



HAZARDOUS
SITE CONTROL
DIVISION

**Remedial
Planning/
Field
Investigation
Team
(REM/FIT)**

ZONE II

CONTRACT NO.
68-01-6692

CH₂M HILL
Ecology &
Environment

→ Doug Rossberg
LMD

INSPECTION REPORT
FOR
SHAWANO COUNTY
TOWN OF ANIWA ARSENIC
DISPOSAL SITE
ANIWA, WI

WID980905400

R05-8310-01D
DECEMBER 5, 1985

SITE INSPECTION MEMO

1

2070 - 13 FORM

2

SITE MAPS

3

ANALYTICAL DATA

4



ecology and environment, inc.

111 WEST JACKSON BLVD., CHICAGO, ILLINOIS 60604, TEL. 312-663-9415

International Specialists in the Environment

M E M O R A N D U M

DRAFT
SUBJECT TO REVISION

DATE: December 4, 1985
TO: File
FROM: Randall Ekstrom
SUBJECT: Wisconsin/R05-8410-01D/WI0085
Aniwa/Town of Aniwa Arsenic Burial Site
WID980905400

The town of Aniwa Arsenic Burial site is located approximately 2 miles south of the town of Aniwa, in Shawano County (Map 1). The town stored drums of pesticides containing lead arsenate and other arsenic compounds in a shed located on the burial site property. In 1975, these drums were removed from the shed and buried on the property, about 10 feet below the surface. The town board was prepared to sell the property in 1982, and decided to have soil samples analyzed prior to the sale to determine if arsenic contamination had occurred. Soil samples were collected in May 1983, and they showed positive analysis results for arsenic. The exact location of the drums was discovered in August 1983, and 19 drums were excavated and the site was cleaned up by USEPA in 1984. Eight monitoring wells and one domestic well exist on or near the site, and samples from two of the monitoring wells are presently showing arsenic contamination. This site was originally identified by the Wisconsin Department of Natural Resources (WDNR) in the form PA submitted to USEPA.

An on-site inspection of the property was conducted by FIT on July 23, 1985. No samples were collected by FIT as soil and groundwater samples from this site have already shown contamination from arsenic, which has a high toxicity and persistence. The WDNR, however, did collect water samples on this date. Samples were obtained from one domestic well adjacent to the property and eight on-site monitoring

wells (Map 2). Water samples from wells B-13 and B-12 showed arsenic concentrations of 380 and 590 ppb, respectively. All other water samples has concentrations less than 10 ppb.

Approximately 850 people live within 3 miles of this site, and all obtain their drinking water from private wells. Most of these wells draw from the shallow drift aquifer, which is the formation monitoring wells B-13 and B-12 draw from.

570:5W



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 1 - SITE LOCATION AND INSPECTION INFORMATION

I. IDENTIFICATION
01 STATE: WI 02 SITE NUMBER: WID 980905400

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site): Town of Aniwa (Arsenic Burial Site) 02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER: Marsh Rd.

03 CITY: Aniwa 04 STATE: WI 05 ZIP CODE: 54408 06 COUNTY: Shawano 07 COUNTY CODE: 115 08 CONG DIST: 08

09 COORDINATES: LATITUDE 44° 58' 47.0" LONGITUDE 089° 13' 43.0"

10 TYPE OF OWNERSHIP (Check one):
 A. PRIVATE B. FEDERAL C. STATE D. COUNTY E. MUNICIPAL
 F. OTHER G. UNKNOWN

III. INSPECTION INFORMATION

01 DATE OF INSPECTION: 7, 23, 85 02 SITE STATUS: ACTIVE INACTIVE 03 YEARS OF OPERATION: 1935 - 1984 (Beginning Year - Ending Year) UNKNOWN

04 AGENCY PERFORMING INSPECTION (Check all that apply):
 A. EPA B. EPA CONTRACTOR Ecology and Environment C. MUNICIPAL D. MUNICIPAL CONTRACTOR
 E. STATE F. STATE CONTRACTOR G. OTHER

05 CHIEF INSPECTOR <u>Randall Ekstrom</u>	06 TITLE <u>Registered Sanitarian</u>	07 ORGANIZATION <u>Ecology and Environment, Inc.</u>	08 TELEPHONE NO. <u>(312) 663-9415</u>
09 OTHER INSPECTORS <u>Anne Sause</u>	10 TITLE <u>Biologist</u>	11 ORGANIZATION <u>..</u>	12 TELEPHONE NO. <u>() ..</u>
<u>Doug Rossberg</u>	<u>Solid Waste Unit Supervisor</u>	<u>WI Dept. of Natural Resources</u>	<u>(414) 497-4047</u>
			()
			()
			()
13 SITE REPRESENTATIVES INTERVIEWED <u>Pam Sippl</u>	14 TITLE <u>Clerk, Town of Aniwa</u>	15 ADDRESS <u>Rt. 2, Box 97, Birnamwood, WI</u>	16 TELEPHONE NO. <u>(715) 449-2134</u>
			()
			()
			()
			()
			()
			()

17 ACCESS GAINED BY (Check one): PERMISSION WARRANT 18 TIME OF INSPECTION: 9:15 AM 19 WEATHER CONDITIONS: Sunny, warm, temp. 80°, winds 5-10 mph from SE

IV. INFORMATION AVAILABLE FROM

01 CONTACT: Doug Rossberg, James Reyburn 02 OF (Agency/Organization): Wisconsin Department of Natural Resources Green Bay Office 03 TELEPHONE NO.: (414) 497-4047

04 PERSON RESPONSIBLE FOR SITE INSPECTION FORM: Randall Ekstrom 05 AGENCY: F.I.T. USEPA 06 ORGANIZATION: Ecology and Environment, Inc 07 TELEPHONE NO.: 312/663-9415 08 DATE: 7, 25, 85 (Month Day Year)



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 2 - WASTE INFORMATION

I. IDENTIFICATION

D1 STATE: WI D2 SITE NUMBER: WID 980905400

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

D1 PHYSICAL STATES (Check all that apply) <input type="checkbox"/> A SOLID <input type="checkbox"/> E. SLURRY <input checked="" type="checkbox"/> B. POWDER, FINES <input type="checkbox"/> F. LIQUID <input type="checkbox"/> C. SLUDGE <input type="checkbox"/> G. GAS <input type="checkbox"/> D. OTHER _____ (Specify)		D2 WASTE QUANTITY AT SITE (Measures of waste quantities must be independent) TONS _____ CUBIC YARDS _____ NO. OF DRUMS <u>19</u>	D3 WASTE CHARACTERISTICS (Check all that apply) <input checked="" type="checkbox"/> A TOXIC <input checked="" type="checkbox"/> E SOLUBLE <input type="checkbox"/> I. HIGHLY VOLATILE <input type="checkbox"/> B CORROSIVE <input type="checkbox"/> F. INFECTIOUS <input type="checkbox"/> J. EXPLOSIVE <input type="checkbox"/> C. RADIOACTIVE <input type="checkbox"/> G. FLAMMABLE <input type="checkbox"/> K. REACTIVE <input checked="" type="checkbox"/> D. PERSISTENT <input type="checkbox"/> H. IGNITABLE <input type="checkbox"/> L. INCOMPATIBLE <input type="checkbox"/> M. NOT APPLICABLE
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III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	D1 GROSS AMOUNT	D2 UNIT OF MEASURE	D3 COMMENTS
SLU	SLUDGE			
OLW	OILY WASTE			
SOL	SOLVENTS			
PSD	PESTICIDES	19	Drums	18 steel drums of liquid, 1 wooden barrel of powder - All drums contain arsenic pesticide - believed to be lead arsenate, copper acetoarsenite, arsenic trioxide, or sodium arsenate
OCC	OTHER ORGANIC CHEMICALS			
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

D1 CATEGORY	D2 SUBSTANCE NAME	D3 CAS NUMBER	D4 STORAGE/DISPOSAL METHOD	D5 CONCENTRATION	D6 MEASURE OF CONCENTRATION
PSD	Arsenic	7440-38-2	DR	50 to 90	percent
PSD	Lead	7439-92-1	DR	Unknown	
PSD	Copper	7440-50-8	DR	Unknown	
* These compounds are believed to be components of the original arsenic pesticides					

V. FEEDSTOCKS (See Appendix for CAS Numbers)

N/A

CATEGORY	D1 FEEDSTOCK NAME	D2 CAS NUMBER	CATEGORY	D1 FEEDSTOCK NAME	D2 CAS NUMBER
FDS			FDS		
FDS			FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis reports)

- Site inspection and interview of 7/23/85
- Wisconsin Department of Natural Resources (WI DNR) files
- USEPA Technical Assistance Team (TAT) site Assessment and Emergency Action Plan, dated November 1983



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE: WI 02 SITE NUMBER: WJD980905400

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 A. GROUNDWATER CONTAMINATION
02 OBSERVED (DATE: Sept. 1983) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: 852
04 NARRATIVE DESCRIPTION Arsenic was detected in a monitoring well located at the burial area at 1.04 mg./l. Upgradient and other background wells all show arsenic concentrations less than 0.004 mg./l. The USEPA recommended concentration limit for drinking water is 0.05 mg./l. of arsenic.

