3'-DICHLOROBENZIDINE	91941	NA				
78300	3-NITROANILINE	99092	NA				
34636	4-BROMOPHENYL PHENYL ETHER	101553	*D <20.	UGL	10.		33.
34452	4-CHLORO-3-METHYLPHENOL	59507	*D <22.	UGL	11.		37.
73529	4-CHLOROANILINE	106478	NA				
34641	4-CHLOROPHENYL PHENYL ETHER	7005723	*D <20.	UGL	10.		33.
77146	4-METHYLPHENOL	106445	*D <24.	UGL	12.		40.
73605	4-NITROANILINE	100016	*D <100.	UGL	50.		160.
34205	ACENAPHTHENE	83329	*D <20.	UGL	10.		33.
34200	ACENAPHTHYLENE	208968	*D <20.	UGL	10.		33.
34220	ANTHRACENE	120127	*D <10.	UGL	5.0		17.
39120	BENZIDINE	92875	NA				
34526	BENZO (A) ANTHRACENE	56553	*D <20.	UGL	10.		33.
34247	BENZO (A) PYRENE	50328	*D <20.	UGL	10.		33.
34230	BENZO (B) FLUORANTHENE	205992	*D <20.	UGL	10.		33.
34521	BENZO (G H I) PERLYENE	191242	*D <20.	UGL	10.		33.
34242	BENZO (K) FLUORANTHENE	207089	*D <10.	UGL	5.0		17.
77247	BENZOIC ACID	65850	*D <40.	UGL	20.		67.
77147	BENZYL ALCOHOL	100516	*D <20.	UGL	10.		33.
34283	BIS 2-CHLOROISOPROPYL ETHER	39638329	*D <24.	UGL	12.		40.
34292	BUTYL BENZYL PHTHALATE	85687	*D <10.	UGL	5.0		16.
34320	CHRYSENE	218019	*D <20.	UGL	10.		33.
39110	DI-N-BUTYL PHTHALATE	84742	*D <10.	UGL	5.0		16.
34556	DIBENZO (A H) ANTHRACENE	53703	*D <20.	UGL	10.		33.
81302	DIBENZOFURAN	132649	*D <10.	UGL	5.0		17.
34336	DIETHYL PHTHALATE	84662	*D <10.	UGL	5.0		16.
34341	DIMETHYL PHTHALATE	131113	*D <20.	UGL	10.		33.
34596	DIOCTYL PHTHALATE	117840	*D <10.	UGL	5.0		17.
34366	FLUORANTHENE	206440	*D <10.	UGL	5.0		17.
34381	FLUORENE	86737	*D <10.	UGL	5.0		17.

**Wisconsin Department of Natural Resources
Laboratory Report**

08/28/2002

Lab: 113133790

Sample: ON000273

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<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
39700	HEXACHLOROBENZENE	118741	*D <20.	UG/L	10.		33.
34391	HEXACHLOROBUTADIENE	87683	*D <20.	UG/L	10.		33.
34386	HEXACHLOROCYCLOPENTADIENE	77474	*D <20.	UG/L	10.		33.
34396	HEXACHLOROETHANE	67721	*D <20.	UG/L	10.		33.
34403	INDENO (1,2,3-C D) PYRENE	193395	*D <20.	UG/L	10.		33.
34408	ISOPHORONE	78591	*D <20.	UG/L	10.		33.
34428	N-NITROSODI-N-PROPYLAMINE	621647	*D <20.	UG/L	10.		33.
34438	N-NITROSODIMETHYLAMINE	62759	*D <20.	UG/L	10.		33.
34433	N-NITROSODIPHENYLAMINE	86306	*D <20.	UG/L	10.		33.
34696	NAPHTHALENE	91203	*D <24.	UG/L	12.		40.
34447	NITROBENZENE	98953	*D <24.	UG/L	12.		40.
39032	PENTACHLOROPHENOL	87865	*D <30.	UG/L	15.		50.
34461	PHENANTHRENE	85018	*D <10.	UG/L	5.0		17.
34694	PHENOL	108952	*D <34.	UG/L	17.		57.
34469	PYRENE	129000	*D <20.	UG/L	10.		33.

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>					
TEMPERATURE ON RECEIPT-ICED - 095007/31/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
136	TEMPERATURE AT LAB	E1645696	ICED			9999999	

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>					
SEMI-VOLATILES-EFFLUENT-PREP-BNAS08/01/2002							
METHOD 3510C							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
99478	PREP SEMI VOLATILES, EPA METHOD 3510C		COMPLE TE			0	



Department of Natural Resources Southeast Region

Serving the counties of Kenosha, Milwaukee, Ozaukee, Racine, Sheboygan,
Walworth, Washington and Waukesha

Southeast Regional Headquarters
2300 N. Dr. Martin Luther King Jr. Drive
P.O. Box 12436, Milwaukee, WI 53212

TELEFAX NUMBER: 414/263-8483

To: Joshua Beadles Phone # _____

Agency/Region: Sigma Fax # 768-7158

Subject: FYI Kaiser North Aug
Log Well @ STATIC GW results

From: H NAT Phone #: 263 8644

Date: 10/7/02 Number of Pages (including Cover Sheet) 12

<p>Air Monitoring</p> <p>Andre Ash Mike Beadles Tony Bowers Fred Campbell Theresa Foley John Hillery Joe Leair Mary Mertes Ed Miller Art Pinkert Sherry Sanford</p> <p>Transportation</p> <p>Eva Larson</p>	<p>Administration & Technology</p> <p>Fran Findley Kathy Schultz</p> <p>Enforcement</p> <p>Pat Chung John Kelm Debbie Roszak Vanessa Thompson</p> <p>Environmental Assessment</p> <p>Joanne Kline</p>	<p>Remediation & Redevelopment and Waste Management</p> <p>Andy Boettcher Walt Ebersohl John Hnat Frances Koonce Sylvia Rosenbaum Frank Schultz Victoria Stovall Mike Thompson</p> <p>Community Assistance</p> <p>Tom Blatz Mary Ellen Franson Dan Kaemmerer Gene Park</p>	<p>Drinking Water / Ground Water</p> <p>Chad Czarkowski Frank Fuja Pat Iwanski Washington Methu</p> <p>Fisheries</p> <p>Matt Coffaro</p>
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**Wisconsin Department of Natural Resources
Laboratory Report**

08/27/2002

Lab: 113133790

Sample: IN002514

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Laboratory: Wisconsin State Laboratory of Hygiene
2601 Agriculture Dr
Madison WI 53707
Phone: 800-442-4618 Fax Phone: 608-224-6276

DNR ID 113133790

Sample:

Field #: SAMPLE01	Sample #: IN002514
Collection Start: 07/30/2002 10:03 am	Collection End: 07/30/2002 11:10 am
Collected by: HNAT/METHU	Waterbody/Outfall Id:
ID #: 341055770	ID Point #: HC001
County: Milwaukee	Account #: RR024
Sample Location: HIGH CAP WELL #1 - KAISER PROP, 4763 N 32ND ST, MILWAUKEE WI	
Sample Description: DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY/BAILER 60FT	
Sample Source: W	Sample Depth: F60
Date Reported: 08/27/2002	Sample Status: COMPLETE
Project No:	

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
ARSENIC, AA FURN (SM 3113B)		08/01/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1002	ARSENIC TOTAL	7440382	2.7	UG/L	1		3

Analysis Method		Analysis Date	Lab Comment				
CADMIUM, AA FURN (SM 3113B)		08/06/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1027	CADMIUM TOTAL	7440439	ND	UG/L	0.05		0.15

Analysis Method		Analysis Date	Lab Comment				
CHROMIUM, AA FURN (SM 3113B)		08/08/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1034	CHROMIUM TOTAL	7440473	ND	UG/L	1		3

Analysis Method		Analysis Date	Lab Comment				
CONDUCTIVITY PH & ALK (SM2510B/EPA07/31/2002 150.1/SM2320B)			SAMPLE RECEIVED WITH PRESERVATIVE, NO TEST DONE				
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
410	ALKALINITY TOTAL CaCO3	E1640192	**	MGL		1.	
95	CONDUCTIVITY AT 25C	E1640291	**	UMHOS/CM		1	
403	PH LAB	E1644285	**	SU		1	

Analysis Method		Analysis Date	Lab Comment			
CYANIDE (SM 4500CN-E)		08/02/2002				

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Lab: 113133790

Sample: IN002514

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<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
1007	BARIUM TOTAL	7440393	2.	UG/L	2		5

**Wisconsin Department of Natural Resources
Laboratory Report**

08/27/2002

Lab: 113133790

Sample: ON000272

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Laboratory: Wisconsin State Laboratory of Hygiene
2601 Agriculture Dr
Madison WI 53707
Phone: 800-442-4618 Fax Phone: 608-224-6276

DNR ID 113133790

Sample:

Field #: SAMPLE 01	Sample #: ON000272
Collection Start: 07/30/2002 10:03 am	Collection End: 07/30/2002 11:10 am
Collected by: J. HNAT & WASHINGTO	Waterbody/Outfall Id:
ID#: 341055770	ID Point #: HC001
County: Milwaukee	Account #: RR024
Sample Location: HIGH CAP WELL, KAISER PROP., 4763 N. 32ND ST., MILWAUKEE, WI	
Sample Description: DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY	
Sample Source: W	Sample Depth: F 60
Date Reported: 08/12/2002	Sample Status: COMPLETE
Project No:	

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
TEMPERATURE ON RECEIPT-ICED - 09508/01/2002							
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
136	TEMPERATURE AT LAB	E1645696	ICED			9999999	

Analysis Method		Analysis Date	Lab Comment				
NEUTRAL EXTRACT - PCBS - 1210		08/01/2002	SEE ON000272.MM1				
Lab Memo		<p>WISCONSIN STATE LABORATORY OF HYGIENE (WSLH) SAMPLE ON000272, WATER FROM THE HIGH CAP WELL AT THE KAISER PROPERTY IN MILWAUKEE, APPEARS THAT IT IS NOT A HOMOGENEOUS SAMPLE. THIS SAMPLE WAS ANALYZED IN DUPLICATE AS PART OF OUR ROUTINE QUALITY CONTROL PROGRAM. (THIS MEANS THAT TWO OF THE THREE ONE LITER BOTTLES THAT WERE SUBMITTED TO THE LABORATORY WERE TESTED.) PCB-AROCLOR 1260 WAS DETECTED IN ONE OF THE BOTTLES AT 0.23 UG/L. IN THE OTHER BOTTLE, PCB-AROCLOR 1260 WAS DETECTD AT 0.096 UG/L. THE THIRD BOTTLE THAT WAS COLLECTED FROM THIS SITE WAS ALSO ANALYZED BECAUSE OF THE DIFFERENCE IN THESE RESULTS. PCB-AROCLOR 1260 WAS DETECTED IN THE THIRD BOTTLE AT 0.16 UG/L. THE LIMIT OF DETECTION (LOD) FOR PCBS IN A ONE LITER WATER SAMPLE IS 0.18 UG/L. THE OTHER ELEMENTS OF OUR QUALITY CONTROL PROGRAM FOR THIS SAMPLE ARE WITHIN THE ACCEPTANCE CRITERIA. THE PHYSICAL APPEARANCE OF THE SAMPLE IN EACH BOTTLE WAS ALSO VERY DIFFERENT. FROM THIS INFORMATION, IT APPEARS THAT THIS SAMPLE IS NOT HOMOGENEOUS.</p> <p>IF YOU HAVE ANY QUESTIONS, CONTACT DAVID DEGENHARDT (608) 224-6269.</p>					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
39508	PCB 1260	11096825	0.23	UG/L	0.18		0.50

Wisconsin Department of Natural Resources
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Lab: 113133790

Sample: ON000272

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<i>Analysis Method</i>		<i>Analysis Date</i>		<i>Lab Comment</i>			
NEUTRAL EXTRACTABLE PESTICIDES - HIRDR/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
99430	PREP PESTICIDES BY NEUTRAL EXTRACTION		COMPLE TE				

**Wisconsin Department of Natural Resources
Laboratory Report**

08/27/2002

Lab: 113133790

Sample: ON000268

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Laboratory: Wisconsin State Laboratory of Hygiene
2601 Agriculture Dr
Madison WI 53707
Phone: 800-442-4618 Fax Phone: 608-224-6276

DNR ID 113133790

Sample:

Field #: SAMPLE 01	Sample #: ON000268
Collection Start: 07/30/2002 10:03 am	Collection End: 07/30/2002 11:10 am
Collected by: J. HNAT & WASHINGTON	Waterbody/Outfall Id:
ID #: 341055770	ID Point #: HC001
County: Milwaukee	Account #: RR024
Sample Location: HIGH CAP WELL, KAISER PROP., 4763 N. 32ND ST., MILWAUKEE, WI	
Sample Description: DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY	
Sample Source: W	Sample Depth: F 60
Date Reported: 08/06/2002	Sample Status: COMPLETE
Project No:	

Analyses and Results:

Analysis Method	Analysis Date	Lab Comment				
VOCS IN WATER - EPA METHOD 8260B	08/01/2002					
<i>Code Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
77562 1,1,1,2-TETRACHLOROETHANE	630206	ND	UG/L	0.50		1.7
34506 1,1,1-TRICHLOROETHANE	71556	ND	UG/L	0.50		1.7
34516 1,1,2,2-TETRACHLOROETHANE	79345	ND	UG/L	0.50		1.7
34511 1,1,2-TRICHLOROETHANE	79005	ND	UG/L	0.50		1.7
34496 1,1-DICHLOROETHANE	75343	ND	UG/L	0.50		1.7
34501 1,1-DICHLOROETHYLENE	75354	ND	UG/L	0.50		1.7
77168 1,1-DICHLOROPROPENE	563586	ND	UG/L	0.50		1.7
77613 1,2,3-TRICHLOROBENZENE	87616	ND	UG/L	0.50		1.7
77443 1,2,3-TRICHLOROPROPANE	96184	ND	UG/L	1.0		3.3
34551 1,2,4-TRICHLOROBENZENE	120821	ND	UG/L	0.50		1.7
77222 1,2,4-TRIMETHYLBENZENE	95636	ND	UG/L	0.50		1.7
38437 1,2-DIBROMO-3- CHLOROPROPANE	96128	ND	UG/L	1.0		3.3
77651 1,2-DIBROMOETHANE	106934	ND	UG/L	0.50		1.7
34536 1,2-DICHLOROBENZENE	95501	ND	UG/L	0.50		1.7
34531 1,2-DICHLOROETHANE	107062	ND	UG/L	0.50		1.7
34546 1,2-DICHLOROETHYLENE	156605	ND	UG/L	0.50		1.7
77093 1,2-DICHLOROETHYLENE CIS	156592	ND	UG/L	0.50		1.7
34541 1,2-DICHLOROPROPANE	78875	ND	UG/L	0.50		1.7
77226 1,3,5-TRIMETHYLBENZENE	108678	ND	UG/L	0.50		1.7

Wisconsin Department of Natural Resources
Laboratory Report

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Lab: 113133790

Sample: ON000268

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<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
34566	1,3-DICHLOROBENZENE	541731	ND	UGL	0.50		1.7
77173	1,3-DICHLOROPROPANE	142289	ND	UGL	0.50		1.7
34704	1,3-DICHLOROPROPENE-CIS	10061015	ND	UGL	0.50		1.7
34699	1,3-DICHLOROPROPENE-TRANS	10061026	ND	UGL	1.0		3.3
34571	1,4-DICHLOROBENZENE	106467	ND	UGL	0.50		1.7
77170	2,2-DICHLOROPROPANE	594207	ND	UGL	1.0		3.3
78133	4-METHYL-2-PENTANONE	108101	ND	UGL	3.0		10.
81552	ACETONE	67641	ND	UGL	3.0		10.
34030	BENZENE	71432	ND	UGL	0.50		1.7
81555	BROMOBENZENE	108861	ND	UGL	0.50		1.7
77297	BROMOCHLOROMETHANE	74975	ND	UGL	0.50		1.7
32101	BROMODICHLOROMETHANE	75274	ND	UGL	0.50		1.7
32104	BROMOFORM	75252	ND	UGL	1.0		3.3
34413	BROMOMETHANE	74839	ND	UGL	1.0		3.3
77350	BUTYLBENZENE SEC	135988	ND	UGL	0.50		1.7
77353	BUTYLBENZENE TERT	98066	ND	UGL	0.50		1.7
77041	CARBON DISULFIDE	75150	ND	UGL	3.0		10.
32102	CARBON TETRACHLORIDE	56235	ND	UGL	0.50		1.7
34301	CHLOROBENZENE	108907	ND	UGL	0.50		1.7
34311	CHLOROETHANE	75003	ND	UGL	1.0		3.3
32106	CHLOROFORM	67663	ND	UGL	0.50		1.7
34418	CHLOROMETHANE	74873	ND	UGL	1.0		3.3
32105	DIBROMOCHLOROMETHANE	124481	ND	UGL	1.0		3.3
77596	DIBROMOMETHANE	74953	ND	UGL	0.50		1.7
34668	DICHLORODIFLUOROMETHANE	75718	ND	UGL	1.0		3.3
81577	DIISOPROPYL ETHER	108203	ND	UGL	3.0		10.
34371	ETHYLBENZENE	100414	ND	UGL	0.50		1.7
34391	HEXACHLOROBUTADIENE	87683	ND	UGL	0.50		1.7
77223	ISOPROPYLBENZENE	98828	ND	UGL	0.50		1.7
85795	M/P-XYLENE	136777612	ND	UGL	1.0		3.3
81595	METHYL ETHYL KETONE	78933	ND	UGL	3.0		10.
78032	METHYL TERT BUTYL ETHER	1634044	ND	UGL	1.0		3.3
34423	METHYLENE CHLORIDE	75092	ND	UGL	1.0		3.3
77342	N-BUTYLBENZENE	104518	ND	UGL	0.50		1.7

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08/27/2002

Lab: 113133790

Sample: ON000268

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<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
81590	N-HEXANE	110543	ND	UG/L	1.0		3.3
77224	N-PROPYLBENZENE	103651	ND	UG/L	0.50		1.7
34696	NAPHTHALENE	91203	ND	UG/L	0.50		1.7
77275	O-CHLOROTOLUENE	95498	ND	UG/L	0.50		1.7
77135	O-XYLENE	95476	ND	UG/L	0.50		1.7
77277	P-CHLOROTOLUENE	106434	ND	UG/L	0.50		1.7
77356	P-ISOPROPYLTOLUENE	99876	ND	UG/L	0.50		1.7
77128	STYRENE	100425	ND	UG/L	0.50		1.7
34475	TETRACHLOROETHYLENE	127184	ND	UG/L	0.50		1.7
81607	TETRAHYDROFURAN	109999	ND	UG/L	3.0		10.
34010	TOLUENE	108883	ND	UG/L	0.50		1.7
39180	TRICHLOROETHYLENE	79016	ND	UG/L	0.50		1.7
34488	TRICHLOROFLUOROMETHANE	75694	ND	UG/L	1.0		3.3
81611	TRICHLOROTRIFLUOROETHANE	26523648	ND	UG/L	3.0		10.
39175	VINYL CHLORIDE	75014	ND	UG/L	0.50		1.7

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>					
VOCS IN WATER - PREP - EPA METHOD 5080B/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
99385	PREP VOCS IN WATER METHOD 8260B		COMPLE TE				

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>					
TEMPERATURE ON RECEIPT-ICED - 09507/31/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
136	TEMPERATURE AT LAB	E1645696	ICED			9999999	

**Wisconsin Department of Natural Resources
Laboratory Report**

08/28/2002

Lab: 113133790

Sample: ON000273

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Laboratory: Wisconsin State Laboratory of Hygiene
2601 Agriculture Dr
Madison WI 53707
Phone: 800-442-4618 Fax Phone: 608-224-6276

DNR ID 113133790

Sample:

Field #: SAMPLE 01	Sample #: ON000273
Collection Start: 07/30/2002 10:03 am	Collection End: 07/30/2002 11:10 am
Collected by: J. HNAT & WASHINGTON	Waterbody/Outfall Id:
ID #: 341055770	ID Point #: HC001
County: Milwaukee	Account #: RR024
Sample Location: HIGH CAP WELL, KAISER PROP., 4763 N. 32 ND ST., MILWAUKEE, WI	
Sample Description: DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY	
Sample Source: W	Sample Depth: F 60
Date Reported: 08/28/2002	Sample Status: COMPLETE
Project No:	

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
SEMI-VOLATILES IN EFFLUENT-BNAS - METHOD 8270/625		08/06/2002	LOD NOT ACHIEVABLE DUE TO DILUTION-*D.				
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
34551	1,2,4-TRICHLOROBENZENE	120821	*D <20.	UG/L	10.		33.
34536	1,2-DICHLOROBENZENE	95501	*D <22.	UG/L	11.		37.
34346	1,2-DIPHENYLHYDRAZINE	122667	*D <10.	UG/L	5.0		17.
34566	1,3-DICHLOROBENZENE	541731	*D <22.	UG/L	11.		37.
34571	1,4-DICHLOROBENZENE	106467	*D <22.	UG/L	11.		37.
79147	2,4,5-TRICHLOROPHENOL	95954	*D <20.	UG/L	10.		33.
34621	2,4,6-TRICHLOROPHENOL	88062	*D <40.	UG/L	20.		67.
34601	2,4-DICHLOROPHENOL	120832	*D <40.	UG/L	20.		67.
34606	2,4-DIMETHYLPHENOL	105679	*D <50.	UG/L	25.		84.
34616	2,4-DINITROPHENOL	51285	*D <30.	UG/L	15.		50.
34611	2,4-DINITROTOLUENE	121142	*D <10.	UG/L	5.0		17.
34626	2,6-DINITROTOLUENE	606202	*D <20.	UG/L	10.		33.
34278	2-CHLOROETHOXY METHANE BIS	111911	*D <22.	UG/L	11.		37.
34273	2-CHLOROETHYL ETHER BIS	111444	*D <26.	UG/L	13.		43.
34581	2-CHLORONAPHTHALENE	91587	*D <20.	UG/L	10.		33.
34586	2-CHLOROPHENOL	95578	*D <56.	UG/L	28.		94.
39100	2-ETHYLHEXYL PHTHALATE BIS	117817	*D <10.	UG/L	5.0		17.
34657	2-METHYL-4,6-DINITROPHENOL	534521	*D <30.	UG/L	15.		50.
77416	2-METHYLNAPHTHALENE	91576	*D <20.	UG/L	10.		33.

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08/28/2002

Lab: 113133790

Sample: ON000273

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Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
77152	2-METHYLPHENOL	95487	*D <22.	UG/L	11.		37.
78142	2-NITROANILINE	88744	*D <20.	UG/L	10.		33.
34594	2-NITROPHENOL	88755	*D <50.	UG/L	25.		84.
34591	2-NITROPHENOL	88755	*D <30.	UG/L	15.		50.
34631	3,3'-DICHLOROBENZIDINE	91941	NA				
78300	3-NITROANILINE	99092	NA				
34636	4-BROMOPHENYL PHENYL ETHER	101553	*D <20.	UG/L	10.		33.
34452	4-CHLORO-3-METHYLPHENOL	59507	*D <22.	UG/L	11.		37.
73529	4-CHLOROANILINE	106478	NA				
34641	4-CHLOROPHENYL PHENYL ETHER	7005723	*D <20.	UG/L	10.		33.
77146	4-METHYLPHENOL	106445	*D <24.	UG/L	12.		40.
73605	4-NITROANILINE	100016	*D <100.	UG/L	50.		160.
34205	ACENAPHTHENE	83329	*D <20.	UG/L	10.		33.
34200	ACENAPHTHYLENE	208968	*D <20.	UG/L	10.		33.
34220	ANTHRACENE	120127	*D <10.	UG/L	5.0		17.
39120	BENZIDINE	92875	NA				
34526	BENZO (A) ANTHRACENE	56553	*D <20.	UG/L	10.		33.
34247	BENZO (A) PYRENE	50328	*D <20.	UG/L	10.		33.
34230	BENZO (B) FLUORANTHENE	205992	*D <20.	UG/L	10.		33.
34521	BENZO (G H I) PERLYENE	191242	*D <20.	UG/L	10.		33.
34242	BENZO (K) FLUORANTHENE	207089	*D <10.	UG/L	5.0		17.
77247	BENZOIC ACID	65850	*D <40.	UG/L	20.		67.
77147	BENZYL ALCOHOL	100516	*D <20.	UG/L	10.		33.
34283	BIS 2-CHLOROISOPROPYL ETHER	39638329	*D <24.	UG/L	12.		40.
34292	BUTYL BENZYL PHTHALATE	85687	*D <10.	UG/L	5.0		16.
34320	CHRYSENE	218019	*D <20.	UG/L	10.		33.
39110	DI-N-BUTYL PHTHALATE	84742	*D <10.	UG/L	5.0		16.
34556	DIBENZO (A H) ANTHRACENE	53703	*D <20.	UG/L	10.		33.
81302	DIBENZOFURAN	132649	*D <10.	UG/L	5.0		17.
34336	DIETHYL PHTHALATE	84662	*D <10.	UG/L	5.0		16.
34341	DIMETHYL PHTHALATE	131113	*D <20.	UG/L	10.		33.
34596	DIOCTYL PHTHALATE	117840	*D <10.	UG/L	5.0		17.
34366	FLUORANTHENE	206440	*D <10.	UG/L	5.0		17.
34381	FLUORENE	86737	*D <10.	UG/L	5.0		17.

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Lab: 113133790

Sample: ON000273

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<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
39700	HEXACHLOROBENZENE	118741	*D <20.	UGL	10.		33.
34391	HEXACHLOROBUTADIENE	87683	*D <20.	UGL	10.		33.
34386	HEXACHLOROCYCLOPENTADIENE	77474	*D <20.	UGL	10.		33.
34396	HEXACHLOROETHANE	67721	*D <20.	UGL	10.		33.
34403	INDENO (1,2,3-C D) PYRENE	193395	*D <20.	UGL	10.		33.
34408	ISOPHORONE	78591	*D <20.	UGL	10.		33.
34428	N-NITROSODI-N-PROPYLAMINE	621647	*D <20.	UGL	10.		33.
34438	N-NITROSODIMETHYLAMINE	62759	*D <20.	UGL	10.		33.
34433	N-NITROSODIPHENYLAMINE	86306	*D <20.	UGL	10.		33.
34696	NAPHTHALENE	91203	*D <24.	UGL	12.		40.
34447	NITROBENZENE	98953	*D <24.	UGL	12.		40.
39032	PENTACHLOROPHENOL	87865	*D <30.	UGL	15.		50.
34461	PHENANTHRENE	85018	*D <10.	UGL	5.0		17.
34694	PHENOL	108952	*D <34.	UGL	17.		57.
34469	PYRENE	129000	*D <20.	UGL	10.		33.

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>					
TEMPERATURE ON RECEIPT-ICED - O9507/31/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
136	TEMPERATURE AT LAB	E1645696	ICED			9999999	

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>					
SEMI-VOLATILES-EFFLUENT-PREP-BNAS08/01/2002							
METHOD 3510C							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
99478	PREP SEMI VOLATILES, EPA METHOD 3510C		COMPLE TE			0	

Sample Collector(s) John J Hnat & Washington Methu	Title / Work Station Hydrogeologist/Water Spec SER HQ WDNR	Telephone Number (include area code) (414) 263-8644
Property Owner Ed Kaiser Trust	Property Address 4763 North 32nd St., Milwaukee, WI	Telephone Number (include area code) (941) 922-6622

Split Samples: Offered? Yes No
Accepted? Yes No

Accepted By (Signature): _____

Field ID No.	Date	Time	No. of Containers	Station Location Sample Description	Lab ID Number	Lab Use Only			
						Cracked / Broken	Improperly Sealed	Good Condition	Other Comments
Sample 01	07/30/2002	1003	6	High Cap Well #1 @ 60 Ft: 6-Priority Pollutant Scan Liter Bottles (Non-VOC) HC001					

I hereby certify that I received, properly handled, and disposed of these samples as noted below:

Relinquished By (Signature) <i>Washington Methu</i>	Date / Time 7/30/02 1445	Received By (Signature)	Date / Time
Relinquished By (Signature) <i>John Hnat</i>	Date / Time 7/30/02	Received By (Signature)	Date / Time
Relinquished By (Signature)	Date / Time	Received for Laboratory By (Signature)	Date / Time

Disposition of Unused Portion Sample:

Dispose

Return

Retain for 14 Days

Other _____

License, ID, Permit or STORET Number <u>3 4 1 0 5 5 7 7 0</u>	Point, Well or Outfall Number <u>H C 0 0 1</u>	Field Number <u>S A M P L E 0 1</u>	County No. <u>41</u>	Program Code <u>R R</u>	Region <u>2</u>
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Waterbody Number	Sample Address or Location <u>High Cap Well, Kaiser Prop., 4763 N. 32nd St., Milwaukee, WI</u>
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Sample Point Description / Sampling Device
 Dual Aquifer High Capacity Well #1 North End of Property

Send Report To		Sample Type (select one)	
DNR User ID <u>hnatj</u>	Date Results Needed (mm/dd/yyyy) <u>08/05/2002</u>	<input type="checkbox"/> SU Surface Water	<input type="checkbox"/> EF Effluent (Treated Wastewater)
Name <u>Hnat, John</u>		<input type="checkbox"/> NP Storm Water	<input type="checkbox"/> IF Influent (Untreated Wastewater)
Address <u>WDNR, 2300 Dr. M L King Dr.</u>		<input type="checkbox"/> SE Sediment	<input type="checkbox"/> MW Monitoring Well
City <u>Milwaukee</u>	State <u>WI</u>	<input type="checkbox"/> SL Sludge	<input type="checkbox"/> LY Lysimeter
Account Number	Collected By <u>J. Hnat & Washington Methu</u>	<input type="checkbox"/> LE Leachate	<input type="checkbox"/> SO Soil
Lakes Grant or Project Number	Telephone Number <u>(414) 263-8644</u>	<input type="checkbox"/> TI Tissue	<input type="checkbox"/> OI Oil
Begin or Grab Date (mm/dd/yyyy) <u>07/30/2002</u>	Begin Time (24-hr clock) <u>1003</u>	<input type="checkbox"/> E Public Drinking Entry Point	<input type="checkbox"/> OW Waste
End Date - For Composite Samples Only (mm/dd/yyyy) <u>07/30/2002</u>	End Time (24-hr clock) - For Composite Samples Only <u>1110</u>	<input checked="" type="checkbox"/> W Public Drinking Well/Source	<input type="checkbox"/> PO Private Well
		<input type="checkbox"/> D Public Drinking Distribution	<input type="checkbox"/> X Non-Potable Well
		Sample Reason (Drinking Water - select one)	
		<input type="checkbox"/> N New Well	<input type="checkbox"/> C Confirmation (follow up)
		<input checked="" type="checkbox"/> I Investigation	<input type="checkbox"/> D Compliance
		<input type="checkbox"/> W Raw water (drinking)	
		<input type="checkbox"/> E Enforcement	Depth of Sample (feet or meters) <u>F</u> <u>6</u> <u>0</u> For M
Is Sample Disinfected? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, how? _____			

VOCs Water / Soil (check one of the following)

- Quantification (EPA Method 8260)
- Quantification (Drinking Water-EPA Method 524.2)

Priority Pollutant Scan (Non-VOC)

- Priority Pollutant Pesticides
- Priority Pollutant Base/Neutral/Acid

PCBs

- Aroclor Identification
- Congeners
- Coplanar

Petroleum Products

- Gasoline
- Fuel Oil #1
- Fuel Oil #2
- GRO
- DRO

- PAHs (GC/MS)
- PAHs (HPLC)

Pesticides

- Carbaryl
- Carbofuran
- 2,4-D
- 2,4,5-TP
- 2,4,5-T
- Chloramben
- Picloram
- Dicamba

- Phorate
- Terbufos
- Atrazine
- Deethylatrazine
- Deisopropylatrazine
- Diaminoatrazine
- Alachlor
- Metalachlor
- Cyanazine
- Metribuzin
- Simazine
- Prometon
- Aldicarb & other carbamates
- Dimethoate
- Dinoseb
- DCPA
- Ethylene Dibromide
- Linuron
- Fonofos
- Butylate
- EPTC
- Formaldehyde (Water Only)

Toxicity Characteristic Leaching Procedure (TCLP)
 (Check one or more of the following)

- VOCs - TCLP
- Base/Neutral Extractables - TCLP
- 2,4-Dinitrotoluene
- Hexachlorobenzene
- Hexachlorobutadiene
- Nitrobenzene
- Pyridine
- Acid Extractables - TCLP
- 2-Methylphenol
- 3 & 4-Methylphenol
- Pentachlorophenol
- 2,4,6-Trichlorophenol
- 2,4,5-Trichlorophenol
- Ignitability (Haz. Waste Char.)
- Acid Herbicides - TCLP
- 2,4-D
- 2,4,5-TP (Silvex)
- Chlorinated Pesticides - TCLP
- Chlordane
- Endrin
- Heptachlor
- Heptachlor Epoxide
- Lindane
- Methoxychlor
- Toxaphene

Additional parameters

For Lab Use: Temp °C _____ Analyst _____	Date Received _____	Sample ID _____
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Sample Collector(s) John J Hnat & Washington Methu	Title / Work Station Hydrogeologist/Water Spec SER HQ WDNR	Telephone Number (include area code) (414) 263-8644
Property Owner Ed Kaiser Trust	Property Address 4763 North 32nd St., Milwaukee, WI	Telephone Number (include area code) (941) 922-6622

Split Samples: Offered? Yes No
Accepted? Yes No

Accepted By (Signature): _____

Field ID No.	Date	Time	No. of Containers	Station Location Sample Description	Lab ID Number	Lab Use Only			
						Cracked / Broken	Improperly Sealed	Good Condition	Other Comments
Sample 01	07/30/2002	1003	9	High Cap Well #1 @ 60 Ft: 3-PCBs Liter, 3-Liter Empty, 1-250 ml Cyanide, 2-RCRA Metals 250 ml, HC001					

I hereby certify that I received, properly handled, and disposed of these samples as noted below:

Relinquished By (Signature) <i>Washington Methu</i>	Date / Time 7/30/02	Received By (Signature) <i>[Signature]</i>	Date / Time 7/30/02
Relinquished By (Signature) <i>[Signature]</i>	Date / Time 7/30/02	Received By (Signature) <i>[Signature]</i>	Date / Time 7/30/02
Relinquished By (Signature)	Date / Time	Received for Laboratory By (Signature)	Date / Time

Disposition of Unused Portion Sample:

Dispose

Return

Retain for 14 Days

Other _____

License, ID, Permit or STORET Number <u>3 4 1 0 5 5 7 7 0</u>	Point, Well or Outfall Number <u>H C 0 0 1</u>	Field Number <u>S A M P L E 0 1</u>	County No. <u>41</u>	Program Code <u>R R</u>	Region <u>2</u>
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Waterbody Number	Sample Address or Location <u>High Cap Well #1, Kaiser Prop. 4763 N. 32nd St., Milwaukee, WI</u>
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Sample Point Description / Sampling Device
Dual Aquifer High Capacity Well #1 North End Of Property/Bailer 60ft

Send Report To		Sample Type (select one)	
DNR User ID <u>hnatj</u>	Date Results Needed (mm/dd/yyyy) <u>08/05/2002</u>	<input type="checkbox"/> SU Surface Water	<input type="checkbox"/> EF Effluent (Treated Wastewater)
Name (Last, First) <u>Hnat, John</u>		<input type="checkbox"/> NP Storm Water	<input type="checkbox"/> IF Influent (Untreated Wastewater)
Address <u>WDNR, 2300 Dr. M L King Dr</u>		<input type="checkbox"/> SE Sediment	<input type="checkbox"/> MW Monitoring Well
City <u>Milwaukee</u>		<input type="checkbox"/> SL Sludge	<input type="checkbox"/> LY Lysimeter
State <u>WI</u>		<input type="checkbox"/> LE Leachate	<input type="checkbox"/> SO Soil
ZIP <u>53212</u>		<input type="checkbox"/> TI Tissue	<input type="checkbox"/> OI Oil
Account Number <u>R R 0 2 4</u>	Collected By <u>J. Hnat & Washington Methu</u>	<input type="checkbox"/> E Public Drinking Entry Point	<input type="checkbox"/> OW Waste
Lakes Grant or Project Number	Telephone Number <u>(414) 263-8644</u>	<input checked="" type="checkbox"/> W Public Drinking Well/Source	<input type="checkbox"/> PO Private Well
Begin or Grab Date (mm/dd/yyyy) <u>07/30/2002</u>	Begin Time (24-hr clock) <u>1003</u>	<input type="checkbox"/> D Public Drinking Distribution	<input type="checkbox"/> X Non-Potable Well
End Date - For Composite Samples Only (mm/dd/yyyy) <u>07/30/2002</u>	End Time (24-hr clock) - For Composite Samples Only <u>1110</u>	Sample Reason (Drinking Water - select one)	
		<input type="checkbox"/> N New Well	<input type="checkbox"/> C Confirmation (follow up)
		<input checked="" type="checkbox"/> I Investigation	<input type="checkbox"/> D Compliance
		<input type="checkbox"/> W Raw water (drinking)	
		<input type="checkbox"/> E Enforcement	Depth of Sample (feet or meters) $\frac{F}{F \text{ or } M}$ <u>6 0</u>
Is Sample Disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, how? _____			

If field filtered, indicate by checking the box on this sheet and noting on the lid of the sample bottle.

Plastic Quart Bottles

Sample Bottle Field Filtered? (Check box if yes)

<input type="checkbox"/> Total Solids	<input type="checkbox"/> Alkalinity, pH, & Conductivity
<input type="checkbox"/> Vol. Total Solids	<input type="checkbox"/> pH only (non-Waste or non-Compliance)
<input type="checkbox"/> Susp. Solids (500 ml needed)	<input type="checkbox"/> Chloride
<input type="checkbox"/> Vol. Susp. Solids	<input type="checkbox"/> Color
<input type="checkbox"/> Total Dissolved Solids	<input type="checkbox"/> Fluoride
<input type="checkbox"/> CBODs Total (carbonaceous)	<input type="checkbox"/> Sulfate
<input type="checkbox"/> BODs Total (900 ml needed)	<input type="checkbox"/> Sulfide (notify lab before collecting sample)
<input type="checkbox"/> BODs Dissolved	<input type="checkbox"/> Turbidity
BOD Estimate Required:	<input type="checkbox"/> Surfactants (MBAs)
_____ mg/l	<input type="checkbox"/> MBAs Screening
<input type="checkbox"/> Cyanide, Total	
<input type="checkbox"/> Cyanide, Amendable to Chlorination	
<input type="checkbox"/> Chlorophyl A (<input type="checkbox"/> Uncorrected <input type="checkbox"/> Corrected)	
(if Field Filtered, give ml _____ filtered)	

60 ml Bottle

Sample Bottle Field Filtered? (Check box if yes)

<input type="checkbox"/> NO ₂ + NO ₃ as Nitrogen (Drinking Water)	<input type="checkbox"/> Diss.-Orthophosphate
<input type="checkbox"/> Nitrite (NO ₂) as Nitrogen	<input type="checkbox"/> Diss. Silica

Quart Mason Jar (Also TCLP Metals)

<input type="checkbox"/> Oil & Grease (3 qts)	<input type="checkbox"/> pH (Waste Samples Only)
---	--

250 ml Bottle for Nutrients or Metals - Check each of the boxes that apply

Metals Bottle 250 ml (Acidify W/Nitric Acid)

Sample Bottle Field Filtered? (Check box if yes)

Low Level Metals (e.g., clean sampling) **Note:** Special Bottles Needed

TCLP (Toxicity Characteristic Leaching Procedure) (*TC Regulated Metals)(Use Mason Jar)

For non-drinking waters, total recoverable metals will be run unless otherwise instructed.