01 B. SURFACE WATER CONTAMINATION
02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: 0
04 NARRATIVE DESCRIPTION Soil at the site showed some arsenic contamination. Run-off could have carried arsenic into the swamp north of the site. State DNR and town representatives do not believe surface water to be used for drinking, irrigation, or recreation within 3 miles downstream from site.

01 C. CONTAMINATION OF AIR
02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION
None noted.

01 D. FIRE/EXPLOSIVE CONDITIONS
02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION
None noted.

01 E. DIRECT CONTACT
02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: 80
04 NARRATIVE DESCRIPTION Sippl stated that she and another man had unknowingly collected contaminated soil samples with their bare hands and later suffered ill effects.

01 F. CONTAMINATION OF SOIL
02 OBSERVED (DATE: Sept. 1983) POTENTIAL ALLEGED
03 AREA POTENTIALLY AFFECTED: 1/2 (ACRES)
04 NARRATIVE DESCRIPTION Soils at the site showed arsenic contamination up to 39,800 µg./g. Normal background levels of arsenic in the soil appear to be from 1.5 to 4 µg./g. arsenic

01 G. DRINKING WATER CONTAMINATION
02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: 852
04 NARRATIVE DESCRIPTION Water samples from monitoring wells in the shallow drift aquifer show arsenic contamination. The majority of wells in the area are set in this aquifer, although no domestic wells have shown contamination yet.

01 H. WORKER EXPOSURE/INJURY
02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____
04 NARRATIVE DESCRIPTION
None noted concerning employees specifically designated to work with the pesticides/wastes.

01 I. POPULATION EXPOSURE/INJURY
02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
03 POPULATION POTENTIALLY AFFECTED: 80
04 NARRATIVE DESCRIPTION Sippl stated that she and another man were exposed when collecting soil samples bare-handed. She claimed they both had elevated arsenic levels in urine, and that she eventually needed to have a hysterectomy. She stated the other man suffered skin irritation and dermatitis.



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION	
01 STATE WI	02 SITE NUMBER WID 980905400

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 J. DAMAGE TO FLORA 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
04 NARRATIVE DESCRIPTION *sipl stated that there was a distinct lack of plant growth near the shed where wastes were stored prior to the clean-up activities.*

01 K. DAMAGE TO FAUNA 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
04 NARRATIVE DESCRIPTION (include name(s) of species)
None noted.

01 L. CONTAMINATION OF FOOD CHAIN 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
04 NARRATIVE DESCRIPTION
None noted.

01 M. UNSTABLE CONTAINMENT OF WASTES 02 OBSERVED (DATE: *Sept-1983*) POTENTIAL ALLEGED
(Spills/Runoff/Standing liquids, Leaking drums)
03 POPULATION POTENTIALLY AFFECTED: *80* 04 NARRATIVE DESCRIPTION *Soil samples collected inside shed used to store drums of arsenic showed arsenic concentrations of 39,800 mg./l. Contamination is believed to have come from arsenic being spilled or dumped on floor of shed, or from leaking drums.*

01 N. DAMAGE TO OFFSITE PROPERTY 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
04 NARRATIVE DESCRIPTION
None noted.

01 O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
04 NARRATIVE DESCRIPTION
None noted.

01 P. ILLEGAL/UNAUTHORIZED DUMPING 02 OBSERVED (DATE: _____) POTENTIAL ALLEGED
04 NARRATIVE DESCRIPTION
None noted.

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS
Site originally was believed to have 5 or 6 drums, which were buried on site in 1975. However, when clean-up activities were completed in 1984, total of 19 drums had been removed.

III. TOTAL POPULATION POTENTIALLY AFFECTED: 852

IV. COMMENTS

V. SOURCES OF INFORMATION (Give specific references, e.g., state files, sample analysis reports)

- Site inspection and interview of 7/23/85
- Wisconsin DNR files
- USGS topographic maps - 7.5 minute series (Hogarty + Anina quads) and 15 minute series (Wittenberg + Hatley quads).



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION
PART 4 - PERMIT AND DESCRIPTIVE INFORMATION

I. IDENTIFICATION
01 STATE **WI** 02 SITE NUMBER **WID980905400**

II. PERMIT INFORMATION

01 TYPE OF PERMIT ISSUED <i>(Check all that apply)</i>	02 PERMIT NUMBER	03 DATE ISSUED	04 EXPIRATION DATE	05 COMMENTS
<input type="checkbox"/> A. NPDES				
<input type="checkbox"/> B. UIC				
<input type="checkbox"/> C. AIR				
<input type="checkbox"/> D. RCRA				
<input type="checkbox"/> E. RCRA INTERIM STATUS				
<input type="checkbox"/> F. SPCC PLAN				
<input type="checkbox"/> G. STATE <i>(Specify)</i>				
<input type="checkbox"/> H. LOCAL <i>(Specify)</i>				
<input type="checkbox"/> I. OTHER <i>(Specify)</i>				
<input checked="" type="checkbox"/> J. NONE				

III. SITE DESCRIPTION

01 STORAGE/DISPOSAL <i>(Check all that apply)</i>	02 AMOUNT	03 UNIT OF MEASURE	04 TREATMENT <i>(Check all that apply)</i>	05 OTHER
<input type="checkbox"/> A. SURFACE IMPOUNDMENT			<input type="checkbox"/> A. INCENERATION	<input checked="" type="checkbox"/> A. BUILDINGS ON SITE <i>1 shed</i>
<input type="checkbox"/> B. PILES			<input type="checkbox"/> B. UNDERGROUND INJECTION	
<input type="checkbox"/> C. DRUMS, ABOVE GROUND			<input type="checkbox"/> C. CHEMICAL/PHYSICAL	06 AREA OF SITE <i>approx. 1/2 (Acres)</i>
<input type="checkbox"/> D. TANK, ABOVE GROUND			<input type="checkbox"/> D. BIOLOGICAL	
<input type="checkbox"/> E. TANK, BELOW GROUND			<input type="checkbox"/> E. WASTE OIL PROCESSING	
<input checked="" type="checkbox"/> F. LANDFILL	<i>19</i>	<i>drums</i>	<input type="checkbox"/> F. SOLVENT RECOVERY	
<input type="checkbox"/> G. LANDFARM			<input type="checkbox"/> G. OTHER RECYCLING/RECOVERY	
<input type="checkbox"/> H. OPEN DUMP			<input type="checkbox"/> H. OTHER <i>(Specify)</i>	
<input type="checkbox"/> I. OTHER <i>(Specify)</i>			<i>N/A</i>	

07 COMMENTS

Drums were originally stored in an unlocked wooden shed on an unfenced lot. In 1975, the drums were removed from the shed and were buried in a shallow (~10 ft. deep) pit on the site.

IV. CONTAINMENT

01 CONTAINMENT OF WASTES *(Check one)*
 A. ADEQUATE, SECURE B. MODERATE C. INADEQUATE, POOR D. INSECURE, UNSOUND, DANGEROUS

02 DESCRIPTION OF DRUMS, DIKING, LINERS, BARRIERS, ETC.

Drums were buried approximately 10 feet deep, with no liners or leachate collection system. 1 drum was made of wood and contained powder, the other (18) metal drums contained liquid. Some drums were originally kept in a wooden, unlocked shed on site. Site had no fence.