<input type="checkbox"/> Aluminum	<input type="checkbox"/> Chromium, Hexavalent	<input type="checkbox"/> Molybdenum
<input type="checkbox"/> Antimony	<input type="checkbox"/> Cobalt	<input type="checkbox"/> Nickel
<input checked="" type="checkbox"/> Arsenic*	<input type="checkbox"/> Copper	<input type="checkbox"/> Potassium
<input checked="" type="checkbox"/> Barium*	<input type="checkbox"/> Hardness-as CaCO ₃	<input checked="" type="checkbox"/> Selenium
<input type="checkbox"/> Beryllium	<input type="checkbox"/> Iron	<input checked="" type="checkbox"/> Silver
<input type="checkbox"/> Boron	<input checked="" type="checkbox"/> Lead	<input type="checkbox"/> Sodium
<input checked="" type="checkbox"/> Cadmium*	<input type="checkbox"/> Magnesium	<input type="checkbox"/> Thallium
<input type="checkbox"/> Calcium	<input type="checkbox"/> Manganese	<input type="checkbox"/> Vanadium
<input checked="" type="checkbox"/> Chromium, Total*	<input checked="" type="checkbox"/> Mercury*	<input type="checkbox"/> Zinc

Nutrients Bottle 250 ml (Acidify W/Sulfuric Acid)

Sample Bottle Field Filtered? (Check box if yes)

<input type="checkbox"/> Tot.-Phosphorus	<input type="checkbox"/> NO ₂ + NO ₃ as Nitrogen	<input type="checkbox"/> Total Kjeldahl-N
<input type="checkbox"/> Ammonia-N	<input type="checkbox"/> Chemical Oxygen Demand (COD)	

Where required, has sample been chemically preserved and has pH been checked?

Yes No

Initials _____ Date _____

License, ID, Permit or STORET Number <u>3 4 1 0 5 5 7 7 0</u>	Point, Well or Outfall Number <u>H C 0 0 1</u>	Field Number <u>S A M P L E 0 1</u>	County No. <u>41</u>	Program Code <u>R R</u>	Region <u>2</u>
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Waterbody Number _____	Sample Address or Location <u>High Cap Well #1, Kaiser Prop. 4763 N. 32nd St., Milwaukee, WI</u>
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Sample Point Description / Sampling Device
Dual Aquifer High Capacity Well #1 North End Of Property/Bailer 60ft

Send Report To		Sample Type (select one)	
DNR User ID <u>hnatj</u>	Date Results Needed (mm/dd/yyyy) <u>08/05/2002</u>	<input type="checkbox"/> SU Surface Water	<input type="checkbox"/> EF Effluent (Treated Wastewater)
Name (Last, First) <u>Hnat, John</u>		<input type="checkbox"/> NP Storm Water	<input type="checkbox"/> IF Influent (Untreated Wastewater)
Address <u>WDNR, 2300 Dr. M L King Dr</u>		<input type="checkbox"/> SE Sediment	<input type="checkbox"/> MW Monitoring Well
City <u>Milwaukee</u>	State <u>WI</u>	<input type="checkbox"/> SL Sludge	<input type="checkbox"/> LY Lysimeter
Account Number <u>R R 0 2 4</u>	Collected By <u>J. Hnat & Washington Methu</u>	<input type="checkbox"/> LE Leachate	<input type="checkbox"/> SO Soil
Lakes Grant or Project Number _____	Telephone Number <u>(414) 263-8644</u>	<input type="checkbox"/> TI Tissue	<input type="checkbox"/> OI Oil
Begin or Grab Date (mm/dd/yyyy) <u>07/30/2002</u>	Begin Time (24-hr clock) <u>1003</u>	<input type="checkbox"/> E Public Drinking Entry Point	<input type="checkbox"/> OW Waste
End Date - For Composite Samples Only (mm/dd/yyyy) <u>07/30/2002</u>	End Time (24-hr clock) - For Composite Samples Only <u>1110</u>	<input checked="" type="checkbox"/> W Public Drinking Well/Source	<input type="checkbox"/> PO Private Well
		<input type="checkbox"/> D Public Drinking Distribution	<input type="checkbox"/> X Non-Potable Well
		Sample Reason (Drinking Water - select one)	
		<input type="checkbox"/> N New Well	<input type="checkbox"/> C Confirmation (follow up)
		<input checked="" type="checkbox"/> I Investigation	<input type="checkbox"/> D Compliance
		<input type="checkbox"/> W Raw water (drinking)	
		<input type="checkbox"/> E Enforcement	Depth of Sample (feet or meters) $\frac{F}{\text{For M}}$ <u>6 0</u>
		Is Sample Disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, how? _____	

If field filtered, indicate by checking the box on this sheet and noting on the lid of the sample bottle.

Plastic Quart Bottles

Sample Bottle Field Filtered? (Check box if yes)

<input type="checkbox"/> Total Solids	<input checked="" type="checkbox"/> Alkalinity, pH, & Conductivity
<input type="checkbox"/> Vol. Total Solids	<input type="checkbox"/> pH only (non-Waste or non-Compliance)
<input type="checkbox"/> Susp. Solids (500 ml needed)	<input type="checkbox"/> Chloride
<input type="checkbox"/> Vol. Susp. Solids	<input type="checkbox"/> Color
<input type="checkbox"/> Total Dissolved Solids	<input type="checkbox"/> Fluoride
<input type="checkbox"/> CBODs Total (carbonaceous)	<input type="checkbox"/> Sulfate
<input type="checkbox"/> BODs Total (900 ml needed)	<input type="checkbox"/> Sulfide (notify lab before collecting sample)
<input type="checkbox"/> BODs Dissolved	<input type="checkbox"/> Turbidity
BOD Estimate Required: _____ mg/l	<input type="checkbox"/> Surfactants (MBAs)
<input checked="" type="checkbox"/> Cyanide, Total	<input type="checkbox"/> MBAs Screening
<input type="checkbox"/> Cyanide, Amendable to Chlorination	
<input type="checkbox"/> Chlorophyll A (<input type="checkbox"/> Uncorrected <input type="checkbox"/> Corrected) (if Field Filtered, give ml _____ filtered)	

60 ml Bottle

Sample Bottle Field Filtered? (Check box if yes)

<input type="checkbox"/> NO ₂ + NO ₃ as Nitrogen (Drinking Water)	<input type="checkbox"/> Diss.-Orthophosphate
<input type="checkbox"/> Nitrite (NO ₂) as Nitrogen	<input type="checkbox"/> Diss. Silica

Quart Mason Jar (Also TCLP Metals)

<input type="checkbox"/> Oil & Grease (3 qts)	<input type="checkbox"/> pH (Waste Samples Only)
---	--

250 ml Bottle for Nutrients or Metals - Check each of the boxes that apply

Metals Bottle 250 ml (Acidify W/Nitric Acid)

Sample Bottle Field Filtered? (Check box if yes)

Low Level Metals (e.g., clean sampling) **Note:** Special Bottles Needed

TCLP (Toxicity Characteristic Leaching Procedure) (*TC Regulated Metals)(Use Mason Jar)

For non-drinking waters, total recoverable metals will be run unless otherwise instructed.

<input type="checkbox"/> Aluminum	<input type="checkbox"/> Chromium, Hexavalent	<input type="checkbox"/> Molybdenum
<input type="checkbox"/> Antimony	<input type="checkbox"/> Cobalt	<input type="checkbox"/> Nickel
<input type="checkbox"/> Arsenic*	<input type="checkbox"/> Copper	<input type="checkbox"/> Potassium
<input type="checkbox"/> Barium*	<input type="checkbox"/> Hardness-as CaCO ₃	<input type="checkbox"/> Selenium
<input type="checkbox"/> Beryllium	<input type="checkbox"/> Iron	<input type="checkbox"/> Silver
<input type="checkbox"/> Boron	<input type="checkbox"/> Lead	<input type="checkbox"/> Sodium
<input type="checkbox"/> Cadmium*	<input type="checkbox"/> Magnesium	<input type="checkbox"/> Thallium
<input type="checkbox"/> Calcium	<input type="checkbox"/> Manganese	<input type="checkbox"/> Vanadium
<input type="checkbox"/> Chromium, Total*	<input type="checkbox"/> Mercury*	<input type="checkbox"/> Zinc

Nutrients Bottle 250 ml (Acidify W/Sulfuric Acid)

Sample Bottle Field Filtered? (Check box if yes)

<input type="checkbox"/> Tot.-Phosphorus	<input type="checkbox"/> NO ₂ + NO ₃ as Nitrogen	<input type="checkbox"/> Total Kjeldahl-N
<input type="checkbox"/> Ammonia-N	<input type="checkbox"/> Chemical Oxygen Demand (COD)	

Where required, has sample been chemically preserved and has pH been checked?

Yes No

Initials _____ Date _____

License, ID, Permit or STORET Number <u>3 4 1 0 5 5 7 7 0</u>	Point, Well or Outfall Number <u>H C 0 0 1</u>	Field Number <u>S A M P L E 0 1</u>	County No. <u>41</u>	Program Code <u>R R</u>	Region <u>2</u>
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Waterbody Number _____ Sample Address or Location
High Cap Well, Kaiser Prop., 4763 N. 32nd St., Milwaukee, WI

Sample Point Description / Sampling Device
Dual Aquifer High Capacity Well #1 North End of Property

Send Report To		Sample Type (select one)	
DNR User ID <u>hnatj</u>	Date Results Needed (mm/dd/yyyy) <u>08/05/2002</u>	<input type="checkbox"/> SU Surface Water	<input type="checkbox"/> EF Effluent (Treated Wastewater)
Name <u>Hnat, John</u>		<input type="checkbox"/> NP Storm Water	<input type="checkbox"/> IF Influent (Untreated Wastewater)
Address <u>WDNR, 2300 Dr. M L King Dr.</u>		<input type="checkbox"/> SE Sediment	<input type="checkbox"/> MW Monitoring Well
City <u>Milwaukee</u>	State ZIP <u>WI 53212</u>	<input type="checkbox"/> SL Sludge	<input type="checkbox"/> LY Lysimeter
Account Number	Collected By <u>J. Hnat & Washington Methu</u>	<input type="checkbox"/> LE Leachate	<input type="checkbox"/> SO Soil
Lakes Grant or Project Number	Telephone Number <u>(414) 263-8644</u>	<input type="checkbox"/> TI Tissue	<input type="checkbox"/> OI Oil
Begin or Grab Date (mm/dd/yyyy) <u>07/30/2002</u>	Begin Time (24-hr clock) <u>1003</u>	<input type="checkbox"/> E Public Drinking Entry Point	<input type="checkbox"/> OW Waste
End Date - For Composite Samples Only (mm/dd/yyyy) <u>07/30/2002</u>	End Time (24-hr clock) - For Composite Samples Only <u>1110</u>	<input checked="" type="checkbox"/> W Public Drinking Well/Source	<input type="checkbox"/> PO Private Well
		<input type="checkbox"/> D Public Drinking Distribution	<input type="checkbox"/> X Non-Potable Well
		Sample Reason (Drinking Water - select one)	
		<input type="checkbox"/> N New Well	<input type="checkbox"/> C Confirmation (follow up)
		<input checked="" type="checkbox"/> I Investigation	<input type="checkbox"/> D Compliance
		<input type="checkbox"/> W Raw water (drinking)	
		<input type="checkbox"/> E Enforcement	Depth of Sample (feet or meters) <u>F 6 0</u> For M
Is Sample Disinfected? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, how? _____			

VOCs Water / Soil (check one of the following)

Quantification (EPA Method 8260)
 Quantification (Drinking Water-EPA Method 524.2)

Priority Pollutant Scan (Non-VOC)

Priority Pollutant Pesticides
 Priority Pollutant Base/Neutral/Acid

PCBs

Aroclor Identification
 Congeners
 Coplanar

Petroleum Products

Gasoline
 Fuel Oil #1
 Fuel Oil #2
 GRO
 DRO

PAHs (GC/MS)
 PAHs (HPLC)

Pesticides

Carbaryl
 Carbofuran
 2,4-D
 2,4,5-TP
 2,4,5-T
 Chloramben
 Picloram
 Dicamba

Phorate
 Terbufos
 Atrazine
 Deethylatrazine
 Deisopropylatrazine
 Diaminoatrazine
 Alachlor
 Metalachlor
 Cyanazine
 Metribuzin
 Simazine
 Prometon
 Aldicarb & other carbamates
 Dimethoate
 Dinoseb
 DCPA
 Ethylene Dibromide
 Linuron
 Fonofos
 Butylate
 EPTC
 Formaldehyde (Water Only)

Toxicity Characteristic Leaching Procedure (TCLP)
 (Check one or more of the following)

VOCs - TCLP
 Base/Neutral Extractables - TCLP
 2,4-Dinitrotoluene
 Hexachlorobenzene
 Hexachlorobutadiene
 Nitrobenzene
 Pyridine
 Acid Extractables - TCLP
 2-Methylphenol
 3 & 4-Methylphenol
 Pentachlorophenol
 2,4,6-Trichlorophenol
 2,4,5-Trichlorophenol

Acid Herbicides - TCLP
 2,4-D
 2,4,5-TP (Silvex)
 Chlorinated Pesticides - TCLP
 Chlordane
 Endrin
 Heptachlor
 Heptachlor Epoxide
 Lindane
 Methoxychlor
 Toxaphene

Ignitability (Haz. Waste Char.)

Additional parameters

For Lab Use: Temp °C _____ Analyst _____	Date Received _____	Sample ID _____
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Sample Collector(s) John J Hnat & Washington Methu	Title / Work Station Hydrogeologist/Water Spec SER HQ WDNR	Telephone Number (include area code) (414) 263-8644
Property Owner Ed Kaiser Trust	Property Address 4763 North 32nd St., Milwaukee, WI	Telephone Number (include area code) (941) 922-6622

Split Samples: Offered? Yes No
 Accepted? Yes No

Accepted By (Signature): _____

Field ID No.	Date	Time	No. of Containers	Station Location Sample Description	Lab ID Number	Lab Use Only			
						Cracked / Broken	Improperly Sealed	Good Condition	Other Comments
Sample 01	07/30/2002	1003	12	High Cap Well #1 @ 60 Ft: 5-VOCs full, 6-VOCs empty, 1-Trip Blank, HC001, Kaiser Property North End					

I hereby certify that I received, properly handled, and disposed of these samples as noted below:

Relinquished By (Signature) <i>Washington Methu</i>	Date / Time 7/30/2002	Received By (Signature) <i>[Signature]</i>	Date / Time
Relinquished By (Signature) <i>[Signature]</i>	Date / Time 7/30/02 1445	Received By (Signature)	Date / Time
Relinquished By (Signature)	Date / Time	Received for Laboratory By (Signature)	Date / Time

Disposition of Unused Portion Sample:

Dispose

Return

Retain for 14 Days

Other _____

License, ID, Permit or STORET Number <u>3 4 1 0 5 5 7 7 0</u>	Point, Well or Outfall Number <u>H C 0 0 1</u>	Field Number <u>S A M P L E 0 1</u>	County No. <u>41</u>	Program Code <u>R R</u>	Region <u>2</u>
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Waterbody Number _____ Sample Address or Location
High Cap Well, Kaiser Prop., 4763 N. 32nd St., Milwaukee, WI

Sample Point Description / Sampling Device
Dual Aquifer High Capacity Well #1 North End of Property

Send Report To		Sample Type (select one)	
DNR User ID <u>hnatj</u>	Date Results Needed (mm/dd/yyyy) <u>08/05/2002</u>	<input type="checkbox"/> SU Surface Water	<input type="checkbox"/> EF Effluent (Treated Wastewater)
Name <u>Hnat, John</u>		<input type="checkbox"/> NP Storm Water	<input type="checkbox"/> IF Influent (Untreated Wastewater)
Address <u>WDNR, 2300 Dr. M L King Dr.</u>		<input type="checkbox"/> SE Sediment	<input type="checkbox"/> MW Monitoring Well
City <u>Milwaukee</u>	State ZIP <u>WI 53212</u>	<input type="checkbox"/> SL Sludge	<input type="checkbox"/> LY Lysimeter
Account Number	Collected By <u>J. Hnat & Washington Methu</u>	<input type="checkbox"/> LE Leachate	<input type="checkbox"/> SO Soil
Lakes Grant or Project Number	Telephone Number <u>(414) 263-8644</u>	<input type="checkbox"/> TI Tissue	<input type="checkbox"/> OI Oil
Begin or Grab Date (mm/dd/yyyy) <u>07/30/2002</u>	Begin Time (24-hr clock) <u>1003</u>	<input type="checkbox"/> E Public Drinking Entry Point	<input type="checkbox"/> OW Waste
End Date - For Composite Samples Only (mm/dd/yyyy) <u>07/30/2002</u>	End Time (24-hr clock) - For Composite Samples Only <u>1110</u>	<input checked="" type="checkbox"/> W Public Drinking Well/Source	<input type="checkbox"/> PO Private Well
		<input type="checkbox"/> D Public Drinking Distribution	<input type="checkbox"/> X Non-Potable Well
		Sample Reason (Drinking Water - select one)	
		<input type="checkbox"/> N New Well	<input type="checkbox"/> C Confirmation (follow up)
		<input checked="" type="checkbox"/> I Investigation	<input type="checkbox"/> D Compliance
		<input type="checkbox"/> W Raw water (drinking)	
		<input type="checkbox"/> E Enforcement	Depth of Sample (feet or meters) <u>F</u> <u>6</u> <u>0</u> For M
		Is Sample Disinfected? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, how? _____	

VOCs Water / Soil (check one of the following)

Quantification (EPA Method 8260)
 Quantification (Drinking Water-EPA Method 524.2)

Priority Pollutant Scan (Non-VOC)

Priority Pollutant Pesticides
 Priority Pollutant Base/Neutral/Acid

PCBs

Aroclor Identification
 Congeners
 Coplanar

Petroleum Products

Gasoline
 Fuel Oil #1
 Fuel Oil #2
 GRO
 DRO

PAHs (GC/MS)
 PAHs (HPLC)

Pesticides

Carbaryl
 Carbofuran
 2,4-D
 2,4,5-TP
 2,4,5-T
 Chlorazoxen
 Picloram
 Dicamba

Phorate
 Terbufos
 Atrazine
 Deethylatrazine
 Deisopropylatrazine
 Diaminoatrazine
 Alachlor
 Metalachlor
 Cyanazine
 Metribuzin
 Simazine
 Prometon
 Aldicarb & other carbamates
 Dimethoate
 Dinoseb
 DCPA
 Ethylene Dibromide
 Linuron
 Fonofos
 Butylate
 EPTC
 Formaldehyde (Water Only)

Toxicity Characteristic Leaching Procedure (TCLP)
 (Check one or more of the following)

VOCs - TCLP
 Base/Neutral Extractables - TCLP
 2,4-Dinitrotoluene
 Hexachlorobenzene
 Hexachlorobutadiene
 Nitrobenzene
 Pyridine
 Acid Extractables - TCLP
 2-Methylphenol
 3 & 4-Methylphenol
 Pentachlorophenol
 2,4,6-Trichlorophenol
 2,4,5-Trichlorophenol
 Ignitability (Haz. Waste Char.)

Acid Herbicides - TCLP
 2,4-D
 2,4,5-TP (Silvex)
 Chlorinated Pesticides - TCLP
 Chlordane
 Endrin
 Heptachlor
 Heptachlor Epoxide
 Lindane
 Methoxychlor
 Toxaphene

Additional parameters

For Lab Use: Temp °C _____ Analyst _____	Date Received _____	Sample ID _____
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John Hnat - WDNR
2300 Dr Martin Luther King Dr
Milwaukee WI 53212

ENFORCEMENT

Inorganic Chemistry Unit
Wis. State Lab. of Hygiene
2601 Agriculture Drive
P.O. Box 7996
Madison, WI 53707-7996

Collector: METHU

District/Area: South East

Phone Number:

Sample Number(s): IN009696-IN009697

Report date: 11/15/02

*As per your instructions, we will retain the unused portions of the attached sample(s) for 0 days beyond the Report date.

Wisconsin Department of Natural Resources

Laboratory Report

11/18/2002

Lab: 113133790

Sample: IN009696

Page 1 of 1

Laboratory: Wisconsin State Laboratory of Hygiene
 2601 Agriculture Dr
 Madison WI 53707
 Phone: 800-442-4618 Fax Phone: 608-224-6276

DNR ID 113133790

Sample:

Field #: SAMPLE02	Sample #: IN009696
Collection Start: 10/17/2002 03:28 pm	Collection End:
Collected by: METHU	Waterbody/Outfall Id: HC001
ID #: 341055770	ID Point #:
County: Milwaukee	Account #: RR024
Sample Location: HIGH CAP WELL #1 KAISER PROP 4763 N 32ND ST MILW WI	
Sample Description: DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY/PUMP	
Sample Source: W	Sample Depth: F400
Date Reported: 11/15/2002	Sample Status: COMPLETE
Project No:	

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
CYANIDE (SM 4500CN-E)		10/29/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
720	CYANIDE	57125	ND	MGL	0.004		0.012

Analysis Method		Analysis Date	Lab Comment				
FIELD TESTS							
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
32	CLOUD COVER	E1641711	100	%			
400	PH FIELD	E1644285	6.8	SU			
10	TEMPERATURE FIELD	E1645704	11.6	C			

Analysis Method		Analysis Date	Lab Comment				
TEMPERATURE ON RECEIPT-ICED		10/18/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
136	TEMPERATURE AT LAB	E1645696	ICED	C		0	

License, ID, Permit or STORET Number <u>3 4 1 0 5 5 7 7 0</u>	Point, Well or Outfall Number <u>H C 0 0 1</u>	Field Number <u>S A M P L E 0 2</u>	County No. <u>41</u>	Program Code <u>R R</u>	Region <u>2</u>
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Waterbody Number _____ Sample Address or Location
High Cap Well #1 Kaiser Prop 4763 N 32nd Sr Milw WI

Sample Point Description / Sampling Device
Dual Aquifer High Capacity Well #1 North End of Property/Pump

Send Report To		Sample Type (select one)	
DNR User ID <u>hnatj</u>	Date Results Needed (mm/dd/yyyy) <u>11/01/2002</u>	<input type="checkbox"/> SU Surface Water	<input type="checkbox"/> EF Effluent (Treated Wastewater)
Name (Last, First) <u>Hnat, John</u>		<input type="checkbox"/> NP Storm Water	<input type="checkbox"/> IF Influent (Untreated Wastewater)
Address <u>WDNR 2300 Dr M L King Dr</u>		<input type="checkbox"/> SE Sediment	<input type="checkbox"/> MW Monitoring Well
City <u>Milwaukee</u>	State <u>WI</u>	<input type="checkbox"/> SL Sludge	<input type="checkbox"/> LY Lysimeter
ZIP <u>53212</u>		<input type="checkbox"/> LE Leachate	<input type="checkbox"/> SO Soil
Account Number <u>R R 0 2 4</u>	Collected By <u>J Hnat & Washington Methu</u>	<input type="checkbox"/> TI Tissue	<input type="checkbox"/> OI Oil
Lakes Grant or Project Number	Telephone Number <u>(414) 263-8644</u>	<input type="checkbox"/> E Public Drinking Entry Point	<input type="checkbox"/> OW Waste
Begin or Grab Date (mm/dd/yyyy) <u>10/17/2002</u>	Begin Time (24-hr clock) <u>1528</u>	<input checked="" type="checkbox"/> W Public Drinking Well/Source	<input type="checkbox"/> PO Private Well
End Date - For Composite Samples Only (mm/dd/yyyy)	End Time (24-hr clock) - For Composite Samples Only	<input type="checkbox"/> D Public Drinking Distribution	<input type="checkbox"/> X Non-Potable Well
		Sample Reason (Drinking Water - select one)	
		<input type="checkbox"/> N New Well	<input checked="" type="checkbox"/> C Confirmation (follow up)
		<input type="checkbox"/> I Investigation	<input type="checkbox"/> D Compliance
		<input type="checkbox"/> W Raw water (drinking)	
		<input type="checkbox"/> E Enforcement	Depth of Sample (feet or meters) <u>F 4 0 0</u> For M
		Is Sample Disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, how? _____	



If field filtered, indicate by checking the box on this sheet and noting on the lid of the sample bottle.

Plastic Quart Bottles 250 ml

Sample Bottle Field Filtered? (Check box if yes)

<input type="checkbox"/> Total Solids	<input type="checkbox"/> Alkalinity, pH, & Conductivity
<input type="checkbox"/> Vol. Total Solids	<input type="checkbox"/> pH only (non-Waste or non-Compliance)
<input type="checkbox"/> Susp. Solids (500 ml needed)	<input type="checkbox"/> Chloride
<input type="checkbox"/> Vol. Susp. Solids	<input type="checkbox"/> Color
<input type="checkbox"/> Total Dissolved Solids	<input type="checkbox"/> Fluoride
<input type="checkbox"/> CBODs Total (carbonaceous)	<input type="checkbox"/> Sulfate
<input type="checkbox"/> BOD5 Total (900 ml needed)	<input type="checkbox"/> Sulfide (notify lab before collecting sample)
<input type="checkbox"/> BOD5 Dissolved	<input type="checkbox"/> Turbidity
BOD Estimate Required:	<input type="checkbox"/> Surfactants (MBAs)
_____ mg/l	<input type="checkbox"/> MBAs Screening
<input checked="" type="checkbox"/> Cyanide, Total	
<input type="checkbox"/> Cyanide, Amendable to Chlorination	
<input type="checkbox"/> Chlorophyll A (<input type="checkbox"/> Uncorrected <input type="checkbox"/> Corrected)	
(if Field Filtered, give ml _____ filtered)	

60 ml Bottle

Sample Bottle Field Filtered? (Check box if yes)

<input type="checkbox"/> NO ₂ + NO ₃ as Nitrogen (Drinking Water)	<input type="checkbox"/> Diss.-Orthophosphate
<input type="checkbox"/> Nitrite (NO ₂) as Nitrogen	<input type="checkbox"/> Diss. Silica

Quart Mason Jar (Also TCLP Metals)

<input type="checkbox"/> Oil & Grease (3 qts)	<input type="checkbox"/> pH (Waste Samples Only)
---	--

250 ml Bottle for Nutrients or Metals - Check each of the boxes that apply

Metals Bottle 250 ml (Acidify W/Nitric Acid)

Sample Bottle Field Filtered? (Check box if yes)

Low Level Metals (e.g., clean sampling) **Note:** Special Bottles Needed

TCLP (Toxicity Characteristic Leaching Procedure) (*TC Regulated Metals)(Use Mason Jar)

For non-drinking waters, total recoverable metals will be run unless otherwise instructed.

<input type="checkbox"/> Aluminum	<input type="checkbox"/> Chromium, Hexavalent	<input type="checkbox"/> Molybdenum
<input type="checkbox"/> Antimony	<input type="checkbox"/> Cobalt	<input type="checkbox"/> Nickel
<input type="checkbox"/> Arsenic*	<input type="checkbox"/> Copper	<input type="checkbox"/> Potassium
<input type="checkbox"/> Barium*	<input type="checkbox"/> Hardness-as CaCO ₃	<input type="checkbox"/> Selenium
<input type="checkbox"/> Beryllium	<input type="checkbox"/> Iron	<input type="checkbox"/> Silver
<input type="checkbox"/> Boron	<input type="checkbox"/> Lead	<input type="checkbox"/> Sodium
<input type="checkbox"/> Cadmium*	<input type="checkbox"/> Magnesium	<input type="checkbox"/> Thallium
<input type="checkbox"/> Calcium	<input type="checkbox"/> Manganese	<input type="checkbox"/> Vanadium
<input type="checkbox"/> Chromium, Total*	<input type="checkbox"/> Mercury*	<input type="checkbox"/> Zinc

Nutrients Bottle 250 ml (Acidify W/Sulfuric Acid)

Sample Bottle Field Filtered? (Check box if yes)

<input type="checkbox"/> Tot.-Phosphorus	<input type="checkbox"/> NO ₂ + NO ₃ as Nitrogen	<input type="checkbox"/> Total Kjeldahl-N
<input type="checkbox"/> Ammonia-N	<input type="checkbox"/> Chemical Oxygen Demand (COD)	

Where required, has sample been chemically preserved and has pH been checked?

Yes No

Initials AWJ Date 10-18-02

10/18/02
09:35

IN009696

Additional parameters or instructions to laboratory

Field Parameters - Optional

Sample Temperature - field (°C)	___ 1 ___ 1 . 6	Gage Height (ft)	___ . ___
Ambient Air Temperature - field (°C)	___ . ___	Flow cfs	___ . ___
DO field (mg/l)	___ . ___	Flow MGD	___ . ___
pH (su) field	___ 6 . 8	Depth to Groundwater (ft)	___ . ___
Secchi Depth (feet or meters)	___ . ___	Top of Sampling Interval	___ . ___
Secchi Depth Hit Bottom?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Bottom of Sampling Interval	___ . ___
Cloud Cover %	1 0 0 %	Turbidity (NTU)	___ . ___
Cond-fld (µMHOS/CM@25°C)	___ . ___		

Partial Instructions

See Chapter 4 "Lab Slips" of the Field Procedures Manual (see <http://intranet/int/es/science/ls/fpm/IV.htm>) for further instructions and definitions.

The **ID, Permit or STORET Number** and **Point, Well or Outfall Number** fields should contain the appropriate IDs, left justified, for the program system the sample is for:

Program	ID Number	Example	Pt. Well	Example
Water Supply - Privates	Unique Well No.	AA999	Blank	
Water Supply - Publics RAW	PWS ID No.	24100567	Well No.	002
Water Supply - Publics DIST	PWS ID No.	24100567	Blank	
Waste Management	License No.	00130	Point ID	AD6
Watershed Management	Permit No.	0000030	Outfall No.	001
Fish Management & Habitat Protection	Storet No.	265013	Blank	
Remediation & Redevelopment	CERCLIS No.	006094197	Point ID	001
Remediation & Redevelopment	FID	268181770	Point ID	001
Remediation & Redevelopment	Brownfields No.	000000003	Point ID	001

The **Sample Address or Location** field should be the "entity" name, and depends on the program the sample is for. For example, Facility, Site, Licensee, River/Lake, Owner, etc. Following this information, include the address of the facility or site (if appropriate).

The **Sample Point Description** field should include a description of the point within the property that the sample was collected. For example, secondary settling tank effluent or faucet prior to pressure tank.

The **Program Code** is a two-digit DNR program abbreviation such as WT for Watershed, DG for Drinking and Groundwater, WA for Waste Management, and etc.

The **Region Code** is a single numeric code for the appropriate DNR region (1 is SCR, 2 is SER, 4 is NER, 6 is WCR & 7 is NOR). The computer will assign a region based on the county.

The **Account Number** must be completed in order for the samples to be billed to the correct funding source. If you are unsure what the proper account number is refer to <http://intranet/int/es/science/ls/Account.htm> or contact the DNR Laboratory Coordinator or the State Laboratory of Hygiene.

The **Lake Grant or Project Number** field should include the Lake Planning Grant Number or the Project Number.

County Code

Adams	01	Florence	19	Marathon	37	Rusk	55
Ashland	02	Fond du Lac	20	Marinette	38	St. Croix	56
Barron	03	Forest	21	Marquette	39	Sauk	57
Bayfield	04	Grant	22	Menominee	40	Sawyer	58
Brown	05	Green	23	Milwaukee	41	Shawano	59
Buffalo	06	Green Lake	24	Monroe	42	Sheboygan	60
Burnett	07	Iowa	25	Oconto	43	Taylor	61
Calumet	08	Iron	26	Oneida	44	Trempealeau	62
Chippewa	09	Jackson	27	Outagamie	45	Vernon	63
Clark	10	Jefferson	28	Ozaukee	46	Vilas	64
Columbia	11	Juneau	29	Pepin	47	Walworth	65
Crawford	12	Kenosha	30	Pierce	48	Washburn	66
Dane	13	Kewaunee	31	Polk	49	Washington	67
Dodge	14	La Crosse	32	Portage	50	Waukesha	68
Door	15	Lafayette	33	Price	51	Waupaca	69
Douglas	16	Langlade	34	Racine	52	Waushara	70
Dunn	17	Lincoln	35	Richland	53	Winnebago	71
Eau Claire	18	Manitowoc	36	Rock	54	Wood	72

Wisconsin Department of Natural Resources

Laboratory Report

11/18/2002

Lab: 113133790

Sample: IN009697

Page 1 of 2

Laboratory: Wisconsin State Laboratory of Hygiene
 2601 Agriculture Dr
 Madison WI 53707
 Phone: 800-442-4618 Fax Phone: 608-224-6276

DNR ID 113133790

Sample:

Field #: SAMPLE02	Sample #: IN009697
Collection Start: 10/17/2002 03:27 pm	Collection End:
Collected by: METHU	Waterbody/Outfall Id: HC001
ID #: 341055770	ID Point #:
County: Milwaukee	Account #: RR024
Sample Location: HIGH CAP WELL #1 KAISER PROP 4763 N 32ND ST MILW WI	
Sample Description: DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY/PUMP 400FT	
Sample Source: W	Sample Depth: F400
Date Reported: 11/15/2002	Sample Status: COMPLETE
Project No:	

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
ARSENIC, AA FURN (SM 3113B)		10/29/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1002	ARSENIC TOTAL	7440382	3.4	UG/L	1		3

Analysis Method		Analysis Date	Lab Comment				
BARIUM, UNDIG, ICP (EPA 200.7)		10/21/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1007	BARIUM TOTAL	7440393	29.	UG/L	2		5

Analysis Method		Analysis Date	Lab Comment				
CADMIUM, AA FURN (SM 3113B)		10/28/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1027	CADMIUM TOTAL	7440439	ND	UG/L	0.05		0.15

Analysis Method		Analysis Date	Lab Comment				
CHROMIUM, AA FURN (SM 3113B)		10/24/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1034	CHROMIUM TOTAL	7440473	ND	UG/L	1		3

Analysis Method		Analysis Date	Lab Comment				
LEAD, AA FURN (SM 3113B)		10/21/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1051	LEAD	7439921	1.4	UG/L	1		3

Analysis Method		Analysis Date	Lab Comment			

**Wisconsin Department of Natural Resources
Laboratory Report**

11/18/2002

Lab: 113133790

Sample: IN009697

Page 2 of 2

MERCURY, AA COLD VAPOR (EPA 245.1) 10/25/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
71900	MERCURY TOTAL	7439976	ND	UGL	0.03		0.08

<i>Analysis Method</i>							
<i>Analysis Date</i>							
<i>Lab Comment</i>							
SELENIUM, AA FURN (SM 3113B) 11/11/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
1147	SELENIUM	7782492	1.	UGL	1		3

<i>Analysis Method</i>							
<i>Analysis Date</i>							
<i>Lab Comment</i>							
SILVER, AA FURN (SM 3113B) 10/24/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
1077	SILVER TOTAL	7440224	ND	UGL	0.1		0.3

<i>Analysis Method</i>							
<i>Analysis Date</i>							
<i>Lab Comment</i>							
TURBIDITY SCREENING FOR SDWA METALS (SM 2130B) 11/15/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
99197	TURBIDITY METALS SCREENING	E1640507	<1.0	NTU		1	

<i>Analysis Method</i>							
<i>Analysis Date</i>							
<i>Lab Comment</i>							
FIELD TESTS							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
32	CLOUD COVER	E1641711	100	%			
400	PH FIELD	E1644285	6.8	SU			
10	TEMPERATURE FIELD	E1645704	11.6	C			

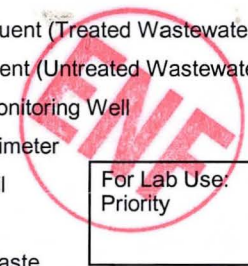
<i>Analysis Method</i>							
<i>Analysis Date</i>							
<i>Lab Comment</i>							
ICP TEST							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>

License, ID, Permit or STORET Number <u>3 4 1 0 5 5 7 7 0</u>	Point, Well or Outfall Number <u>H C 0 0 1</u>	Field Number <u>S A M P L E 0 2</u>	County No. <u>41</u>	Program Code <u>R R</u>	Region <u>2</u>
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Waterbody Number _____ Sample Address or Location
High Cap Well #1 Kaiser Prop 4763 N 32nd Sr Milw WI

Sample Point Description / Sampling Device
Dual Aquifer High Capacity Well #1 North End of Property/Pump 400ft.

Send Report To		Sample Type (select one)	
DNR User ID <u>hnatj</u>	Date Results Needed (mm/dd/yyyy) <u>11/01/2002</u>	<input type="checkbox"/> SU Surface Water	<input type="checkbox"/> EF Effluent (Treated Wastewater)
Name (Last, First) <u>Hnat, John</u>		<input type="checkbox"/> NP Storm Water	<input type="checkbox"/> IF Influent (Untreated Wastewater)
Address <u>WDNR 2300 Dr M L King Dr</u>		<input type="checkbox"/> SE Sediment	<input type="checkbox"/> MW Monitoring Well
City <u>Milwaukee</u>	State <u>WI</u>	<input type="checkbox"/> SL Sludge	<input type="checkbox"/> LY Lysimeter
ZIP <u>53212</u>		<input type="checkbox"/> LE Leachate	<input type="checkbox"/> SO Soil
Account Number <u>R R 0 2 4</u>	Collected By <u>J Hnat & Washington Methu</u>	<input type="checkbox"/> TI Tissue	<input type="checkbox"/> OI Oil
Lakes Grant or Project Number	Telephone Number <u>(414) 263-8644</u>	<input type="checkbox"/> E Public Drinking Entry Point	<input type="checkbox"/> OW Waste
Begin or Grab Date (mm/dd/yyyy) <u>10/17/2002</u>	Begin Time (24-hr clock) <u>1527</u>	<input checked="" type="checkbox"/> W Public Drinking Well/Source	<input type="checkbox"/> PO Private Well
End Date - For Composite Samples Only (mm/dd/yyyy)	End Time (24-hr clock) - For Composite Samples Only	<input type="checkbox"/> D Public Drinking Distribution	<input type="checkbox"/> X Non-Potable Well
		Sample Reason (Drinking Water - select one)	
		<input type="checkbox"/> N New Well	<input checked="" type="checkbox"/> C Confirmation (follow up)
		<input type="checkbox"/> I Investigation	<input type="checkbox"/> D Compliance
		<input type="checkbox"/> W Raw water (drinking)	
		<input type="checkbox"/> E Enforcement	Depth of Sample (feet or meters) <u>F 4 0 0</u> For M
Is Sample Disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, how? _____			



If field filtered, indicate by checking the box on this sheet and noting on the lid of the sample bottle.

Plastic Quart Bottles

Sample Bottle Field Filtered? (Check box if yes)

<input type="checkbox"/> Total Solids	<input type="checkbox"/> Alkalinity, pH, & Conductivity
<input type="checkbox"/> Vol. Total Solids	<input type="checkbox"/> pH only (non-Waste or non-Compliance)
<input type="checkbox"/> Susp. Solids (500 ml needed)	<input type="checkbox"/> Chloride
<input type="checkbox"/> Vol. Susp. Solids	<input type="checkbox"/> Color
<input type="checkbox"/> Total Dissolved Solids	<input type="checkbox"/> Fluoride
<input type="checkbox"/> CBODs Total (carbonaceous)	<input type="checkbox"/> Sulfate
<input type="checkbox"/> BODs Total (900 ml needed)	<input type="checkbox"/> Sulfide (notify lab before collecting sample)
<input type="checkbox"/> BODs Dissolved	<input type="checkbox"/> Turbidity

BOD Estimate Required: _____ mg/l

Cyanide, Total

Cyanide, Amendable to Chlorination

Chlorophyll A (Uncorrected Corrected)
(if Field Filtered, give ml _____ filtered)

60 ml Bottle

Sample Bottle Field Filtered? (Check box if yes)

NO₂ + NO₃ as Nitrogen (Drinking Water)

Nitrite (NO₂) as Nitrogen

Diss.-Orthophosphate

Diss. Silica

Quart Mason Jar (Also TCLP Metals)

Oil & Grease (3 qts)

pH (Waste Samples Only)

250 ml Bottle for Nutrients or Metals - Check each of the boxes that apply

Metals Bottle 250 ml (Acidify W/Nitric Acid)

Sample Bottle Field Filtered? (Check box if yes)

Low Level Metals (e.g., clean sampling) **Note:** Special Bottles Needed

TCLP (Toxicity Characteristic Leaching Procedure) (*TC Regulated Metals)(Use Mason Jar)

For non-drinking waters, total recoverable metals will be run unless otherwise instructed.