V. ACCESSIBILITY

01 WASTE EASILY ACCESSIBLE: YES NO

02 COMMENTS *wastes themselves were buried; however, waste-contaminated soil was present and easily accessible*

VI. SOURCES OF INFORMATION *(Cite specific references, e.g. state files, sample analysis, reports)*

*- Site inspection and interview of 7/23/85
- Wisconsin DNR Files*



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 5 - WATER, DEMOGRAPHIC, AND ENVIRONMENTAL DATA

I. IDENTIFICATION
D1 STATE: WI D2 SITE NUMBER: W10980905400

II. DRINKING WATER SUPPLY

D1 TYPE OF DRINKING SUPPLY (Check as applicable)	SURFACE		WELL		D2 STATUS			D3 DISTANCE TO SITE	
	A. <input type="checkbox"/>	C. <input type="checkbox"/>	B. <input type="checkbox"/>	D. <input checked="" type="checkbox"/>	ENDANGERED A. <input type="checkbox"/> D. <input type="checkbox"/>	AFFECTED B. <input type="checkbox"/> E. <input type="checkbox"/>	MONITORED C. <input type="checkbox"/> F. <input checked="" type="checkbox"/>	A. <u>> 3</u> (mi)	B. <u>900 ft.</u> (ft) <i>But not 400 ft.</i>
COMMUNITY									
NON-COMMUNITY									

III. GROUNDWATER

D1 GROUNDWATER USE IN VICINITY (Check one)

A ONLY SOURCE FOR DRINKING B DRINKING (Other sources available) COMMERCIAL, INDUSTRIAL, IRRIGATION (No other water sources available) C COMMERCIAL, INDUSTRIAL, IRRIGATION (Limited other sources available) D NOT USED, UNUSEABLE

D2 POPULATION SERVED BY GROUND WATER: 852

D3 DISTANCE TO NEAREST DRINKING WATER WELL: 900 ft. (ft) *400*

D4 DEPTH TO GROUNDWATER: 6 (ft)

D5 DIRECTION OF GROUNDWATER FLOW: S

D6 DEPTH TO AQUIFER OF CONCERN: 25 (ft)

D7 POTENTIAL YIELD OF AQUIFER: 64,800 (gpd)

D8 SOLE SOURCE AQUIFER: YES NO

D8 DESCRIPTION OF WELLS (including usage, depth, and location relative to population and buildings)
wells in vicinity are all drinking water wells which are mainly set in shallow drift aquifer. A few wells are set in the deeper bedrock (granite) aquifer.

10 RECHARGE AREA: YES NO COMMENTS: _____

11 DISCHARGE AREA: YES NO COMMENTS: _____

IV. SURFACE WATER

D1 SURFACE WATER USE (Check one)

A. RESERVOIR, RECREATION DRINKING WATER SOURCE B. IRRIGATION, ECONOMICALLY IMPORTANT RESOURCES C. COMMERCIAL, INDUSTRIAL D. NOT CURRENTLY USED

D2 AFFECTED/POTENTIALLY AFFECTED BODIES OF WATER

NAME:	AFFECTED	DISTANCE TO SITE
<u>Unnamed swamp north of site</u>	<input type="checkbox"/>	<u>adjacent</u> (mi)
_____	<input type="checkbox"/>	_____ (mi)
_____	<input type="checkbox"/>	_____ (mi)

V. DEMOGRAPHIC AND PROPERTY INFORMATION

D1 TOTAL POPULATION WITHIN

ONE (1) MILE OF SITE: A. 80 NO. OF PERSONS

TWO (2) MILES OF SITE: B. 468 NO. OF PERSONS

THREE (3) MILES OF SITE: C. 852 NO. OF PERSONS

D2 DISTANCE TO NEAREST POPULATION: 900 ft. (ft)

D3 NUMBER OF BUILDINGS WITHIN TWO (2) MILES OF SITE: 123

D4 DISTANCE TO NEAREST OFF-SITE BUILDING: 900 ft. (ft)

D5 POPULATION WITHIN VICINITY OF SITE (Provide narrative description of nature of population within vicinity of site, e.g., rural, village, densely populated urban area)
Site is located in a rural area. Town of Aniwa (population 612) is located approx. 2 miles due north of site.



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 5 - WATER, DEMOGRAPHIC, AND ENVIRONMENTAL DATA

I. IDENTIFICATION
01 STATE: WI 02 SITE NUMBER: WID980905 400

VI. ENVIRONMENTAL INFORMATION

01 PERMEABILITY OF UNSATURATED ZONE (Check one)
 A. 10^{-8} - 10^{-6} cm/sec B. 10^{-4} - 10^{-6} cm/sec C. 10^{-4} - 10^{-3} cm/sec D. GREATER THAN 10^{-3} cm/sec

02 PERMEABILITY OF BEDROCK (Check one)
 A. IMPERMEABLE (Less than 10^{-6} cm/sec) B. RELATIVELY IMPERMEABLE (10^{-4} - 10^{-6} cm/sec) C. RELATIVELY PERMEABLE (10^{-2} - 10^{-4} cm/sec) D. VERY PERMEABLE (Greater than 10^{-2} cm/sec)

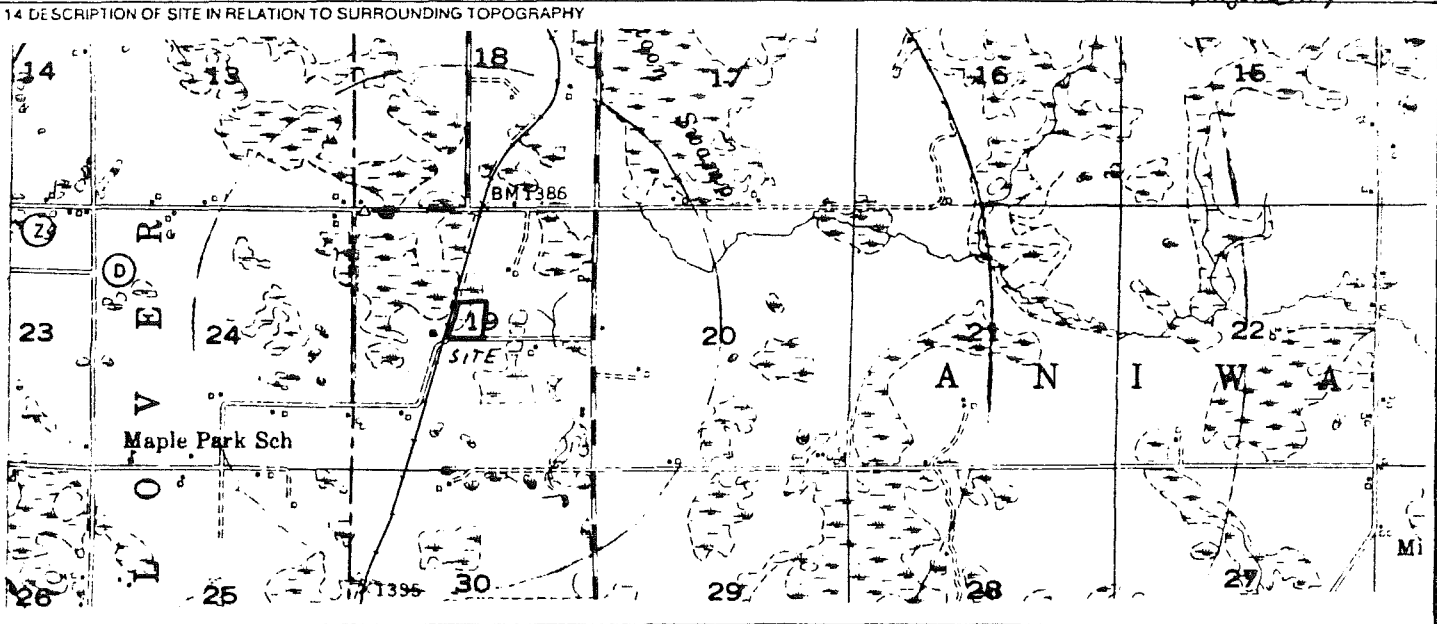
03 DEPTH TO BEDROCK: 80 (ft) 04 DEPTH OF CONTAMINATED SOIL ZONE: 12.5 (ft) 05 SOIL pH: 4.5 - 7.3