<input type="checkbox"/> Aluminum	<input type="checkbox"/> Chromium, Hexavalent	<input type="checkbox"/> Molybdenum
<input type="checkbox"/> Antimony	<input type="checkbox"/> Cobalt	<input type="checkbox"/> Nickel
<input checked="" type="checkbox"/> Arsenic*	<input type="checkbox"/> Copper	<input type="checkbox"/> Potassium
<input checked="" type="checkbox"/> Barium*	<input type="checkbox"/> Hardness-as CaCO ₃	<input checked="" type="checkbox"/> Selenium
<input type="checkbox"/> Beryllium	<input type="checkbox"/> Iron	<input checked="" type="checkbox"/> Silver
<input type="checkbox"/> Boron	<input checked="" type="checkbox"/> Lead	<input type="checkbox"/> Sodium
<input checked="" type="checkbox"/> Cadmium*	<input type="checkbox"/> Magnesium	<input type="checkbox"/> Thallium
<input type="checkbox"/> Calcium	<input type="checkbox"/> Manganese	<input type="checkbox"/> Vanadium
<input checked="" type="checkbox"/> Chromium, Total*	<input checked="" type="checkbox"/> Mercury*	<input type="checkbox"/> Zinc

Nutrients Bottle 250 ml (Acidify W/Sulfuric Acid)

Sample Bottle Field Filtered? (Check box if yes)

Tot.-Phosphorus

Ammonia-N

NO₂ + NO₃ as Nitrogen

Chemical Oxygen Demand (COD)

Total Kjeldahl-N

Where required, has sample been chemically preserved and has pH been checked?

Yes No

Initials RNS Date 10-18-02

10/18/02
09:35

IN009697

Additional parameters or instructions to laboratory

Field Parameters - Optional

Sample Temperature - field (°C)	___ 1 ___ 1 . 6	Gage Height (ft)	___ . ___
Ambient Air Temperature - field (°C)	___ . ___	Flow cfs	___ . ___
DO field (mg/l)	___ . ___	Flow MGD	___ . ___
pH (su) field	___ 6 . 8	Depth to Groundwater (ft)	___ . ___
Secchi Depth (feet or meters)	___ . ___	Top of Sampling Interval	___ . ___
	For M		For M
Secchi Depth Hit Bottom?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Bottom of Sampling Interval	___ . ___
Cloud Cover %	1 0 0 %		For M
Cond-fld (µMHOS/CM@25°C)	___ . ___	Turbidity (NTU)	___ . ___

Partial Instructions

See Chapter 4 "Lab Slips" of the Field Procedures Manual (see <http://intranet/int/es/science/ls/fpm/IV.htm>) for further instructions and definitions.

The **ID, Permit or STORET Number** and **Point, Well or Outfall Number** fields should contain the appropriate IDs, left justified, for the program system the sample is for:

Program	ID Number	Example	Pt. Well	Example
Water Supply - Privates	Unique Well No.	AA999	Blank	
Water Supply - Publics RAW	PWS ID No.	24100567	Well No.	002
Water Supply - Publics DIST	PWS ID No.	24100567	Blank	
Waste Management	License No.	00130	Point ID	AD6
Watershed Management	Permit No.	0000030	Outfall No.	001
Fish Management & Habitat Protection	Storet No.	265013	Blank	
Remediation & Redevelopment	CERCLIS No.	006094197	Point ID	001
Remediation & Redevelopment	FID	268181770	Point ID	001
Remediation & Redevelopment	Brownfields No.	000000003	Point ID	001

The **Sample Address or Location** field should be the "entity" name, and depends on the program the sample is for. For example, Facility, Site, Licensee, River/Lake, Owner, etc. Following this information, include the address of the facility or site (if appropriate).

The **Sample Point Description** field should include a description of the point within the property that the sample was collected. For example, secondary settling tank effluent or faucet prior to pressure tank.

The **Program Code** is a two-digit DNR program abbreviation such as WT for Watershed, DG for Drinking and Groundwater, WA for Waste Management, and etc.

The **Region Code** is a single numeric code for the appropriate DNR region (1 is SCR, 2 is SER, 4 is NER, 6 is WCR & 7 is NOR). The computer will assign a region based on the county.

The **Account Number** must be completed in order for the samples to be billed to the correct funding source. If you are unsure what the proper account number is refer to <http://intranet/int/es/science/ls/Account.htm> or contact the DNR Laboratory Coordinator or the State Laboratory of Hygiene.

The **Lake Grant or Project Number** field should include the Lake Planning Grant Number or the Project Number.

County Code

Adams	01	Florence	19	Marathon	37	Rusk	55
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Barron	03	Forest	21	Marquette	39	Sauk	57
Bayfield	04	Grant	22	Menominee	40	Sawyer	58
Brown	05	Green	23	Milwaukee	41	Shawano	59
Buffalo	06	Green Lake	24	Monroe	42	Sheboygan	60
Burnett	07	Iowa	25	Oconto	43	Taylor	61
Calumet	08	Iron	26	Oneida	44	Trempealeau	62
Chippewa	09	Jackson	27	Outagamie	45	Vernon	63
Clark	10	Jefferson	28	Ozaukee	46	Vilas	64
Columbia	11	Juneau	29	Pepin	47	Walworth	65
Crawford	12	Kenosha	30	Pierce	48	Washburn	66
Dane	13	Kewaunee	31	Polk	49	Washington	67
Dodge	14	La Crosse	32	Portage	50	Waukesha	68
Door	15	Lafayette	33	Price	51	Waupaca	69
Douglas	16	Langlade	34	Racine	52	Waushara	70
Dunn	17	Lincoln	35	Richland	53	Winnebago	71
Eau Claire	18	Manitowoc	36	Rock	54	Wood	72

000

Sample Collector(s) John J Hnat & Washington Methu	Title / Work Station Hydrogeologist/Water Spec SER HQ WDNR	Telephone Number (include area code) (414) 263-8644
Property Owner Ed Kaiser Trust	Property Address 4763 North 32nd St., Milwaukee, WI	Telephone Number (include area code) (941) 922-6622

Split Samples: Offered? Yes No
Accepted? Yes No

Accepted By (Signature): _____

Field ID No.	Date	Time	No. of Containers	Station Location Sample Description	Lab ID Number	Lab Use Only			
						Cracked / Broken	Improperly Sealed	Good Condition	Other Comments
Sample #2	10/17/02	1522	3	1 - Cyanide 250 ml / Helpur.	IN009696				
				2 - metals 250 ml / HNSO4 Pers.	IN009697				
				400 Feet / pump	IN009697-CP				
				See Lab ID Number: IN002514 for Metals and Cyanide from 60 feet.					

I hereby certify that I received, properly handled, and disposed of these samples as noted below:

Relinquished By (Signature) <i>Washington Methu</i>	Date / Time 10/17/02 1620	Received By (Signature)	Date / Time
Relinquished By (Signature) <i>[Signature]</i>	Date / Time 10/17/02 1620	Received By (Signature)	Date / Time
Relinquished By (Signature)	Date / Time	Received for Laboratory By (Signature) <i>Charles F. Payne</i>	Date / Time 10-18-02

Disposition of Unused Portion Sample:

- Dispose
- Return
- Retain for _____ Days
- Other _____

09:35

**Wisconsin Department of Natural Resources
Laboratory Report**

08/27/2002

Lab: 113133790

Sample: IN002514

Page 1 of 3

Laboratory: Wisconsin State Laboratory of Hygiene
2601 Agriculture Dr
Madison WI 53707
Phone: 800-442-4618 Fax Phone: 608-224-6276

DNR ID 113133790

*Metals
Cy Anide*

Sample:

Field #: **SAMPLE01** Sample #: **IN002514**
Collection Start: **07/30/2002 10:03 am** Collection End: **07/30/2002 11:10 am**
Collected by: **HNAT/METHU** Waterbody/Outfall Id:
ID #: **341055770** ID Point #: **HC001**
County: **Milwaukee** Account #: **RR024**
Sample Location: **HIGH CAP WELL #1 - KAISER PROP, 4763 N 32ND ST, MILWAUKEE WI**
Sample Description: **DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY/BAILER 60FT**
Sample Source: **W** Sample Depth: **F60**
Date Reported: **08/27/2002** Sample Status: **COMPLETE**
Project No:

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
ARSENIC, AA FURN (SM 3113B)		08/01/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1002	ARSENIC TOTAL	7440382	2.7	UG/L	1		3

PAL

Analysis Method		Analysis Date	Lab Comment				
CADMIUM, AA FURN (SM 3113B)		08/06/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1027	CADMIUM TOTAL	7440439	ND	UG/L	0.05		0.15

Analysis Method		Analysis Date	Lab Comment				
CHROMIUM, AA FURN (SM 3113B)		08/08/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1034	CHROMIUM TOTAL	7440473	ND	UG/L	1		3

Analysis Method		Analysis Date	Lab Comment				
CONDUCTIVITY PH & ALK (SM2510B/EPA07/31/2002 150.1/SM2320B)			SAMPLE RECEIVED WITH PRESERVATIVE, NO TEST DONE				
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
410	ALKALINITY TOTAL CaCO3	E1640192	**	MGL		1.	
95	CONDUCTIVITY AT 25C	E1640291	**	UMHOS/CM		1	
403	PH LAB	E1644285	**	SU		1	

Analysis Method		Analysis Date	Lab Comment				
CYANIDE (SM 4500CN-E)		08/02/2002					

Wisconsin Department of Natural Resources
Laboratory Report

08/27/2002

Lab: 113133790

Sample: IN002514

Page 3 of 3

<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
1007	BARIUM TOTAL	7440393	2.	UG/L	2		5



John Hnat - WDNR
2300 Martin Luther King Jr Dr
Milwaukee WI 53212

ENFORCEMENT

Inorganic Chemistry Unit
Wis. State Lab. of Hygiene
2601 Agriculture Drive
P.O. Box 7996
Madison, WI 53707-7996

Collector: HNAT/METHU

District/Area: South East

Phone Number:

Sample Number(s): IN002514

Report date: 08/27/02

*As per your instructions, we will retain the unused portions of the attached sample(s) for 14 days beyond the Report date.

Wisconsin Department of Natural Resources

Laboratory Report

08/28/2002

Lab: 113133790

Sample: IN002514

Page 1 of 3

Laboratory: Wisconsin State Laboratory of Hygiene
 2601 Agriculture Dr
 Madison WI 53707
 Phone: 800-442-4618 Fax Phone: 608-224-6276

DNR ID 113133790

Sample:

Field #: SAMPLE01	Sample #: IN002514
Collection Start: 07/30/2002 10:03 am	Collection End: 07/30/2002 11:10 am
Collected by: HNAT/METHU	Waterbody/Outfall Id:
ID #: 341055770	ID Point #: HC001
County: Milwaukee	Account #: RR024
Sample Location: HIGH CAP WELL #1 - KAISER PROP, 4763 N 32ND ST, MILWAUKEE WI	
Sample Description: DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY/BAILER 60FT	
Sample Source: W	Sample Depth: F60
Date Reported: 08/27/2002	Sample Status: COMPLETE
Project No:	

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
ARSENIC, AA FURN (SM 3113B)		08/01/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1002	ARSENIC TOTAL	7440382	2.7	UG/L	1		3

Analysis Method		Analysis Date	Lab Comment				
CADMIUM, AA FURN (SM 3113B)		08/06/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1027	CADMIUM TOTAL	7440439	ND	UG/L	0.05		0.15

Analysis Method		Analysis Date	Lab Comment				
CHROMIUM, AA FURN (SM 3113B)		08/08/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
1034	CHROMIUM TOTAL	7440473	ND	UG/L	1		3

Analysis Method		Analysis Date	Lab Comment				
CONDUCTIVITY PH & ALK (SM2510B/EPA07/31/2002 150.1/SM2320B)			SAMPLE RECEIVED WITH PRESERVATIVE, NO TEST DONE				
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
410	ALKALINITY TOTAL CaCO3	E1640192	**	MGL		1.	
95	CONDUCTIVITY AT 25C	E1640291	**	UMHOS/CM		1	
403	PH LAB	E1644285	**	SU		1	

Analysis Method		Analysis Date	Lab Comment				
CYANIDE (SM 4500CN-E)		08/02/2002					

Wisconsin Department of Natural Resources
Laboratory Report

08/28/2002

Lab: 113133790

Sample: IN002514

Page 3 of 3

<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
1007	BARIUM TOTAL	7440393	2.	UG/L	2		5

COC

License, ID, Permit or STORET Number <u>3 4 1 0 5 5 7 7 0</u>	Point, Well or Outfall Number <u>H C 0 0 1</u>	Field Number <u>S A M P L E 0 1</u>	County No. <u>41</u>	Program Code <u>R R</u>	Region <u>2</u>
--	---	--	-------------------------	----------------------------	--------------------

Waterbody Number	Sample Address or Location <u>High Cap Well #1, Kaiser Prop. 4763 N. 32nd St., Milwaukee, WI</u>
------------------	---

Sample Point Description / Sampling Device
Dual Aquifer High Capacity Well #1 North End Of Property/Bailer 60ft

Send Report To		Sample Type (select one)	
DNR User ID <u>hnatj</u>	Date Results Needed (mm/dd/yyyy) <u>08/05/2002</u>	<input type="checkbox"/> SU Surface Water	<input type="checkbox"/> EF Effluent (Treated Wastewater)
Name (Last, First) <u>Hnat, John</u>		<input type="checkbox"/> NP Storm Water	<input type="checkbox"/> IF Influent (Untreated Wastewater)
Address <u>WDNR, 2300 Dr. M L King Dr</u>		<input type="checkbox"/> SE Sediment	<input type="checkbox"/> MW Monitoring Well
City <u>Milwaukee</u>		<input type="checkbox"/> SL Sludge	<input type="checkbox"/> LY Lysimeter
State ZIP <u>WI 53212</u>		<input type="checkbox"/> LE Leachate	<input type="checkbox"/> SO Soil
Account Number <u>R R 0 2 4</u>		<input type="checkbox"/> TI Tissue	<input type="checkbox"/> OI Oil
Collected By <u>J. Hnat & Washington Methu</u>		<input type="checkbox"/> E Public Drinking Entry Point	<input type="checkbox"/> OW Waste
Lakes Grant or Project Number		<input checked="" type="checkbox"/> W Public Drinking Well/Source	<input type="checkbox"/> PO Private Well
Telephone Number <u>(414) 263-8644</u>		<input type="checkbox"/> D Public Drinking Distribution	<input type="checkbox"/> X Non-Potable Well
Begin or Grab Date (mm/dd/yyyy) <u>07/30/2002</u>		Sample Reason (Drinking Water - select one)	
Begin Time (24-hr clock) <u>1003</u>		<input type="checkbox"/> N New Well	<input type="checkbox"/> C Confirmation (follow up)
End Date - For Composite Samples Only (mm/dd/yyyy) <u>07/30/2002</u>		<input checked="" type="checkbox"/> I Investigation	<input type="checkbox"/> D Compliance
End Time (24-hr clock) - For Composite Samples Only <u>1110</u>		<input type="checkbox"/> W Raw water (drinking)	
		<input type="checkbox"/> E Enforcement	Depth of Sample (feet or meters) <u>F 6 0</u> <small>For M</small>
Is Sample Disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, how? _____			

ENF
For Lab Use: Priority

If field filtered, indicate by checking the box on this sheet and noting on the lid of the sample bottle.

Plastic Quart Bottles

Sample Bottle Field Filtered? (Check box if yes)

<input type="checkbox"/> Total Solids	<input type="checkbox"/> Alkalinity, pH, & Conductivity
<input type="checkbox"/> Vol. Total Solids	<input type="checkbox"/> pH only (non-Waste or non-Compliance)
<input type="checkbox"/> Susp. Solids (500 ml needed)	<input type="checkbox"/> Chloride
<input type="checkbox"/> Vol. Susp. Solids	<input type="checkbox"/> Color
<input type="checkbox"/> Total Dissolved Solids	<input type="checkbox"/> Fluoride
<input type="checkbox"/> CBOD ₅ Total (carbonaceous)	<input type="checkbox"/> Sulfate
<input type="checkbox"/> BOD ₅ Total (900 ml needed)	<input type="checkbox"/> Sulfide (notify lab before collecting sample)
<input type="checkbox"/> BOD ₅ Dissolved	<input type="checkbox"/> Turbidity

BOD Estimate Required: _____ mg/l

Cyanide, Total

Cyanide, Amendable to Chlorination

Chlorophyll A (Uncorrected Corrected)
(if Field Filtered, give ml _____ filtered)

60 ml Bottle

Sample Bottle Field Filtered? (Check box if yes)

NO₂ + NO₃ as Nitrogen (Drinking Water)

Nitrite (NO₂) as Nitrogen

Diss.-Orthophosphate

Diss. Silica

Quart Mason Jar (Also TCLP Metals)

Oil & Grease (3 qts)

pH (Waste Samples Only)

250 ml Bottle for Nutrients or Metals - Check each of the boxes that apply

Metals Bottle 250 ml (Acidify W/Nitric Acid)

Sample Bottle Field Filtered? (Check box if yes)

Low Level Metals (e.g., clean sampling) **Note:** Special Bottles Needed

TCLP (Toxicity Characteristic Leaching Procedure) (*TC Regulated Metals)(Use Mason Jar)

For non-drinking waters, total recoverable metals will be run unless otherwise instructed.

<input type="checkbox"/> Aluminum	<input type="checkbox"/> Chromium, Hexavalent	<input type="checkbox"/> Molybdenum
<input type="checkbox"/> Antimony	<input type="checkbox"/> Cobalt	<input type="checkbox"/> Nickel
<input checked="" type="checkbox"/> Arsenic*	<input type="checkbox"/> Copper	<input type="checkbox"/> Potassium
<input checked="" type="checkbox"/> Barium*	<input type="checkbox"/> Hardness-as CaCO ₃	<input checked="" type="checkbox"/> Selenium
<input type="checkbox"/> Beryllium	<input type="checkbox"/> Iron	<input checked="" type="checkbox"/> Silver
<input type="checkbox"/> Boron	<input checked="" type="checkbox"/> Lead	<input type="checkbox"/> Sodium
<input checked="" type="checkbox"/> Cadmium*	<input type="checkbox"/> Magnesium	<input type="checkbox"/> Thallium
<input type="checkbox"/> Calcium	<input type="checkbox"/> Manganese	<input type="checkbox"/> Vanadium
<input checked="" type="checkbox"/> Chromium, Total*	<input checked="" type="checkbox"/> Mercury*	<input type="checkbox"/> Zinc

Nutrients Bottle 250 ml (Acidify W/Sulfuric Acid)

Sample Bottle Field Filtered? (Check box if yes)

Tot.-Phosphorus

Ammonia-N

NO₂ + NO₃ as Nitrogen

Chemical Oxygen Demand (

Where required, has sample been chemically preserved and has pH been checked?

Yes No

Initials BWW Date 7/31/02

07/31/02
12:19

IN002514

Oak →

Additional parameters or instructions to laboratory

Field Parameters - Optional

Sample Temperature - field (°C)	_____	Gage Height (ft)	_____
Ambient Air Temperature - field (°C)	_____	Flow cfs	_____
DO field (mg/l)	_____	Flow MGD	_____
pH (su) field	_____	Depth to Groundwater (ft)	_____
Secchi Depth (feet or meters)	_____	Top of Sampling Interval	_____
	F or M		F or M
Secchi Depth Hit Bottom?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Bottom of Sampling Interval	_____
Cloud Cover %	_____ %		F or M
Cond-fld (µMHOS/CM@25°C)	_____	Turbidity (NTU)	_____

Partial Instructions

See Chapter 4 "Lab Slips" of the Field Procedures Manual (see <http://intranet/int/es/science/ls/fpm/IV.htm>) for further instructions and definitions.