06 NET PRECIPITATION: 2 (in) 07 ONE YEAR 24 HOUR RAINFALL: 2 (in) 08 SLOPE SITE SLOPE: 0-3 % DIRECTION OF SITE SLOPE: N TERRAIN AVERAGE SLOPE: 0-3 %

09 FLOOD POTENTIAL: SITE IS IN Unknown YEAR FLOODPLAIN 10 SITE IS ON BARRIER ISLAND, COASTAL HIGH HAZARD AREA, RIVERINE FLOODWAY

11 DISTANCE TO WETLANDS (5 acre minimum): ESTUARINE A. — (mi) OTHER B. 0 (mi) 12 DISTANCE TO CRITICAL HABITAT (of endangered species): >3 (mi) ENDANGERED SPECIES: _____

13 LAND USE IN VICINITY
DISTANCE TO:
A. >3 (mi) COMMERCIAL/INDUSTRIAL B. 2 (mi) RESIDENTIAL AREAS, NATIONAL/STATE PARKS, FORESTS, OR WILDLIFE RESERVES C. — (mi) AGRICULTURAL LANDS PRIME AG LAND D. 0 (mi) AG LAND (Adjacent)



VII. SOURCES OF INFORMATION (Cite specific references, e.g., State files, sample analysis reports)

- Site inspection and interview of 7/23/85
- Wisconsin DNR Files
- Shawano County Soil Survey, 1981
- USGS Topographic Maps: 7.5 Minute Series (Hogarty + Aniwa quads) and 15 Minute series (Wittenberg + Hatley quads)



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 6 - SAMPLE AND FIELD INFORMATION

I. IDENTIFICATION	
D1 STATE	D2 SITE NUMBER
WI	WID 980905400

II. SAMPLES TAKEN *None by FIT*

SAMPLE TYPE	D1 NUMBER OF SAMPLES TAKEN	D2 SAMPLES SENT TO	D3 ESTIMATED DATE RESULTS AVAILABLE
GROUNDWATER	8	(samples taken by WDIR) Wisconsin State Lab	8-10 wks
SURFACE WATER			
WASTE			
AIR			
RUNOFF			
SPILL			
SOIL			
VEGETATION			
OTHER			

III. FIELD MEASUREMENTS TAKEN

D1 TYPE	D2 COMMENTS
H. Nu	Background = 1ppm; On-site breathing zone, and at tops of open wells = 1ppm.

IV. PHOTOGRAPHS AND MAPS

D1 TYPE <input checked="" type="checkbox"/> GROUND <input type="checkbox"/> AERIAL	D2 IN CUSTODY OF <u>Ecology and Environment, Inc.</u> <small>(Name of organization or individual)</small>
D3 MAPS <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	D4 LOCATION OF MAPS <u>Ecology and Environment, Inc; Chicago office</u>

V. OTHER FIELD DATA COLLECTED (Provide narrative description)

None by FIT

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

- Site inspection and interview of 7/23/85
- Wisconsin DNR files



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 7 - OWNER INFORMATION

I. IDENTIFICATION	
01 STATE WI	02 SITE NUMBER WJD 980905 400

II. CURRENT OWNER(S)					PARENT COMPANY (If applicable)				
01 NAME Town of Aniwa (c/o Pam Sipp)			02 D+B NUMBER None		08 NAME N/A			09 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.) Rt. 2, Box 97			04 SIC CODE None		10 STREET ADDRESS (P.O. Box, RFD #, etc.)			11 SIC CODE	
05 CITY Birnamwood		06 STATE WI	07 ZIP CODE 54408		12 CITY		13 STATE	14 ZIP CODE	
01 NAME			02 D+B NUMBER		08 NAME			09 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE		10 STREET ADDRESS (P.O. Box, RFD #, etc.)			11 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE		12 CITY		13 STATE	14 ZIP CODE	
01 NAME			02 D+B NUMBER		08 NAME			09 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE		10 STREET ADDRESS (P.O. Box, RFD #, etc.)			11 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE		12 CITY		13 STATE	14 ZIP CODE	
01 NAME			02 D+B NUMBER		08 NAME			09 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE		10 STREET ADDRESS (P.O. Box, RFD #, etc.)			11 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE		12 CITY		13 STATE	14 ZIP CODE	
III. PREVIOUS OWNER(S) (List most recent first)					IV. REALTY OWNER(S) (If applicable; list most recent first)				
01 NAME N/A			02 D+B NUMBER		01 NAME - Same as Owner -			02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE		05 CITY		06 STATE	07 ZIP CODE	
01 NAME			02 D+B NUMBER		01 NAME			02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE		05 CITY		06 STATE	07 ZIP CODE	
01 NAME			02 D+B NUMBER		01 NAME			02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	
05 CITY		06 STATE	07 ZIP CODE		05 CITY		06 STATE	07 ZIP CODE	
V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)									
- Site inspection and interview of 7/23/85 - Wisconsin DNR Files									



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART B - OPERATOR INFORMATION

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
WI WIP980905400

II. CURRENT OPERATOR (Provide # different from owner)				OPERATOR'S PARENT COMPANY (if applicable)			
01 NAME None		02 D+B NUMBER		10 NAME N/A		11 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	12 STREET ADDRESS (P.O. Box, RFD #, etc.)			13 SIC CODE
05 CITY		06 STATE	07 ZIP CODE	14 CITY		15 STATE	16 ZIP CODE
08 YEARS OF OPERATION		09 NAME OF OWNER					
III. PREVIOUS OPERATOR(S) (List most recent first, provide only # different from owner)				PREVIOUS OPERATORS' PARENT COMPANIES (if applicable)			
01 NAME Town of Aniwa, c/o Pam Sippl		02 D+B NUMBER None		10 NAME N/A		11 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.) Rte. 2, Box 97			04 SIC CODE None	12 STREET ADDRESS (P.O. Box, RFD #, etc.)			13 SIC CODE
05 CITY Birnamwood		06 STATE WI	07 ZIP CODE 54408	14 CITY		15 STATE	16 ZIP CODE
08 YEARS OF OPERATION 1935-1975		09 NAME OF OWNER DURING THIS PERIOD Town of Aniwa					
01 NAME		02 D+B NUMBER		10 NAME		11 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	12 STREET ADDRESS (P.O. Box, RFD #, etc.)			13 SIC CODE
05 CITY		06 STATE	07 ZIP CODE	14 CITY		15 STATE	16 ZIP CODE
08 YEARS OF OPERATION		09 NAME OF OWNER DURING THIS PERIOD					
01 NAME		02 D+B NUMBER		10 NAME		11 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)			04 SIC CODE	12 STREET ADDRESS (P.O. Box, RFD #, etc.)			13 SIC CODE
05 CITY		06 STATE	07 ZIP CODE	14 CITY		15 STATE	16 ZIP CODE
08 YEARS OF OPERATION		09 NAME OF OWNER DURING THIS PERIOD					
IV. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis reports)							
- site inspection and interview of 7/23/85 - Wisconsin DNR files							



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 9 - GENERATOR/TRANSPORTER INFORMATION

I. IDENTIFICATION	
01 STATE WI	02 SITE NUMBER WID 980905400

II. ON-SITE GENERATOR

01 NAME N/A		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE	

III. OFF-SITE GENERATOR(S)

01 NAME Unknown*		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE		05 CITY	06 STATE	07 ZIP CODE	
01 NAME		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE		05 CITY	06 STATE	07 ZIP CODE	

IV. TRANSPORTER(S)

01 NAME N/A		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE		05 CITY	06 STATE	07 ZIP CODE	
01 NAME		02 D+B NUMBER		01 NAME		02 D+B NUMBER	
03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE		03 STREET ADDRESS (P.O. Box, RFD #, etc.)		04 SIC CODE	
05 CITY	06 STATE	07 ZIP CODE		05 CITY	06 STATE	07 ZIP CODE	

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

- Site inspection and interview of 7/23/85
- Wisconsin DNR files

* Pesticide was formulated by an unknown manufacturer, bought by the Dept. of Agriculture, and given to the Town of Aniwa to control grasshoppers.