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Water Supply - Publics DIST	PWS ID No.	24100567	Blank	
Waste Management	License No.	00130	Point ID	AD6
Watershed Management	Permit No.	0000030	Outfall No.	001
Fish Management & Habitat Protection	Storet No.	265013	Blank	
Remediation & Redevelopment	CERCLIS No.	006094197	Point ID	001
Remediation & Redevelopment	FID	268181770	Point ID	001
Remediation & Redevelopment	Brownfields No.	000000003	Point ID	001

The **Sample Address or Location** field should be the "entity" name, and depends on the program the sample is for. For example, Facility, Site, Licensee, River/Lake, Owner, etc. Following this information, include the address of the facility or site (if appropriate).

The **Sample Point Description** field should include a description of the point within the property that the sample was collected. For example, secondary settling tank effluent or faucet prior to pressure tank.

The **Program Code** is a two-digit DNR program abbreviation such as WT for Watershed, DG for Drinking and Groundwater, WA for Waste Management, and etc.

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County Code

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Barron	03	Forest	21	Menominee	39	Sauk	57
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Brown	05	Green	23	Monroe	41	Shawano	59
Buffalo	06	Green Lake	24	Oconto	42	Sheboygan	60
Burnett	07	Iowa	25	Oneida	43	Taylor	61
Calumet	08	Iron	26	Outagamie	44	Trempealeau	62
Chippewa	09	Jackson	27	Ozaukee	45	Vernon	63
Clark	10	Jefferson	28	Pepin	46	Walworth	64
Columbia	11	Juneau	29	Pierce	47	Washburn	65
Crawford	12	Kenosha	30	Polk	48	Washington	66
Dane	13	Kewaunee	31	Portage	49	Waukesha	67
Dodge	14	La Crosse	32	Price	50	Waupaca	68
Door	15	Lafayette	33	Racine	51	Waushara	69
Douglas	16	Langlade	34	Richland	52	Winnebago	70
Dunn	17	Lincoln	35	Rock	53	Wood	71
Eau Claire	18	Manitowoc	36		54		72



License, ID, Permit or STORET Number <u>3 4 1 0 5 5 7 7 0</u>	Point, Well or Outfall Number <u>H C 0 0 1</u>	Field Number <u>S A M P L E 0 1</u>	County No. <u>41</u>	Program Code <u>R R</u>	Region <u>2</u>
--	---	--	-------------------------	----------------------------	--------------------

Waterbody Number	Sample Address or Location <u>High Cap Well #1, Kaiser Prop. 4763 N. 32nd St., Milwaukee, WI</u>
------------------	---

Sample Point Description / Sampling Device
Dual Aquifer High Capacity Well #1 North End Of Property/Bailer 60ft

Send Report To		Sample Type (select one)	
DNR User ID <u>hnatj</u>	Date Results Needed (mm/dd/yyyy) <u>08/05/2002</u>	<input type="checkbox"/> SU Surface Water	<input type="checkbox"/> EF Effluent (Treated Wastewater)
Name (Last, First) <u>Hnat, John</u>		<input type="checkbox"/> NP Storm Water	<input type="checkbox"/> IF Influent (Untreated Wastewater)
Address <u>WDNR, 2300 Dr. M L King Dr</u>		<input type="checkbox"/> SE Sediment	<input type="checkbox"/> MW Monitoring Well
City <u>Milwaukee</u>		<input type="checkbox"/> SL Sludge	<input type="checkbox"/> LY Lysimeter
State ZIP <u>WI 53212</u>		<input type="checkbox"/> LE Leachate	<input type="checkbox"/> SO Soil
Account Number <u>R R 0 2 4</u>		<input type="checkbox"/> TI Tissue	<input type="checkbox"/> OI Oil
Collected By <u>J. Hnat & Washington Methu</u>		<input type="checkbox"/> E Public Drinking Entry Point	<input type="checkbox"/> OW Waste
Lakes Grant or Project Number	Telephone Number <u>(414) 263-8644</u>	<input checked="" type="checkbox"/> W Public Drinking Well/Source	<input type="checkbox"/> PO Private Well
Begin or Grab Date (mm/dd/yyyy) <u>07/30/2002</u>	Begin Time (24-hr clock) <u>1003</u>	<input type="checkbox"/> D Public Drinking Distribution	<input type="checkbox"/> X Non-Potable Well
End Date - For Composite Samples Only (mm/dd/yyyy) <u>07/30/2002</u>	End Time (24-hr clock) - For Composite Samples Only <u>1110</u>	Sample Reason (Drinking Water - select one)	
		<input type="checkbox"/> N New Well	<input type="checkbox"/> C Confirmation (follow up)
		<input checked="" type="checkbox"/> I Investigation	<input type="checkbox"/> D Compliance
		<input type="checkbox"/> W Raw water (drinking)	
		<input type="checkbox"/> E Enforcement	Depth of Sample (feet or meters) <u>F 6 0</u> For M
Is Sample Disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, how? _____			

If field filtered, indicate by checking the box on this sheet and noting on the lid of the sample bottle.

Plastic Quart Bottles

Sample Bottle Field Filtered? (Check box if yes)

Total Solids

Vol. Total Solids

Susp. Solids (500 ml needed)

Vol. Susp. Solids

Total Dissolved Solids

CBOD₅ Total (carbonaceous)

BOD₅ Total (900 ml needed)

BOD₅ Dissolved

BOD Estimate Required:
 _____ mg/l

Cyanide, Total

Cyanide, Amendable to Chlorination

Chlorophyll A (Uncorrected Corrected)
 (if Field Filtered, give ml _____ filtered)

Alkalinity, pH, & Conductivity

pH only (non-Waste or non-Compliance)

Chloride

Color

Fluoride

Sulfate

Sulfide (notify lab before collecting sample)

Turbidity

Surfactants (MBAs)

MBAs Screening

60 ml Bottle

Sample Bottle Field Filtered? (Check box if yes)

NO₂ + NO₃ as Nitrogen (Drinking Water)

Nitrite (NO₂) as Nitrogen

Diss.-Orthophosphate

Diss. Silica

Quart Mason Jar (Also TCLP Metals)

Oil & Grease (3 qts)

pH (Waste Samples Only)

250 ml Bottle for Nutrients or Metals - Check each of the boxes that apply

Metals Bottle 250 ml (Acidify W/Nitric Acid)

Sample Bottle Field Filtered? (Check box if yes)

Low Level Metals (e.g., clean sampling) **Note:** Special Bottles Needed

TCLP (Toxicity Characteristic Leaching Procedure) (*TC Regulated Metals)(Use Mason Jar)

For non-drinking waters, total recoverable metals will be run unless otherwise instructed.

Aluminum

Antimony

Arsenic*

Barium*

Beryllium

Boron

Cadmium*

Calcium

Chromium, Total*

Chromium, Hexavalent

Cobalt

Copper

Hardness-as CaCO₃

Iron

Lead

Magnesium

Manganese

Mercury*

Molybdenum

Nickel

Potassium

Selenium

Silver

Sodium

Thallium

Vanadium

Zinc

Nutrients Bottle 250 ml (Acidify W/Sulfuric Acid)

Sample Bottle Field Filtered? (Check box if yes)

Tot.-Phosphorus

Ammonia-N

NO₂ + NO₃ as Nitrogen

Chemical Oxygen Demand (COD)

Total Kjeldahl-N

Where required, has sample been chemically preserved and has pH been checked?

Yes No

Initials BHW Date 7/31/02 IN002514

Additional parameters or instructions to laboratory

Field Parameters - Optional

Sample Temperature - field (°C) _____	Gage Height (ft) _____
Ambient Air Temperature - field (°C) _____	Flow cfs _____
DO field (mg/l) _____	Flow MGD _____
pH (su) field _____	Depth to Groundwater (ft) _____
Secchi Depth (feet or meters) _____	Top of Sampling Interval _____
For M	For M
Secchi Depth Hit Bottom? <input type="checkbox"/> Yes <input type="checkbox"/> No	Bottom of Sampling Interval _____
Cloud Cover % _____ %	For M
Cond-fld (µMHOS/CM@25°C) _____	Turbidity (NTU) _____

Partial Instructions

See Chapter 4 "Lab Slips" of the Field Procedures Manual (see <http://intranet/int/es/science/lis/fpm/IV.htm>) for further instructions and definitions.

The **ID, Permit or STORET Number** and **Point, Well or Outfall Number** fields should contain the appropriate IDs, left justified, for the program system the sample is for:

Program	ID Number	Example	Pt. Well	Example
Water Supply - Privates	Unique Well No.	AA999	Blank	
Water Supply - Publics RAW	PWS ID No.	24100567	Well No.	002
Water Supply - Publics DIST	PWS ID No.	24100567	Blank	
Waste Management	License No.	00130	Point ID	AD6
Watershed Management	Permit No.	0000030	Outfall No.	001
Fish Management & Habitat Protection	Storet No.	265013	Blank	
Remediation & Redevelopment	CERCLIS No.	006094197	Point ID	001
Remediation & Redevelopment	FID	268181770	Point ID	001
Remediation & Redevelopment	Brownfields No.	000000003	Point ID	001

The **Sample Address or Location** field should be the "entity" name, and depends on the program the sample is for. For example, Facility, Site, Licensee, River/Lake, Owner, etc. Following this information, include the address of the facility or site (if appropriate).

The **Sample Point Description** field should include a description of the point within the property that the sample was collected. For example, secondary settling tank effluent or faucet prior to pressure tank.

The **Program Code** is a two-digit DNR program abbreviation such as WT for Watershed, DG for Drinking and Groundwater, WA for Waste Management, and etc.

The **Region Code** is a single numeric code for the appropriate DNR region (1 is SCR, 2 is SER, 4 is NER, 6 is WCR & 7 is NOR). The computer will assign a region based on the county.

The **Account Number** must be completed in order for the samples to be billed to the correct funding source. If you are unsure what the proper account number is refer to <http://intranet/int/es/science/lis/Account.htm> or contact the DNR Laboratory Coordinator or the State Laboratory of Hygiene.

The **Lake Grant or Project Number** field should include the Lake Planning Grant Number or the Project Number.

County Code

Adams	01	Florence	19	Marathon	37	Rusk	55
Ashland	02	Fond du Lac	20	Marinette	38	St. Croix	56
Barron	03	Forest	21	Marquette	39	Sauk	57
Bayfield	04	Grant	22	Menominee	40	Sawyer	58
Brown	05	Green	23	Milwaukee	41	Shawano	59
Buffalo	06	Green Lake	24	Monroe	42	Sheboygan	60
Burnett	07	Iowa	25	Oconto	43	Taylor	61
Calumet	08	Iron	26	Oneida	44	Trempealeau	62
Chippewa	09	Jackson	27	Outagamie	45	Vernon	63
Clark	10	Jefferson	28	Ozaukee	46	Vilas	64
Columbia	11	Juneau	29	Pepin	47	Walworth	65
Crawford	12	Kenosha	30	Pierce	48	Washburn	66
Dane	13	Kewaunee	31	Polk	49	Washington	67
Dodge	14	La Crosse	32	Portage	50	Waukesha	68
Door	15	Lafayette	33	Price	51	Waupaca	69
Douglas	16	Langlade	34	Racine	52	Waushara	70
Dunn	17	Lincoln	35	Richland	53	Winnebago	71
Eau Claire	18	Manitowoc	36	Rock	54	Wood	72

License, ID, Permit or STORET Number <u>3 4 1 0 5 5 7 7 0</u>	Point, Well or Outfall Number <u>H C 0 0 1</u>	Field Number <u>S A M P L E 0 1</u>	County No. <u>41</u>	Program Code <u>R R</u>	Region <u>2</u>
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Waterbody Number _____ Sample Address or Location
High Cap Well, Kaiser Prop., 4763 N. 32nd St., Milwaukee, WI

Sample Point Description / Sampling Device
Dual Aquifer High Capacity Well #1 North End of Property

Send Report To		Sample Type (select one)	
DNR User ID <u>hnatj</u>	Date Results Needed (mm/dd/yyyy) <u>08/05/2002</u> <i>per J. Hnat 7/31/02</i>	<input type="checkbox"/> SU Surface Water	<input type="checkbox"/> EF Effluent (Treated Wastewater)
Name <u>Hnat, John</u>	Address <u>WDNR, 2300 Dr. M L King Dr.</u>	<input type="checkbox"/> NP Storm Water	<input type="checkbox"/> IF Influent (Untreated Wastewater)
City <u>Milwaukee</u>	State <u>WI</u>	<input type="checkbox"/> SE Sediment	<input type="checkbox"/> MW Monitoring Well
ZIP <u>53212</u>	Account Number <u>RR024</u>	<input type="checkbox"/> SL Sludge	<input type="checkbox"/> LY Lysimeter
Collected By <u>J. Hnat & Washington Methu</u>	Lakes Grant or Project Number _____	<input type="checkbox"/> LE Leachate	<input type="checkbox"/> SO Soil
Telephone Number <u>(414) 263-8644</u>	Begin or Grab Date (mm/dd/yyyy) <u>07/30/2002</u>	<input type="checkbox"/> TI Tissue	<input type="checkbox"/> OI Oil
Begin Time (24-hr clock) <u>1003</u>	End Date - For Composite Samples Only (mm/dd/yyyy) <u>07/30/2002</u>	<input type="checkbox"/> E Public Drinking Entry Point	<input type="checkbox"/> OW Waste
End Time (24-hr clock) - For Composite Samples Only <u>1110</u>		<input checked="" type="checkbox"/> W Public Drinking Well/Source	<input type="checkbox"/> PO Private Well
		<input type="checkbox"/> D Public Drinking Distribution	<input type="checkbox"/> X Non-Potable Well
		Sample Reason (Drinking Water - select one)	
		<input type="checkbox"/> N New Well	<input type="checkbox"/> C Confirmation (follow up)
		<input checked="" type="checkbox"/> I Investigation	<input type="checkbox"/> D Compliance
		<input type="checkbox"/> W Raw water (drinking)	
		<input type="checkbox"/> E Enforcement	Depth of Sample (feet or meters) $\frac{F}{\text{For M}}$ <u>6 0</u>
		Is Sample Disinfected? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, how? _____	

VOCs Water / Soil (check one of the following)

Quantification (EPA Method 8260)
 Quantification (Drinking Water-EPA Method 524.2)

Priority Pollutant Scan (Non-VOC)

Priority Pollutant Pesticides
 Priority Pollutant Base/Neutral/Acid

PCBs

Aroclor Identification
 Congeners
 Coplanar

Petroleum Products

Gasoline
 Fuel Oil #1
 Fuel Oil #2
 GRO
 DRO

PAHs (GC/MS)
 PAHs (HPLC)

Pesticides

Carbaryl
 Carbofuran
 2,4-D
 2,4,5-TP
 2,4,5-T
 Chloramben
 Picloram
 Dicamba

Phorate
 Terbufos
 Atrazine
 Deethylatrazine
 Deisopropylatrazine
 Diaminoatrazine

Alachlor
 Metalachlor
 Cyanazine
 Metribuzin
 Simazine
 Prometon

Aldicarb & other carbamates
 Dimethoate
 Dinoseb
 DCPA
 Ethylene Dibromide
 Linuron
 Fonofos
 Butylate
 EPTC
 Formaldehyde (Water Only)

Toxicity Characteristic Leaching Procedure (TCLP)
(Check one or more of the following)

VOCs - TCLP
 Base/Neutral Extractables - TCLP
 2,4-Dinitrotoluene
 Hexachlorobenzene
 Hexachlorobutadiene
 Nitrobenzene
 Pyridine

Acid Extractables - TCLP
 2-Methylphenol
 3 & 4-Methylphenol
 Pentachlorophenol
 2,4,6-Trichlorophenol
 2,4,5-Trichlorophenol

Acid Herbicides - TCLP
 2,4-D
 2,4,5-TP (Silvex)

Chlorinated Pesticides - TCLP
 Chlordane
 Endrin
 Heptachlor
 Heptachlor Epoxide
 Lindane
 Methoxychlor
 Toxaphene

Ignitability (Haz. Waste Char.)

Additional parameters _____

For Lab Use:
Temp °C iced
Analyst BRW

Date Received _____

DPD

07/31/02 12:19
0N000272

Partial Instructions

See Chapter 4 "Lab Slips" of the *Field Procedures Manual* (see <http://intranet/int/es/science/ls/fpm/IV.htm>) for further instructions and definitions.

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Water Supply - Publics RAW	PWS ID No.	24100567	Well No.	002
Water Supply - Publics DIST	PWS ID No.	24100567	Blank	
Waste Management	License No.	00130	Point ID	AD6
Watershed Management	Permit No.	0000030	Outfall No.	001
Fish Management & Habitat Protection	Storet No.	265013	Blank	
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Buffalo	06	Green Lake	24	Monroe	42	Sheboygan	60
Burnett	07	Iowa	25	Oconto	43	Taylor	61
Calumet	08	Iron	26	Oneida	44	Trempealeau	62
Chippewa	09	Jackson	27	Outagamie	45	Vernon	63
Clark	10	Jefferson	28	Ozaukee	46	Vilas	64
Columbia	11	Juneau	29	Pepin	47	Walworth	65
Crawford	12	Kenosha	30	Pierce	48	Washburn	66
Dane	13	Kewaunee	31	Polk	49	Washington	67
Dodge	14	La Crosse	32	Portage	50	Waukesha	68
Door	15	Lafayette	33	Price	51	Waupaca	69
Douglas	16	Langlade	34	Racine	52	Waushara	70
Dunn	17	Lincoln	35	Richland	53	Winnebago	71
Eau Claire	18	Manitowoc	36	Rock	54	Wood	72

Sample Collector(s) John J Hnat & Washington Methu	Title / Work Station Hydrogeologist/Water Spec SER HQ WDNR	Telephone Number (include area code) (414) 263-8644
Property Owner Ed Kaiser Trust	Property Address 4763 North 32nd St., Milwaukee, WI	Telephone Number (include area code) (941) 922-6622

Split Samples: Offered? Yes No
 Accepted? Yes No

Accepted By (Signature): _____ **Lab Use Only**

Field ID No.	Date	Time	No. of Containers	Station Location Sample Description	Lab ID Number	Cracked / Broken	Improperly Sealed	Good Condition	Other Comments
Sample 01	07/30/2002	1003	9	High Cap Well #1 @ 60 Ft: 3-PCBs Liter, 3-Liter Empty, 1-250 ml Cyanide, 2-RCRA Metals 250 ml, HC001	IN002514 ON000272			✓	6 full containers

I hereby certify that I received, properly handled, and disposed of these samples as noted below:

Relinquished By (Signature) <i>Washington Methu</i>	Date / Time <i>7/30/02 1445</i>	Received By (Signature)	Date / Time
Relinquished By (Signature) <i>John Hnat</i>	Date / Time <i>7/30/02 1445</i>	Received By (Signature)	Date / Time
Relinquished By (Signature)	Date / Time	Received for Laboratory By (Signature) <i>B. C. ...</i>	Date / Time <i>7/31/02 11:30</i>

Disposition of Unused Portion Sample:

Dispose

Return

Retain for 14 Days

Other _____

**Wisconsin Department of Natural Resources
Laboratory Report**

08/27/2002

Lab: 113133790

Sample: ON000272

Page 1 of 2

Laboratory: Wisconsin State Laboratory of Hygiene
2601 Agriculture Dr
Madison WI 53707
Phone: 800-442-4618 Fax Phone: 608-224-6276

DNR ID 113133790

PCBS

Sample:

Field #: **SAMPLE 01** Sample #: **ON000272**
 Collection Start: **07/30/2002 10:03 am** Collection End: **07/30/2002 11:10 am**
 Collected by: **J. HNAT & WASHINGTO** Waterbody/Outfall Id:
 ID #: **341055770** ID Point #: **HC001**
 County: **Milwaukee** Account #: **RR024**
 Sample Location: **HIGH CAP WELL, KAISER PROP., 4763 N. 32ND ST., MILWAUKEE, WI**
 Sample Description: **DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY**
 Sample Source: **W** Sample Depth: **F 60**
 Date Reported: **08/12/2002** Sample Status: **COMPLETE**
 Project No:

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
TEMPERATURE ON RECEIPT-ICED - O9508/01/2002							
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
136	TEMPERATURE AT LAB	E1645696	ICED			9999999	

Analysis Method		Analysis Date	Lab Comment				
NEUTRAL EXTRACT - PCBS - 1210		08/01/2002	SEE ON000272.MM1				
Lab Memo		<p>WISCONSIN STATE LABORATORY OF HYGIENE (WSLH) SAMPLE ON000272, WATER FROM THE HIGH CAP WELL AT THE KAISER PROPERTY IN MILWAUKEE, APPEARS THAT IT IS NOT A HOMOGENEOUS SAMPLE. THIS SAMPLE WAS ANALYZED IN DUPLICATE AS PART OF OUR ROUTINE QUALITY CONTROL PROGRAM. (THIS MEANS THAT TWO OF THE THREE ONE LITER BOTTLES THAT WERE SUBMITTED TO THE LABORATORY WERE TESTED.) PCB-AROCLOR 1260 WAS DETECTED IN ONE OF THE BOTTLES AT 0.23 UG/L. IN THE OTHER BOTTLE, PCB-AROCLOR 1260 WAS DETECTD AT 0.096 UG/L. THE THIRD BOTTLE THAT WAS COLLECTED FROM THIS SITE WAS ALSO ANALYZED BECAUSE OF THE DIFFERENCE IN THESE RESULTS. PCB-AROCLOR 1260 WAS DETECTED IN THE THIRD BOTTLE AT 0.16 UG/L. THE LIMIT OF DETECTION (LOD) FOR PCBS IN A ONE LITER WATER SAMPLE IS 0.18 UG/L. THE OTHER ELEMENTS OF OUR QUALITY CONTROL PROGRAM FOR THIS SAMPLE ARE WITHIN THE ACCEPTANCE CRITERIA. THE PHYSICAL APPEARANCE OF THE SAMPLE IN EACH BOTTLE WAS ALSO VERY DIFFERENT. FROM THIS INFORMATION, IT APPEARS THAT THIS SAMPLE IS NOT HOMOGENEOUS.</p> <p>IF YOU HAVE ANY QUESTIONS, CONTACT DAVID DEGENHARDT (608) 224-6269.</p>					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
39508	PCB 1260	11096825	0.23	UG/L	0.18		0.50

Wisconsin Department of Natural Resources
Laboratory Report

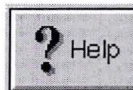
08/27/2002

Lab: 113133790

Sample: ON000272

Page 2 of 2

<i>Analysis Method</i>		<i>Analysis Date</i>		<i>Lab Comment</i>			
NEUTRAL EXTRACTABLE PESTICIDES - RUBBER/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
99430	PREP PESTICIDES BY NEUTRAL EXTRACTION		COMPLE TE				



Analyses Performed (lab comments/method/QC ID)

Lab ID:	113133790	Lab Name:	Wisconsin State Laboratory of Hygiene
Lab Sample ID:	ON000272	Analysis Date:	08/01/2002
Method Text:	NEUTRAL EXTRACT - PCBS - 1210	Lab Comment:	SEE ON000272.MM1
Batch ID:	ON000272	Lab Creation Date:	07/31/2002
Lab Last Update:	08/12/2002	Creation Date:	08/12/2002
Creation User Id:	W19508	Last Update Date:	08/12/2002
Last Update User Id:	W19508		

Associated Text/Memos

Pal = 0.2
ES = 2.0

WISCONSIN STATE LABORATORY OF HYGIENE (WSLH) SAMPLE ON000272, WATER FROM THE HIGH CAP WELL AT THE KAISER PROPERTY IN MILWAUKEE, APPEARS THAT IT IS NOT A HOMOGENEOUS SAMPLE. THIS SAMPLE WAS ANALYZED IN DUPLICATE AS PART OF OUR ROUTINE QUALITY CONTROL PROGRAM. (THIS MEANS THAT TWO OF THE THREE ONE LITER BOTTLES THAT WERE SUBMITTED TO THE LABORATORY WERE TESTED.) PCB-AROCLOR 1260 WAS DETECTED IN ONE OF THE BOTTLES AT 0.23 UG/L. IN THE OTHER BOTTLE, PCB-AROCLOR 1260 WAS DETECTD AT 0.096 UG/L. THE THIRD BOTTLE THAT WAS COLLECTED FROM THIS SITE WAS ALSO ANALYZED BECAUSE OF THE DIFFERENCE IN THESE RESULTS. PCB-AROCLOR 1260 WAS DETECTED IN THE THIRD BOTTLE AT 0.16 UG/L. THE LIMIT OF DETECTION (LOD) FOR PCBS IN A ONE LITER WATER SAMPLE IS 0.18 UG/L. THE OTHER ELEMENTS OF OUR QUALITY CONTROL PROGRAM FOR THIS SAMPLE ARE WITHIN THE ACCEPTANCE CRITERIA. THE PHYSICAL APPEARANCE OF THE SAMPLE IN EACH BOTTLE WAS ALSO VERY DIFFERENT. FROM THIS INFORMATION, IT APPEARS THAT THIS SAMPLE IS NOT HOMOGENEOUS.

IF YOU HAVE ANY QUESTIONS, CONTACT DAVID DEGENHARDT (608) 224-6269.

Record 1 of 1

Sample Results

--	--	--	--	--	--	--	--	--	--

Parameter Code	Parameter Description	Type	Value	Units	LOD	LOQ	Reporting Limit	Reporting Limit	Places	Figs
39508	PCB 1260	3 Between LOD and LOQ	0.23	UG/L	0.18	0.50			2	2

Quality Assurance

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Sample Results

DNR Parameter Code:	39508	DNR Parameter Description:	PCB 1260
Analyte Code:	OA10000040	C.A.S. #:	11096825
Result Type:	3 Between LOD and LOQ	Result value:	0.23
Result Amt:	.23	Units:	UG/L
LOD:	0.18	LOQ:	0.50
Lower Reporting Limit:		Upper Reporting Limit:	
Decimal Places:	2	Sig Figs:	2
NR140 Enforcement Standard:	.03 UG/L	NR140 Preventive Action Limit:	.03 UG/L
Comments/Analysis:	Comments	Creation Date:	08/12/2002
Creation User Id:	W19508	Last Update Date:	08/12/2002
Last Update User Id:	W19508		

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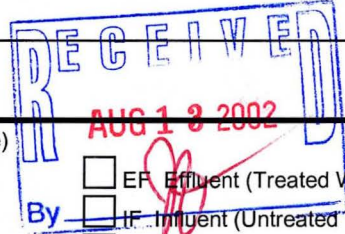
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License, ID, Permit or STORET Number <u>3 4 1 0 5 5 7 7 0</u>	Point, Well or Outfall Number <u>H C 0 0 1</u>	Field Number <u>S A M P L E 0 1</u>	County No. <u>41</u>	Program Code <u>R R</u>	Region <u>2</u>
--	---	--	-------------------------	----------------------------	--------------------

Waterbody Number _____ Sample Address or Location
High Cap Well, Kaiser Prop., 4763 N. 32nd St., Milwaukee, WI

Sample Point Description / Sampling Device
Dual Aquifer High Capacity Well #1 North End of Property



Send Report To		Sample Type (select one)	
DNR User ID <u>hnatj</u>	Date Results Needed (mm/dd/yyyy) <u>08/05/2002</u>	<input type="checkbox"/> SU Surface Water	<input type="checkbox"/> EF Effluent (Treated Wastewater)
Name <u>Hnat, John</u>		<input type="checkbox"/> NP Storm Water	<input type="checkbox"/> IF Influent (Untreated Wastewater)
Address <u>WDNR, 2300 Dr. M L King Dr.</u>		<input type="checkbox"/> SE Sediment	<input type="checkbox"/> MW Monitoring Well
City <u>Milwaukee</u>	State ZIP <u>WI 53212</u>	<input type="checkbox"/> SL Sludge	<input type="checkbox"/> LY Lysimeter
Account Number <u>RR 024</u>	Collected By <u>J. Hnat & Washington Methu</u>	<input type="checkbox"/> LE Leachate	<input type="checkbox"/> SO Soil
Lakes Grant or Project Number	Telephone Number <u>(414) 263-8644</u>	<input type="checkbox"/> TI Tissue	<input type="checkbox"/> OI Oil
Begin or Grab Date (mm/dd/yyyy) <u>07/30/2002</u>	Begin Time (24-hr clock) <u>1003</u>	<input type="checkbox"/> E Public Drinking Entry Point	<input type="checkbox"/> OW Waste
End Date - For Composite Samples Only (mm/dd/yyyy) <u>07/30/2002</u>	End Time (24-hr clock) - For Composite Samples Only <u>1110</u>	<input checked="" type="checkbox"/> W Public Drinking Well/Source	<input type="checkbox"/> PO Private Well
		<input type="checkbox"/> D Public Drinking Distribution	<input type="checkbox"/> X Non-Potable Well
		Sample Reason (Drinking Water - select one)	
		<input type="checkbox"/> N New Well	<input type="checkbox"/> C Confirmation (follow up)
		<input checked="" type="checkbox"/> I Investigation	<input type="checkbox"/> D Compliance
		<input type="checkbox"/> W Raw water (drinking)	
		<input type="checkbox"/> E Enforcement	Depth of Sample (feet or meters) <u>F</u> <u>6</u> <u>0</u> For M
		Is Sample Disinfected? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, how? _____	

VOCs Water / Soil (check one of the following)

Quantification (EPA Method 8260)
 Quantification (Drinking Water-EPA Method 524.2)

Priority Pollutant Scan (Non-VOC)

Priority Pollutant Pesticides
 Priority Pollutant Base/Neutral/Acid

PCBs

Aroclor Identification
 Congeners
 Coplanar

Petroleum Products

Gasoline
 Fuel Oil #1
 Fuel Oil #2
 GRO
 DRO

Pesticides

Carbaryl
 Carbofuran
 2,4-D
 2,4,5-TP
 2,4,5-T
 Chloramben
 Picloram
 Dicamba

Phorate
 Terbufos
 Atrazine
Deethylatrazine
Deisopropylatrazine
Diaminoatrazine

Alachlor
 Metalachlor
 Cyanazine
 Metribuzin
 Simazine
 Prometon

Aldicarb & other carbamates
 Dimethoate
 Dinoseb
 DCPA
 Ethylene Dibromide
 Linuron
 Fonofos
 Butylate
 EPTC
 Formaldehyde (Water Only)

Toxicity Characteristic Leaching Procedure (TCLP)
(Check one or more of the following)

VOCs - TCLP
 Base/Neutral Extractables - TCLP
2,4-Dinitrotoluene
Hexachlorobenzene
Hexachlorobutadiene
Nitrobenzene
Pyridine

Acid Extractables - TCLP
2-Methylphenol
3 & 4-Methylphenol
Pentachlorophenol
2,4,6-Trichlorophenol
2,4,5-Trichlorophenol

Acid Herbicides - TCLP
2,4-D
2,4,5-TP (Silvex)

Chlorinated Pesticides - TCLP
Chlordane
Endrin
Heptachlor
Heptachlor Epoxide
Lindane
Methoxychlor
Toxaphene

Ignitability (Haz. Waste Char.)

Additional parameters

Liquid Chromatography 3 bottles HPLC

For Lab Use: Temp °C iced
Analyst BRW

Date Received _____

07/31/02
11:38
0N000268

①
②

Next Test
High Purity Chromatography to PAHs

DPD

Partial Instructions

See Chapter 4 "Lab Slips" of the *Field Procedures Manual* (see <http://intranet/int/es/science/ls/fpm/IV.htm>) for further instructions and definitions.

The **ID, Permit or STORET Number** and **Point, Well or Outfall Number** fields should contain the appropriate IDs, left justified, for the program system the sample is for:

Program	ID Number	Example	Pt. Well	Example
Water Supply - Privates	Unique Well No.	AA999	Blank	
Water Supply - Publics RAW	PWS ID No.	24100567	Well No.	002
Water Supply - Publics DIST	PWS ID No.	24100567	Blank	
Waste Management	License No.	00130	Point ID	AD6
Watershed Management	Permit No.	0000030	Outfall No.	001
Fish Management & Habitat Protection	Storet No.	265013	Blank	
Remediation & Redevelopment	CERCLIS No.	006094197	Point ID	001
Remediation & Redevelopment	FID	268181770	Point ID	001
Remediation & Redevelopment	Brownfields No.	000000003	Point ID	001

The **Sample Address or Location** field should be the "entity" name, and depends on the program the sample is for. For example, Facility, Site, Licensee, River/Lake, Owner, etc. Following this information, include the address of the facility or site (if appropriate).

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The **Program Code** is a two-digit DNR program abbreviation such as WT for Watershed, DG for Drinking and Groundwater, WA for Waste Management, and etc.

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County Code

Adams	01	Florence	19	Marathon	37	Rusk	55
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Barron	03	Forest	21	Marquette	39	Sauk	57
Bayfield	04	Grant	22	Menominee	40	Sawyer	58
Brown	05	Green	23	Milwaukee	41	Shawano	59
Buffalo	06	Green Lake	24	Monroe	42	Sheboygan	60
Burnett	07	Iowa	25	Oconto	43	Taylor	61
Calumet	08	Iron	26	Oneida	44	Trempealeau	62
Chippewa	09	Jackson	27	Outagamie	45	Vernon	63
Clark	10	Jefferson	28	Ozaukee	46	Vilas	64
Columbia	11	Juneau	29	Pepin	47	Walworth	65
Crawford	12	Kenosha	30	Pierce	48	Washburn	66
Dane	13	Kewaunee	31	Polk	49	Washington	67
Dodge	14	La Crosse	32	Portage	50	Waukesha	68
Door	15	Lafayette	33	Price	51	Waupaca	69
Douglas	16	Langlade	34	Racine	52	Waushara	70
Dunn	17	Lincoln	35	Richland	53	Winnebago	71
Eau Claire	18	Manitowoc	36	Rock	54	Wood	72

Sample Collector(s) John J Hnat & Washington Methu	Title / Work Station Hydrogeologist/Water Spec SER HQ WDNR	Telephone Number (include area code) (414) 263-8644
Property Owner Ed Kaiser Trust	Property Address 4763 North 32nd St., Milwaukee, WI	Telephone Number (include area code) (941) 922-6622

Split Samples: Offered? Yes No

Accepted? Yes No

Accepted By (Signature): _____

Field ID No.	Date	Time	No. of Containers	Station Location Sample Description	Lab ID Number	Lab Use Only			
						Cracked / Broken	Improperly Sealed	Good Condition	Other Comments
Sample 01	07/30/2002	1003	12	High Cap Well #1 @ 60 Ft: 5-VOCs full, 6-VOCs empty, 1-Trip Blank, HC001, Kaiser Property North End	0N000268			<input checked="" type="checkbox"/>	6 bull vials

I hereby certify that I received, properly handled, and disposed of these samples as noted below:

Relinquished By (Signature) <i>Washington Methu</i>	Date / Time 7/30/2002	Received By (Signature) 	Date / Time
Relinquished By (Signature) <i>John Hnat</i>	Date / Time 7/30/02 1445	Received By (Signature) 	Date / Time
Relinquished By (Signature) 	Date / Time 	Received for Laboratory By (Signature) <i>B. Weibel</i>	Date / Time 7/31/02 11:00

Disposition of Unused Portion Sample:

Dispose

Return

Retain for 14 Days

Other _____

**Wisconsin Department of Natural Resources
Laboratory Report**

08/06/2002

Lab: 113133790

Sample: ON000268

Page 1 of 3

Laboratory: Wisconsin State Laboratory of Hygiene
2601 Agriculture Dr
Madison WI 53707
Phone : 800-442-4618 Fax Phone : 608-224-6276

DNR ID 113133790

Sample:

VOCs

Field #: **SAMPLE 01** Sample #: **ON000268**
 Collection Start: **07/30/2002 10:03 am** Collection End: **07/30/2002 11:10 am**
 Collected by: **J. HNAT & WASHINGTON** Waterbody/Outfall Id:
 ID #: **341055770** ID Point #: **HC001**
 County: **Milwaukee** Account #: **RR024**
 Sample Location: **HIGH CAP WELL, KAISER PROP., 4763 N. 32ND ST., MILWAUKEE, WI**
 Sample Description: **DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY**
 Sample Source: **W** Sample Depth: **F 60**
 Date Reported: **08/06/2002** Sample Status: **COMPLETE**
 Project No:

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment				
VOCS IN WATER - EPA METHOD 8260B		08/01/2002					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
77562	1,1,1,2-TETRACHLOROETHANE	630206	ND	UG/L	0.50		1.7
34506	1,1,1-TRICHLOROETHANE	71556	ND	UG/L	0.50		1.7
34516	1,1,2,2-TETRACHLOROETHANE	79345	ND	UG/L	0.50		1.7
34511	1,1,2-TRICHLOROETHANE	79005	ND	UG/L	0.50		1.7
34496	1,1-DICHLOROETHANE	75343	ND	UG/L	0.50		1.7
34501	1,1-DICHLOROETHYLENE	75354	ND	UG/L	0.50		1.7
77168	1,1-DICHLOROPROPENE	563586	ND	UG/L	0.50		1.7
77613	1,2,3-TRICHLOROBENZENE	87616	ND	UG/L	0.50		1.7
77443	1,2,3-TRICHLOROPROPANE	96184	ND	UG/L	1.0		3.3
34551	1,2,4-TRICHLOROBENZENE	120821	ND	UG/L	0.50		1.7
77222	1,2,4-TRIMETHYLBENZENE	95636	ND	UG/L	0.50		1.7
38437	1,2-DIBROMO-3- CHLOROPROPANE	96128	ND	UG/L	1.0		3.3
77651	1,2-DIBROMOETHANE	106934	ND	UG/L	0.50		1.7
34536	1,2-DICHLOROBENZENE	95501	ND	UG/L	0.50		1.7
34531	1,2-DICHLOROETHANE	107062	ND	UG/L	0.50		1.7
34546	1,2-DICHLOROETHYLENE	156605	ND	UG/L	0.50		1.7
77093	1,2-DICHLOROETHYLENE CIS	156592	ND	UG/L	0.50		1.7
34541	1,2-DICHLOROPROPANE	78875	ND	UG/L	0.50		1.7
77226	1,3,5-TRIMETHYLBENZENE	108678	ND	UG/L	0.50		1.7

**Wisconsin Department of Natural Resources
Laboratory Report**

08/06/2002

Lab: 113133790

Sample: ON000268

Page 2 of 3

<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
34566	1,3-DICHLOROBENZENE	541731	ND	UGL	0.50		1.7
77173	1,3-DICHLOROPROPANE	142289	ND	UGL	0.50		1.7
34704	1,3-DICHLOROPROPENE-CIS	10061015	ND	UGL	0.50		1.7
34699	1,3-DICHLOROPROPENE-TRANS	10061026	ND	UGL	1.0		3.3
34571	1,4-DICHLOROBENZENE	106467	ND	UGL	0.50		1.7
77170	2,2-DICHLOROPROPANE	594207	ND	UGL	1.0		3.3
78133	4-METHYL-2-PENTANONE	108101	ND	UGL	3.0		10.
81552	ACETONE	67641	ND	UGL	3.0		10.
34030	BENZENE	71432	ND	UGL	0.50		1.7
81555	BROMOBENZENE	108861	ND	UGL	0.50		1.7
77297	BROMOCHLOROMETHANE	74975	ND	UGL	0.50		1.7
32101	BROMODICHLOROMETHANE	75274	ND	UGL	0.50		1.7
32104	BROMOFORM	75252	ND	UGL	1.0		3.3
34413	BROMOMETHANE	74839	ND	UGL	1.0		3.3
77350	BUTYLBENZENE SEC	135988	ND	UGL	0.50		1.7
77353	BUTYLBENZENE TERT	98066	ND	UGL	0.50		1.7
77041	CARBON DISULFIDE	75150	ND	UGL	3.0		10.
32102	CARBON TETRACHLORIDE	56235	ND	UGL	0.50		1.7
34301	CHLOROBENZENE	108907	ND	UGL	0.50		1.7
34311	CHLOROETHANE	75003	ND	UGL	1.0		3.3
32106	CHLOROFORM	67663	ND	UGL	0.50		1.7
34418	CHLOROMETHANE	74873	ND	UGL	1.0		3.3
32105	DIBROMOCHLOROMETHANE	124481	ND	UGL	1.0		3.3
77596	DIBROMOMETHANE	74953	ND	UGL	0.50		1.7
34668	DICHLORODIFLUOROMETHANE	75718	ND	UGL	1.0		3.3
81577	DIISOPROPYL ETHER	108203	ND	UGL	3.0		10.
34371	ETHYLBENZENE	100414	ND	UGL	0.50		1.7
34391	HEXACHLOROBUTADIENE	87683	ND	UGL	0.50		1.7
77223	ISOPROPYLBENZENE	98828	ND	UGL	0.50		1.7
85795	M/P-XYLENE	136777612	ND	UGL	1.0		3.3
81595	METHYL ETHYL KETONE	78933	ND	UGL	3.0		10.
78032	METHYL TERT BUTYL ETHER	1634044	ND	UGL	1.0		3.3
34423	METHYLENE CHLORIDE	75092	ND	UGL	1.0		3.3
77342	N-BUTYLBENZENE	104518	ND	UGL	0.50		1.7