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 10 - PAST RESPONSE ACTIVITIES

I. IDENTIFICATION
01 STATE WI 02 SITE NUMBER WID980905400

II. PAST RESPONSE ACTIVITIES

01 <input type="checkbox"/> A. WATER SUPPLY CLOSED 04 DESCRIPTION <u>N/A</u>	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> B. TEMPORARY WATER SUPPLY PROVIDED 04 DESCRIPTION <u>N/A</u>	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> C. PERMANENT WATER SUPPLY PROVIDED 04 DESCRIPTION <u>N/A</u>	02 DATE _____	03 AGENCY _____
01 <input checked="" type="checkbox"/> D. SPILLED MATERIAL REMOVED 04 DESCRIPTION <u>spilled arsenic pesticide was removed during site clean-up.</u>	02 DATE <u>July 1984</u>	03 AGENCY <u>USEPA/WI DNR</u>
01 <input checked="" type="checkbox"/> E. CONTAMINATED SOIL REMOVED 04 DESCRIPTION <u>Contaminated soil (45 cubic yards) was removed during site cleanup.</u>	02 DATE <u>July 1984</u>	03 AGENCY <u>USEPA/WI DNR</u>
01 <input checked="" type="checkbox"/> F. WASTE REPACKAGED 04 DESCRIPTION <u>19 drums of arsenic pesticide were repackaged during site clean-up.</u>	02 DATE <u>July 1984</u>	03 AGENCY <u>USEPA/WI DNR</u>
01 <input checked="" type="checkbox"/> G. WASTE DISPOSED ELSEWHERE 04 DESCRIPTION <u>waste materials were removed from site and were disposed of by Chemical Waste Management of Alabama.</u>	02 DATE <u>July 1984</u>	03 AGENCY <u>USEPA/WI DNR</u>
01 <input type="checkbox"/> H. ON SITE BURIAL 04 DESCRIPTION <u>N/A</u>	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> I. IN SITU CHEMICAL TREATMENT 04 DESCRIPTION <u>N/A</u>	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> J. IN SITU BIOLOGICAL TREATMENT 04 DESCRIPTION <u>N/A</u>	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> K. IN SITU PHYSICAL TREATMENT 04 DESCRIPTION <u>N/A</u>	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> L. ENCAPSULATION 04 DESCRIPTION <u>N/A</u>	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> M. EMERGENCY WASTE TREATMENT 04 DESCRIPTION <u>N/A</u>	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> N. CUTOFF WALLS 04 DESCRIPTION <u>N/A</u>	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> O. EMERGENCY DIKING/SURFACE WATER DIVERSION 04 DESCRIPTION <u>N/A</u>	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> P. CUTOFF TRENCHES/SUMP 04 DESCRIPTION <u>N/A</u>	02 DATE _____	03 AGENCY _____
01 <input type="checkbox"/> Q. SUBSURFACE CUTOFF WALL 04 DESCRIPTION <u>N/A</u>	02 DATE _____	03 AGENCY _____



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 10 - PAST RESPONSE ACTIVITIES

I. IDENTIFICATION

01 STATE WI 02 SITE NUMBER WID 980905 400

II PAST RESPONSE ACTIVITIES (Continued)

01 R. BARRIER WALLS CONSTRUCTED 02 DATE _____ 03 AGENCY _____
04 DESCRIPTION N/A

01 S. CAPPING/COVERING 02 DATE July 1984 03 AGENCY USEPA / WI DNR
04 DESCRIPTION Areas where drums and/or contaminated soil were located have been covered with 12 inches of clay.

01 T. BULK TANKAGE REPAIRED 02 DATE _____ 03 AGENCY _____
04 DESCRIPTION N/A

01 U. GROUT CURTAIN CONSTRUCTED 02 DATE _____ 03 AGENCY _____
04 DESCRIPTION N/A

01 V. BOTTOM SEALED 02 DATE _____ 03 AGENCY _____
04 DESCRIPTION N/A

01 W. GAS CONTROL 02 DATE _____ 03 AGENCY _____
04 DESCRIPTION N/A

01 X. FIRE CONTROL 02 DATE _____ 03 AGENCY _____
04 DESCRIPTION N/A

01 Y. LEACHATE TREATMENT 02 DATE _____ 03 AGENCY _____
04 DESCRIPTION N/A

01 Z. AREA EVACUATED 02 DATE _____ 03 AGENCY _____
04 DESCRIPTION N/A

01 1. ACCESS TO SITE RESTRICTED 02 DATE August 1983 03 AGENCY WI DNR
04 DESCRIPTION state had site fenced after drums were found. Site remained fenced until clean-up was complete. During cleanup, road to site was also closed.

01 2. POPULATION RELOCATED 02 DATE _____ 03 AGENCY _____
04 DESCRIPTION N/A

01 3. OTHER REMEDIAL ACTIVITIES 02 DATE _____ 03 AGENCY _____
04 DESCRIPTION N/A

III. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

- Site inspection and interview of 7/23/85
- Wisconsin DNR files.



POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT
PART 11 - ENFORCEMENT INFORMATION

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
WI	WFD480905400

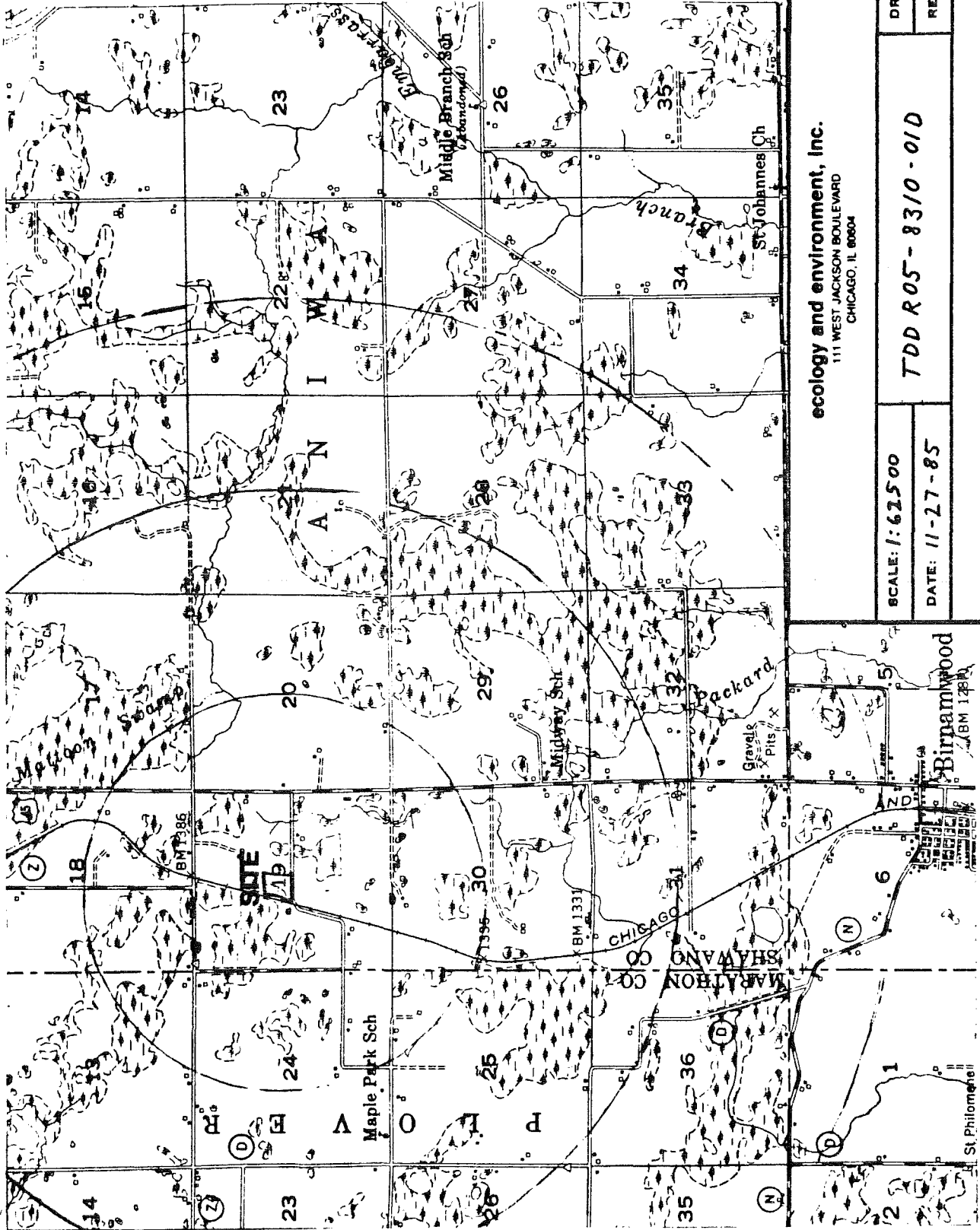
II. ENFORCEMENT INFORMATION

01 PAST REGULATORY/ENFORCEMENT ACTION YES NO

02 DESCRIPTION OF FEDERAL, STATE, LOCAL REGULATORY/ENFORCEMENT ACTION

III. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

- Site inspection and interview of 7/23/95
- Wisconsin DNR Files



ecology and environment, Inc.
 111 WEST JACKSON BOULEVARD
 CHICAGO, IL 60604

SCALE: 1:62500	DRAWN BY <i>R. Shute</i>
DATE: 11-27-85	REVISED
TDD R05-8310-01D	
TOWN OF ANIWA ARSENIC BURIAL SITE	
SITE LOCATION	
DRAWING NUMBER 1	

TOWN OF ANIWA



B-10

B-11

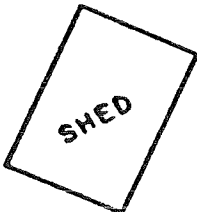
B-18

TEST PIT

FOUNDATION

B-13

B-13A



B-19

B-20

B-12

Burkart well

MARSH

RD.

LEGEND

⊕ OBSERVATION WELL

ecology and environment, Inc.
111 WEST JACKSON BOULEVARD
CHICAGO, IL 60604

SCALE: 1" = 20'	ROS-8310-01D	DRAWN BY <i>R. [Signature]</i>
DATE: 11-27-85		REVISED

TOWN OF ANIWA ARSENIC BURIAL SITE

WELL LOCATIONS	DRAWING NUMBER 2
----------------	---------------------

Bill To: Hazardous Waste Non-Hazardous Waste Spill Program

1985

City Name TW ANIWA
County SHAWANO
Collection Date: 07/23/85
M M D D Y Y
Sample Location BLANK.
Sample Description _____

Lic. No. 0 Field No. BLANK
County Code 59 DNR Point ID No. _____
Time (24-Hour Clock): 15:00
H H M M

Send Report To:

Name J. Reyburn - DNR
Address Box 10408
City, State, Zip Code Green Bay

Collected By Reyburn
Telephone (414) 497-4397



Sample Type: M Monitoring Well, P Private well, L Lysimeter, S Surface Water, U Sludge, W Waste, L Leachate

Filtered: Yes, No

Enforcement: Yes, No

Split Sample: Yes, No

RCRA: Yes, No

Depth to Water (Ft.) _____
00842 047 Water Elevation (MSL) _____
00010 031 Temperature (°C) Field _____
Cond-Field (Uncorrected) _____
00872 015 Cond-Field (µMHOS/CM@25°C) _____
00400 006 pH - Field (su) _____

WA

Total: D - Dissolved

00410	<input type="checkbox"/>	002 T	Alkalinity (as CaCO ₃)	_____ mg/l
00306	<input type="checkbox"/>	033 D		
00000	<input checked="" type="checkbox"/>	004 T	Arsenic (As)	<u>< 10</u> µg/l
00000	<input type="checkbox"/>	038 D		
00007	<input type="checkbox"/>	023 T	Barium (Ba)	_____ µg/l
00005	<input type="checkbox"/>	039 D		
00310	<input type="checkbox"/>	024 T	BOD-5 Day	_____ mg/l
00311	<input type="checkbox"/>	037 D		
00022	<input type="checkbox"/>	004 T	Boron (B)	_____ µg/l
00020	<input type="checkbox"/>	038 D		
00120	<input type="checkbox"/>	031 T	Cadmium (Cd)	_____ µg/l
00312	<input type="checkbox"/>	020 D		
00916	<input type="checkbox"/>	002 T	Calcium (Ca)	_____ mg/l
00915	<input type="checkbox"/>	034 D		
00340	<input type="checkbox"/>	033 T	COD	_____ mg/l
00116	<input type="checkbox"/>	024 D		
00395	<input type="checkbox"/>	014	Cond-Lab (µmhos) @25°C	_____
00307	<input type="checkbox"/>	005	Chloride (Cl)	_____ mg/l
00122	<input type="checkbox"/>	003 T	Chromium (Cr)	_____ µg/l
00273	<input type="checkbox"/>	028 D		
00274	<input type="checkbox"/>	003 T	Chromium Hex	_____ µg/l
00220	<input type="checkbox"/>	028 D		
00123	<input checked="" type="checkbox"/>	004 T	Copper (Cu)	<u>6</u> µg/l
00277	<input type="checkbox"/>	024 D		
00305	<input type="checkbox"/>	003 T	Fluoride (F)	_____ mg/l
00950	<input type="checkbox"/>	022 D		
00900	<input type="checkbox"/>	008 T	Hardness (as CaCO ₃)	_____ mg/l
00000	<input type="checkbox"/>	003 T	Iron (Fe) Total	_____ mg/l
00046	<input type="checkbox"/>	004 D	Iron Dissolved	_____ µg/l

00125	<input checked="" type="checkbox"/>	004 T	Lead (Pb)	<u>< 3</u> µg/l
00240	<input type="checkbox"/>	058 D		
00348	<input type="checkbox"/>	076 T	Magnesium (Mg)	_____ mg/l
00925	<input type="checkbox"/>	037 D		
00253	<input type="checkbox"/>	079 T	Manganese (Mn)	_____ µg/l
00316	<input type="checkbox"/>	045 D		
00126	<input type="checkbox"/>	000 T	Mercury (Hg)	_____ µg/l
71890	<input type="checkbox"/>	041 D		
00631	<input type="checkbox"/>	005 D	NO ₃ + NO ₂ (as N)	_____ mg/l
00625	<input type="checkbox"/>	007 T	Kjeldahl-N	_____ mg/l
00623	<input type="checkbox"/>	016 D		
00403	<input type="checkbox"/>	007	pH - Lab (su)	_____
00270	<input type="checkbox"/>	010 T	Selenium (Se)	_____ µg/l
01145	<input type="checkbox"/>	000 D		
00929	<input checked="" type="checkbox"/>	003 T	Sodium (Na)	<u>< 1</u> mg/l
00930	<input type="checkbox"/>	005 D		
00945	<input type="checkbox"/>	006 T	Sulfate (SO ₄)	_____ mg/l
00946	<input type="checkbox"/>	006 D		
00247	<input type="checkbox"/>	000 T	Total Solids	_____ mg/l
00360	<input type="checkbox"/>	004 B	Total Dis. Solids	_____ mg/l
00131	<input type="checkbox"/>	000 T	Zinc (Zn)	_____ µg/l
00275	<input type="checkbox"/>	000 D		

Comments or Additional Parameters
SACU

BAS

7505008495

R. H. Laessig, Ph.D., Director
Wisconsin State Laboratory of Hygiene
Madison, Wisconsin 53706

Date Received and Sample Number _____
Date Reported AUG 28 1985

Waste To: Hazardous Waste Non-Hazardous Waste Spill Program

SLP 4 1985

City Name TI ANIWA

Lic. No. 0 Field No. BURKART

County Shoumo

County Code 59 DNR Point ID No. _____

Collection Date: 07/23/85
M M D D Y Y

Time (24-Hour Clock): 12:00
H H M M

Sample Location _____

Sample Description _____

Name	<u>J. Reburn - DNR</u>
Address	<u>Box 1048</u>
City, State, Zip Code	<u>Green Bay.</u>