**Wisconsin Department of Natural Resources
Laboratory Report**

08/06/2002

Lab: 113133790

Sample: ON000268

Page 3 of 3

<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
81590	N-HEXANE	110543	ND	UGL	1.0		3.3
77224	N-PROPYLBENZENE	103651	ND	UGL	0.50		1.7
34696	NAPHTHALENE	91203	ND	UGL	0.50		1.7
77275	O-CHLOROTOLUENE	95498	ND	UGL	0.50		1.7
77135	O-XYLENE	95476	ND	UGL	0.50		1.7
77277	P-CHLOROTOLUENE	106434	ND	UGL	0.50		1.7
77356	P-ISOPROPYLTOLUENE	99876	ND	UGL	0.50		1.7
77128	STYRENE	100425	ND	UGL	0.50		1.7
34475	TETRACHLOROETHYLENE	127184	ND	UGL	0.50		1.7
81607	TETRAHYDROFURAN	109999	ND	UGL	3.0		10.
34010	TOLUENE	108883	ND	UGL	0.50		1.7
39180	TRICHLOROETHYLENE	79016	ND	UGL	0.50		1.7
34488	TRICHLOROFLUOROMETHANE	75694	ND	UGL	1.0		3.3
81611	TRICHLOROTRIFLUOROETHANE	26523648	ND	UGL	3.0		10.
39175	VINYL CHLORIDE	75014	ND	UGL	0.50		1.7

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>
VOCS IN WATER - PREP - EPA METHOD 5080B/2002		
<i>Code</i>	<i>Description</i>	<i>Cas No</i>
99385	PREP VOCS IN WATER METHOD 8260B	
		COMPLE TE

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>
TEMPERATURE ON RECEIPT-ICED - O9507/31/2002		
<i>Code</i>	<i>Description</i>	<i>Cas No</i>
136	TEMPERATURE AT LAB	E1645696
		ICED
		9999999

JOHN HNAT
2300 DR. MARTIN LUTHER KING DR
MILWAUKEE, WI 53212



ENFORCEMENT

Sample(s) will be disposed of ninety (90)
days from the date the sample is reported,
unless this form is completed
and returned to:

Wisconsin State Laboratory of Hygiene
Environmental Sciences Section
Organic Chemistry Unit
2601 Agriculture Drive
P.O. Box 7996
Madison, WI 53707-7996

Collector: J. HNAT & WASHINGTON

Phone Number: (414) 263-8644

Sample Number(s): ON000273

Report date: 08/28/02

Retain sample(s) for ___ days.
 Retain sample(s) until further notice.

Wisconsin State Laboratory of Hygiene
Environmental Sciences Section
Organic Chemistry Unit
2601 Agriculture Drive
P.O. Box 7996
Madison, WI 53707-7996

License, ID, Permit or STORET Number <u>3 4 1 0 5 5 7 7 0</u>	Point, Well or Outfall Number <u>H C 0 0 1</u>	Field Number <u>S A M P L E 0 1</u>	County No. <u>41</u>	Program Code <u>R R</u>	Region <u>2</u>
--	---	--	-------------------------	----------------------------	--------------------

Waterbody Number _____	Sample Address or Location <u>High Cap Well, Kaiser Prop., 4763 N. 32nd St., Milwaukee, WI</u>
---------------------------	---

Sample Point Description / Sampling Device
Dual Aquifer High Capacity Well #1 North End of Property

Send Report To		Sample Type (select one)	
DNR User ID <u>hnatj</u>	Date Results Needed (mm/dd/yyyy) <u>08/05/2002</u> <i>per J. Hnat 7/31/02</i>	<input type="checkbox"/> SU Surface Water	<input type="checkbox"/> EF Effluent (Treated Wastewater)
Name <u>Hnat, John</u>	Address <u>WDNR, 2300 Dr. M L King Dr.</u>	<input type="checkbox"/> NP Storm Water	<input type="checkbox"/> IF Influent (Untreated Wastewater)
City <u>Milwaukee</u>		<input type="checkbox"/> SE Sediment	<input type="checkbox"/> MW Monitoring Well
State <u>WI</u>	ZIP <u>53212</u>	<input type="checkbox"/> SL Sludge	<input type="checkbox"/> LY Lysimeter
Account Number <u>RR024</u>	Collected By <u>J. Hnat & Washington Methu</u>	<input type="checkbox"/> LE Leachate	<input type="checkbox"/> SO Soil
Lakes Grant or Project Number _____	Telephone Number <u>(414) 263-8644</u>	<input type="checkbox"/> TI Tissue	<input type="checkbox"/> OI Oil
Begin or Grab Date (mm/dd/yyyy) <u>07/30/2002</u>	Begin Time (24-hr clock) <u>1003</u>	<input type="checkbox"/> E Public Drinking Entry Point	<input type="checkbox"/> OW Waste
End Date - For Composite Samples Only (mm/dd/yyyy) <u>07/30/2002</u>	End Time (24-hr clock) - For Composite Samples Only <u>1110</u>	<input checked="" type="checkbox"/> W Public Drinking Well/Source	<input type="checkbox"/> PO Private Well
		<input type="checkbox"/> D Public Drinking Distribution	<input type="checkbox"/> X Non-Potable Well
		Sample Reason (Drinking Water - select one)	
		<input type="checkbox"/> N New Well	<input type="checkbox"/> C Confirmation (follow up)
		<input checked="" type="checkbox"/> I Investigation	<input type="checkbox"/> D Compliance
		<input type="checkbox"/> W Raw water (drinking)	
		<input type="checkbox"/> E Enforcement	Depth of Sample (feet or meters) <u>F</u> <u>6</u> <u>0</u> For M
Is Sample Disinfected? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, how? _____			

VOCs Water / Soil (check one of the following)

Quantification (EPA Method 8260)
 Quantification (Drinking Water-EPA Method 524.2)

Priority Pollutant Scan (Non-VOC)

Priority Pollutant Pesticides
 Priority Pollutant Base/Neutral/Acid

PCBs

Aroclor Identification
 Congeners
 Coplanar

Petroleum Products

Gasoline
 Fuel Oil #1
 Fuel Oil #2
 GRO
 DRO

PAHs (GC/MS)
 PAHs (HPLC)

Pesticides

Carbaryl
 Carbofuran
 2,4-D
 2,4,5-TP
 2,4,5-T
 Chloramben
 Picloram
 Dicamba

Phorate
 Terbufos
 Atrazine
Deethylatrazine
Deisopropylatrazine
Diaminoatrazine

Alachlor
 Metalachlor
 Cyanazine
 Metribuzin
 Simazine
 Prometon

Aldicarb & other carbamates
 Dimethoate
 Dinoseb
 DCPA
 Ethylene Dibromide
 Linuron
 Fonofos
 Butylate
 EPTC
 Formaldehyde (Water Only)

Toxicity Characteristic Leaching Procedure (TCLP)
(Check one or more of the following)

VOCs - TCLP
 Base/Neutral Extractables - TCLP
2,4-Dinitrotoluene
Hexachlorobenzene
Hexachlorobutadiene
Nitrobenzene
Pyridine

Acid Extractables - TCLP
2-Methylphenol
3 & 4-Methylphenol
Pentachlorophenol
2,4,6-Trichlorophenol
2,4,5-Trichlorophenol

Acid Herbicides - TCLP
2,4-D
2,4,5-TP (Silvex)


Chlorinated Pesticides - TCLP
Chlordane
Endrin
Heptachlor
Heptachlor Epoxide
Lindane
Methoxychlor
Toxaphene

Ignitability (Haz. Waste Char.)

Additional parameters

For Lab Use: _____
Temp °C 1000
Analyst BRW

Date Received _____

07/31/02
12:19

0N000273

Partial Instructions

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Water Supply - Publics DIST	PWS ID No.	24100567	Blank	
Waste Management	License No.	00130	Point ID	AD6
Watershed Management	Permit No.	0000030	Outfall No.	001
Fish Management & Habitat Protection	Storet No.	265013	Blank	
Remediation & Redevelopment	CERCLIS No.	006094197	Point ID	001
Remediation & Redevelopment	FID	268181770	Point ID	001
Remediation & Redevelopment	Brownfields No.	000000003	Point ID	001

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Barron	03	Forest	21	Marquette	39	Sauk	57
Bayfield	04	Grant	22	Menominee	40	Sawyer	58
Brown	05	Green	23	Milwaukee	41	Shawano	59
Buffalo	06	Green Lake	24	Monroe	42	Sheboygan	60
Burnett	07	Iowa	25	Oconto	43	Taylor	61
Calumet	08	Iron	26	Oneida	44	Trempealeau	62
Chippewa	09	Jackson	27	Outagamie	45	Vernon	63
Clark	10	Jefferson	28	Ozaukee	46	Vilas	64
Columbia	11	Juneau	29	Pepin	47	Walworth	65
Crawford	12	Kenosha	30	Pierce	48	Washburn	66
Dane	13	Kewaunee	31	Polk	49	Washington	67
Dodge	14	La Crosse	32	Portage	50	Waukesha	68
Door	15	Lafayette	33	Price	51	Waupaca	69
Douglas	16	Langlade	34	Racine	52	Waushara	70
Dunn	17	Lincoln	35	Richland	53	Winnebago	71
Eau Claire	18	Manitowoc	36	Rock	54	Wood	72

Sample Collector(s) John J Hnat & Washington Methu	Title / Work Station Hydrogeologist/Water Spec SER HQ WDNR	Telephone Number (include area code) (414) 263-8644
Property Owner Ed Kaiser Trust	Property Address 4763 North 32nd St., Milwaukee, WI	Telephone Number (include area code) (941) 922-6622

Split Samples: Offered? Yes No

Accepted? Yes No Accepted By (Signature): _____

Field ID No.	Date	Time	No. of Containers	Station Location Sample Description	Lab ID Number	Lab Use Only			
						Cracked / Broken	Improperly Sealed	Good Condition	Other Comments
Sample 01	07/30/2002	1003	6	High Cap Well #1 @ 60 Ft: 6-Priority Pollutant Scan Liter Bottles (Non-VOC) HC001	07000273			✓	

I hereby certify that I received, properly handled, and disposed of these samples as noted below:

Relinquished By (Signature) <i>Washington Methu</i>	Date / Time 7/30/02 1445	Received By (Signature)	Date / Time
Relinquished By (Signature) <i>John Hnat</i>	Date / Time 7/30/02 1445	Received By (Signature)	Date / Time
Relinquished By (Signature)	Date / Time	Received for Laboratory By (Signature) <i>B. Weibel</i>	Date / Time 7/31/02 11:30

Disposition of Unused Portion Sample:

Dispose

Return

Retain for 14 Days

Other _____

**Wisconsin Department of Natural Resources
Laboratory Report**

08/28/2002

Lab: 113133790

Sample: ON000273

Page 1 of 3

Laboratory: Wisconsin State Laboratory of Hygiene
2601 Agriculture Dr
Madison WI 53707
Phone: 800-442-4618 Fax Phone: 608-224-6276

DNR ID 113133790

*Row
Ar
son*

Sample:

Priority

Field #: **SAMPLE 01** Sample #: **ON000273**
Collection Start: **07/30/2002 10:03 am** Collection End: **07/30/2002 11:10 am**
Collected by: **J. HNAT & WASHINGTON** Waterbody/Outfall Id:
ID #: **341055770** ID Point #: **HC001**
County: **Milwaukee** Account #: **RR024**
Sample Location: **HIGH CAP WELL, KAISER PROP., 4763 N. 32 ND ST., MILWAUKEE, WI**
Sample Description: **DUAL AQUIFER HIGH CAPACITY WELL #1 NORTH END OF PROPERTY**
Sample Source: **W** Sample Depth: **F 60**
Date Reported: **08/28/2002** Sample Status: **COMPLETE**
Project No:

Analyses and Results:

Analysis Method	Analysis Date	Lab Comment					
SEMI-VOLATILES IN EFFLUENT-BNAS - METHOD 8270/625	08/06/2002	LOD NOT ACHIEVABLE DUE TO DILUTION-*D.					
Code	Description	Cas No	Result	Units	LOD	Report Limit	LOQ
34551	1,2,4-TRICHLOROBENZENE	120821	*D <20.	UG/L	10.		33.
34536	1,2-DICHLOROBENZENE	95501	*D <22.	UG/L	11.		37.
34346	1,2-DIPHENYLHYDRAZINE	122667	*D <10.	UG/L	5.0		17.
34566	1,3-DICHLOROBENZENE	541731	*D <22.	UG/L	11.		37.
34571	1,4-DICHLOROBENZENE	106467	*D <22.	UG/L	11.		37.
79147	2,4,5-TRICHLOROPHENOL	95954	*D <20.	UG/L	10.		33.
34621	2,4,6-TRICHLOROPHENOL	88062	*D <40.	UG/L	20.		67.
34601	2,4-DICHLOROPHENOL	120832	*D <40.	UG/L	20.		67.
34606	2,4-DIMETHYLPHENOL	105679	*D <50.	UG/L	25.		84.
34616	2,4-DINITROPHENOL	51285	*D <30.	UG/L	15.		50.
34611	2,4-DINITROTOLUENE	121142	*D <10.	UG/L	5.0		17.
34626	2,6-DINITROTOLUENE	606202	*D <20.	UG/L	10.		33.
34278	2-CHLOROETHOXY METHANE BIS	111911	*D <22.	UG/L	11.		37.
34273	2-CHLOROETHYL ETHER BIS	111444	*D <26.	UG/L	13.		43.
34581	2-CHLORONAPHTHALENE	91587	*D <20.	UG/L	10.		33.
34586	2-CHLOROPHENOL	95578	*D <56.	UG/L	28.		94.
39100	2-ETHYLHEXYL PHTHALATE BIS	117817	*D <10.	UG/L	5.0		17.
34657	2-METHYL-4,6-DINITROPHENOL	534521	*D <30.	UG/L	15.		50.
77416	2-METHYLNAPHTHALENE	91576	*D <20.	UG/L	10.		33.

*10
element
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77152	2-METHYLPHENOL	95487	*D <22.	UGL	11.		37.
78142	2-NITROANILINE	88744	*D <20.	UGL	10.		33.
34594	2-NITROPHENOL	88755	*D <50.	UGL	25.		84.
34591	2-NITROPHENOL	88755	*D <30.	UGL	15.		50.
34631	3,3'-DICHLOROBENZIDINE	91941	NA				
78300	3-NITROANILINE	99092	NA				
34636	4-BROMOPHENYL PHENYL ETHER	101553	*D <20.	UGL	10.		33.
34452	4-CHLORO-3-METHYLPHENOL	59507	*D <22.	UGL	11.		37.
73529	4-CHLOROANILINE	106478	NA				
34641	4-CHLOROPHENYL PHENYL ETHER	7005723	*D <20.	UGL	10.		33.
77146	4-METHYLPHENOL	106445	*D <24.	UGL	12.		40.
73605	4-NITROANILINE	100016	*D <100.	UGL	50.		160.
34205	ACENAPHTHENE	83329	*D <20.	UGL	10.		33.
34200	ACENAPHTHYLENE	208968	*D <20.	UGL	10.		33.
34220	ANTHRACENE	120127	*D <10.	UGL	5.0		17.
39120	BENZIDINE	92875	NA				
34526	BENZO (A) ANTHRACENE	56553	*D <20.	UGL	10.		33.
34247	BENZO (A) PYRENE	50328	*D <20.	UGL	10.		33.
34230	BENZO (B) FLUORANTHENE	205992	*D <20.	UGL	10.		33.
34521	BENZO (G H I) PERLYENE	191242	*D <20.	UGL	10.		33.
34242	BENZO (K) FLUORANTHENE	207089	*D <10.	UGL	5.0		17.
77247	BENZOIC ACID	65850	*D <40.	UGL	20.		67.
77147	BENZYL ALCOHOL	100516	*D <20.	UGL	10.		33.
34283	BIS 2-CHLOROISOPROPYL ETHER	39638329	*D <24.	UGL	12.		40.
34292	BUTYL BENZYL PHTHALATE	85687	*D <10.	UGL	5.0		16.
34320	CHRYSENE	218019	*D <20.	UGL	10.		33.
39110	DI-N-BUTYL PHTHALATE	84742	*D <10.	UGL	5.0		16.
34556	DIBENZO (A H) ANTHRACENE	53703	*D <20.	UGL	10.		33.
81302	DIBENZOFURAN	132649	*D <10.	UGL	5.0		17.
34336	DIETHYL PHTHALATE	84662	*D <10.	UGL	5.0		16.
34341	DIMETHYL PHTHALATE	131113	*D <20.	UGL	10.		33.
34596	DIOCTYL PHTHALATE	117840	*D <10.	UGL	5.0		17.
34366	FLUORANTHENE	206440	*D <10.	UGL	5.0		17.
34381	FLUORENE	86737	*D <10.	UGL	5.0		17.

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39700	HEXACHLOROBENZENE	118741	*D <20.	UGL	10.		33.
34391	HEXACHLOROBUTADIENE	87683	*D <20.	UGL	10.		33.
34386	HEXACHLOROCYCLOPENTADIENE	77474	*D <20.	UGL	10.		33.
34396	HEXACHLOROETHANE	67721	*D <20.	UGL	10.		33.
34403	INDENO (1,2,3-C D) PYRENE	193395	*D <20.	UGL	10.		33.
34408	ISOPHORONE	78591	*D <20.	UGL	10.		33.
34428	N-NITROSODI-N-PROPYLAMINE	621647	*D <20.	UGL	10.		33.
34438	N-NITROSODIMETHYLAMINE	62759	*D <20.	UGL	10.		33.
34433	N-NITROSODIPHENYLAMINE	86306	*D <20.	UGL	10.		33.
34696	NAPHTHALENE	91203	*D <24.	UGL	12.		40.
34447	NITROBENZENE	98953	*D <24.	UGL	12.		40.
39032	PENTACHLOROPHENOL	87865	*D <30.	UGL	15.		50.
34461	PHENANTHRENE	85018	*D <10.	UGL	5.0		17.
34694	PHENOL	108952	*D <34.	UGL	17.		57.
34469	PYRENE	129000	*D <20.	UGL	10.		33.

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>					
TEMPERATURE ON RECEIPT-ICED - O9507/31/2002							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
136	TEMPERATURE AT LAB	E1645696	ICED			9999999	

<i>Analysis Method</i>	<i>Analysis Date</i>	<i>Lab Comment</i>					
SEMI-VOLATILES-EFFLUENT-PREP-BNAS08/01/2002							
METHOD 3510C							
<i>Code</i>	<i>Description</i>	<i>Cas No</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
99478	PREP SEMI VOLATILES, EPA METHOD 3510C		COMPLE TE			0	