Collected By BRAND

Telephone 414 497-4397



Sample Type

Monitoring Well Soil

Private well Sludge

Lysimeter Waste

Surface Water Leachate

Filtered
 Yes No

Enforcement
 Yes No

Split Sample
 Yes No

RCRA
 Yes No

Depth to Water (Ft.) _____

Water Elevation (MSL) _____

Temperature (°C) Field _____

Cond-Field (Uncorrected) _____

Cond-Field (µMHOS/CM@25°C) _____

pH - Field (su) _____

Code	Type	Parameter	Unit	Value
00410	T	Alkalinity (as CaCO ₃)	mg/l	_____
00936	D	Alkalinity (as CaCO ₃)	mg/l	_____
00107	T	Arsenic (As)	µg/l	<u>< 10</u>
01005	D	Arsenic (As)	µg/l	_____
00310	T	Barium (Ba)	µg/l	_____
00311	D	Barium (Ba)	µg/l	_____
00102	T	Boron (B)	µg/l	_____
01020	D	Boron (B)	µg/l	_____
00120	T	Cadmium (Cd)	µg/l	_____
00312	D	Cadmium (Cd)	µg/l	_____
00916	T	Calcium (Ca)	mg/l	_____
00915	D	Calcium (Ca)	mg/l	_____
00340	T	COD	mg/l	_____
00116	D	COD	mg/l	_____
00995	T	Cond-Lab (µmhos) @25°C	_____	_____
00307	T	Chloride (Cl)	mg/l	_____
00122	T	Chromium (Cr)	µg/l	_____
00273	D	Chromium (Cr)	µg/l	_____
00274	T	Chromium Hex	µg/l	_____
00220	D	Chromium Hex	µg/l	_____
00123	T	Copper (Cu)	µg/l	<u>< 3</u>
00277	D	Copper (Cu)	µg/l	_____
00305	T	Fluoride (F)	mg/l	_____
00950	D	Fluoride (F)	mg/l	_____
00900	T	Hardness (as CaCO ₃)	mg/l	_____
00173	T	Iron (Fe) Total	mg/l	_____
0046	D	Iron Dissolved	µg/l	_____

00125	T	Lead (Pb)	µg/l	<u>< 3</u>
00240	D	Lead (Pb)	µg/l	_____
00348	T	Magnesium (Mg)	mg/l	_____
00925	D	Magnesium (Mg)	mg/l	_____
00253	T	Manganese (Mn)	µg/l	_____
00316	D	Manganese (Mn)	µg/l	_____
00126	T	Mercury (Hg)	µg/l	_____
71890	D	Mercury (Hg)	µg/l	_____
00631	T	NO ₃ + NO ₂ (as N)	mg/l	_____
00625	T	Kjeldahl-N	mg/l	_____
00623	D	Kjeldahl-N	mg/l	_____
00403	T	pH - Lab (su)	_____	_____
00270	T	Selenium (Se)	µg/l	_____
01145	D	Selenium (Se)	µg/l	_____
00929	T	Sodium (Na)	mg/l	<u>2</u>
00930	D	Sodium (Na)	mg/l	_____
00945	T	Sulfate (SO ₄)	mg/l	_____
00946	D	Sulfate (SO ₄)	mg/l	_____
00247	T	Total Solids	mg/l	_____
00360	D	Total Dis. Solids	mg/l	_____
00131	T	Zinc (Zn)	µg/l	_____
00275	D	Zinc (Zn)	µg/l	_____

Comments or Additional Parameters

R. H. Laessig, Ph.D., Director
Wisconsin State Laboratory of Hygiene
Madison, Wisconsin 53706

Date Received and Sample Number JUL 25 05 006496
Date Reported AUG 28 1985

Bill To: Hazardous Waste Non-Hazardous Waste Spill Program

SEP 4 1985

City Name TP Aniwa

Lic. No. 0 Field No. B-10

County Shouano

County Code 59 DNR Point ID No. _____

Collection Date: 07/23/85
M M D D Y Y

Time (24-Hour Clock): 15:00
H H M M

Sample Location _____

Sample Description monitor well

Send Report To:

Name	<u>Reyburn - DNR</u>
Address	<u>Box 10448</u>
City, State, Zip Code	<u>Green Bay</u>

Collected By Reyburn

Telephone (414) 497-4397



Sample Type

- Monitoring Well
- Private well
- Lysimeter
- Surface Water
- Soil
- Sludge
- Waste
- Leachate

Filtered

Yes No

Enforcement

Yes No

Split Sample

Yes No

RCRA

Yes No

WA

Depth to Water (Ft.) 8.21

00842 Water Elevation (MSL) _____

00010 Temperature (°C) Field _____

Cond-Field (Uncorrected) _____

00872 Cond-Field (µMHOS/CM@25°C) _____

00400 pH - Field (su) _____

Code	Type	Parameter	Result
00410	<input type="checkbox"/>	Alkalinity (as CaCO ₃)	_____ mg/l
00936	<input type="checkbox"/>	Arsenic (As)	<u><10</u> µg/l
001007	<input type="checkbox"/>	Barium (Ba)	_____ µg/l
001005	<input type="checkbox"/>	BOD-5 Day	_____ mg/l
001022	<input type="checkbox"/>	Boron (B)	_____ µg/l
001020	<input type="checkbox"/>	Cadmium (Cd)	_____ µg/l
000916	<input type="checkbox"/>	Calcium (Ca)	_____ mg/l
000915	<input type="checkbox"/>	COD	_____ mg/l
000340	<input type="checkbox"/>	Cond-Lab (µmhos) @25°C	_____
000116	<input type="checkbox"/>	Chloride (Cl)	_____ mg/l
000307	<input type="checkbox"/>	Chromium (Cr)	_____ µg/l
000122	<input type="checkbox"/>	Chromium Hex	_____ µg/l
000273	<input type="checkbox"/>	Copper (Cu)	<u>53</u> µg/l
000274	<input type="checkbox"/>	Fluoride (F)	_____ mg/l
000123	<input type="checkbox"/>	Hardness (as CaCO ₃)	_____ mg/l
000277	<input type="checkbox"/>	Iron (Fe) Total	_____ mg/l
000305	<input type="checkbox"/>	Iron Dissolved	_____ µg/l

00125	<input checked="" type="checkbox"/>	Lead (Pb)	<u><3</u> µg/l
00240	<input type="checkbox"/>	Magnesium (Mg)	_____ mg/l
00348	<input type="checkbox"/>	Manganese (Mn)	_____ µg/l
00925	<input type="checkbox"/>	Mercury (Hg)	_____ µg/l
00253	<input type="checkbox"/>	NO ₃ + NO ₂ (as N)	_____ mg/l
00316	<input type="checkbox"/>	Kjeldahl-N	_____ mg/l
00126	<input type="checkbox"/>	pH - Lab (su)	_____
71890	<input type="checkbox"/>	Selenium (Se)	_____ µg/l
00631	<input type="checkbox"/>	Sodium (Na)	<u>1</u> mg/l
00625	<input type="checkbox"/>	Sulfate (SO ₄)	_____ mg/l
00623	<input type="checkbox"/>	Total Solids	_____ mg/l
00403	<input type="checkbox"/>	Total Dis. Solids	_____ mg/l
00270	<input type="checkbox"/>	Zinc (Zn)	_____ µg/l
01145	<input type="checkbox"/>		

Comments or Additional Parameters

very little water in well

not able to do ph, temp cons

216 SA Cu

216 SA Cu

R. H. Laessig, Ph.D., Director
Wisconsin State Laboratory of Hygiene
Madison, Wisconsin 53706

Date Received and Sample Number JUL 25 1985 L 08497

Date Reported AUG 28 1985

Bill To: Hazardous Waste Non-Hazardous Waste Spill Program

SL 4 1985

City Name Tr Aa.wa
County Shawano
Collection Date: 07/23/85
M M / D D / Y Y

Lic No. 0 Field No. B-11
County Code 59 DNR Point ID No. _____
Time (24-Hour Clock): 15:00
H H / M M

Sample Location _____
Sample Description mountain well

Send Report To: Name J. Reburn - DNR
Address Box 10448
City, State, Zip Code Green Bay WI

Collected By Reburn J
Telephone (414) 497-4397



Sample Type

Monitoring Well Soil
 Private well Sludge
 Lysimeter Waste
 Surface Water Leachate

Filtered Yes No
 Enforcement Yes No
 Split Sample Yes No
 RCRA Yes No **WA**
 Depth to Water (Ft.) 13.87
 00842 7 Water Elevation (MSL) _____
 00010 12 Temperature (°C) Field _____
 32.5 Cond-Field (Uncorrected) _____
 00872 5 Cond-Field (µMHOS/CM@25°C) _____
 00400 6.71 pH - Field (su) _____

T - Total	D - Dissolved	Parameter	Value	Unit
00410	<input type="checkbox"/>	Alkalinity (as CaCO ₃)	_____	mg/l
09036	<input type="checkbox"/>	Arsenic (As)	<u>< 10</u>	µg/l
01007	<input type="checkbox"/>	Barium (Ba)	_____	µg/l
01005	<input type="checkbox"/>	BOD-5 Day	_____	mg/l
01022	<input type="checkbox"/>	Boron (B)	_____	µg/l
00310	<input type="checkbox"/>	Cadmium (Cd)	_____	µg/l
00312	<input type="checkbox"/>	Calcium (Ca)	_____	mg/l
00340	<input type="checkbox"/>	COD	_____	mg/l
80116	<input type="checkbox"/>	Cond-Lab (µmhos) @25°C	_____	
00307	<input type="checkbox"/>	Chloride (Cl)	_____	mg/l
00122	<input type="checkbox"/>	Chromium (Cr)	_____	µg/l
00273	<input type="checkbox"/>	Chromium Hex	_____	µg/l
00274	<input type="checkbox"/>	Copper (Cu)	<u>13</u>	µg/l
00123	<input type="checkbox"/>	Fluoride (F)	_____	mg/l
00277	<input type="checkbox"/>	Hardness (as CaCO ₃)	_____	mg/l
00305	<input type="checkbox"/>	Iron (Fe) Total	_____	mg/l
00950	<input type="checkbox"/>	Iron Dissolved	_____	µg/l

00125	<input checked="" type="checkbox"/>	Lead (Pb)	<u>< 3</u>	µg/l
00240	<input type="checkbox"/>	Magnesium (Mg)	_____	mg/l
00348	<input type="checkbox"/>	Manganese (Mn)	_____	µg/l
00925	<input type="checkbox"/>	Mercury (Hg)	_____	µg/l
00253	<input type="checkbox"/>	NO ₃ + NO ₂ (as N)	_____	mg/l
00316	<input type="checkbox"/>	Kjeldahl-N	_____	mg/l
00126	<input type="checkbox"/>	pH - Lab (su)	_____	
71890	<input type="checkbox"/>	Selenium (Se)	_____	µg/l
00631	<input type="checkbox"/>	Sodium (Na)	<u>2</u>	mg/l
00625	<input type="checkbox"/>	Sulfate (SO ₄)	_____	mg/l
00623	<input type="checkbox"/>	Total Solids	_____	mg/l
00403	<input type="checkbox"/>	Total Dis. Solids	_____	mg/l
00270	<input type="checkbox"/>	Zinc (Zn)	_____	µg/l
01145	<input type="checkbox"/>			

Comments or Additional Parameters

16 SA Cu

BAS

R. H. Laessig, Ph.D., Director
Wisconsin State Laboratory of Hygiene
Madison, Wisconsin 53706

Date Received and Sample Number Jul 25 05 008496
Date Reported AUG 28 1985

Bill To: Hazardous Waste Non-Hazardous Waste Spill Program

1705

City Name Tw Awaia Lic. No. 0 Field No. B-18

County Shawano County Code 57 DNR Point ID No. _____

Collection Date: 07/23/85 Time (24-Hour Clock): 15:00
M M D D Y Y H H M M

Sample Location _____

Sample Description Monitoring well

Name	<u>J. Reyburn - DNR</u>
Address	<u>Box 10448</u>
City, State, Zip Code	<u>Green Bay</u>

Collected By Reyburn

Telephone (414) 497-4397



Sample Type		Filtered
<input checked="" type="checkbox"/> MW	Monitoring Well	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> PW	Private well	Enforcement
<input type="checkbox"/> LY	Lysimeter	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> SW	Surface Water	Split Sample
<input type="checkbox"/> L	Leachate	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		RCRA
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
00842	047	Depth to Water (Ft.)
00010	041	Water Elevation (MSL)
		Temperature (°C)
		Cond-Field (Uncorrected)
00872	015	Cond-Field (µMHOS/CM@25°C)
00400	096	pH - Field (su)
		<u>13.37</u>
		<u>13</u>
		<u>290</u>
		<u>6.7</u>

T - Total	D - Dissolved	Parameter	Unit	Value
00410	<input type="checkbox"/> 022	T Alkalinity (as CaCO ₃)	mg/l	_____
39036	<input type="checkbox"/> 023	D Alkalinity (as CaCO ₃)	mg/l	_____
	<input checked="" type="checkbox"/> 024	T Arsenic (As)	µg/l	<u>< 10</u>
	<input type="checkbox"/> 025	D Arsenic (As)	µg/l	_____
01007	<input type="checkbox"/> 026	T Barium (Ba)	µg/l	_____
01005	<input type="checkbox"/> 027	D Barium (Ba)	µg/l	_____
00310	<input type="checkbox"/> 028	T BOD-5 Day	mg/l	_____
00311	<input type="checkbox"/> 029	D BOD-5 Day	mg/l	_____
01022	<input type="checkbox"/> 030	T Boron (B)	µg/l	_____
01020	<input type="checkbox"/> 031	D Boron (B)	µg/l	_____
00120	<input type="checkbox"/> 032	T Cadmium (Cd)	µg/l	_____
00312	<input type="checkbox"/> 033	D Cadmium (Cd)	µg/l	_____
00916	<input type="checkbox"/> 034	T Calcium (Ca)	mg/l	_____
00915	<input type="checkbox"/> 035	D Calcium (Ca)	mg/l	_____
00340	<input type="checkbox"/> 036	T COD	mg/l	_____
80116	<input type="checkbox"/> 037	D COD	mg/l	_____
00095	<input type="checkbox"/> 038	T Cond-Lab (µmhos) @25°C	_____	_____
00307	<input type="checkbox"/> 039	D Cond-Lab (µmhos) @25°C	_____	_____
00122	<input type="checkbox"/> 040	T Chloride (Cl)	mg/l	_____
00273	<input type="checkbox"/> 041	D Chloride (Cl)	mg/l	_____
00274	<input type="checkbox"/> 042	T Chromium (Cr)	µB/l	_____
01220	<input type="checkbox"/> 043	D Chromium (Cr)	µB/l	_____
00123	<input checked="" type="checkbox"/> 044	T Chromium Hex	µB/l	_____
00277	<input type="checkbox"/> 045	D Chromium Hex	µB/l	_____
00305	<input type="checkbox"/> 046	T Copper (Cu)	µB/l	<u>12</u>
00950	<input type="checkbox"/> 047	D Copper (Cu)	µB/l	_____
00900	<input type="checkbox"/> 048	T Fluoride (F)	mg/l	_____
	<input type="checkbox"/> 049	D Fluoride (F)	mg/l	_____
	<input type="checkbox"/> 050	T Hardness (as CaCO ₃)	mg/l	_____
	<input type="checkbox"/> 051	D Hardness (as CaCO ₃)	mg/l	_____
	<input type="checkbox"/> 052	T Iron (Fe) Total	mg/l	_____
01046	<input type="checkbox"/> 053	D Iron (Fe) Total	mg/l	_____
	<input type="checkbox"/> 054	T Iron Dissolved	µB/l	_____
	<input type="checkbox"/> 055	D Iron Dissolved	µB/l	_____

00125	<input checked="" type="checkbox"/> 056	T Lead (Pb)	µg/l	<u>< 3</u>
00240	<input type="checkbox"/> 057	D Lead (Pb)	µg/l	_____
00348	<input type="checkbox"/> 058	T Magnesium (Mg)	mg/l	_____
00925	<input type="checkbox"/> 059	D Magnesium (Mg)	mg/l	_____
00253	<input type="checkbox"/> 060	T Manganese (Mn)	µg/l	_____
00316	<input type="checkbox"/> 061	D Manganese (Mn)	µg/l	_____
00126	<input type="checkbox"/> 062	T Mercury (Hg)	µg/l	_____
71890	<input type="checkbox"/> 063	D Mercury (Hg)	µg/l	_____
00631	<input type="checkbox"/> 064	T NO ₃ + NO ₂ (as N)	mg/l	_____
	<input type="checkbox"/> 065	D NO ₃ + NO ₂ (as N)	mg/l	_____
00625	<input type="checkbox"/> 066	T Kjeldahl-N	mg/l	_____
00623	<input type="checkbox"/> 067	D Kjeldahl-N	mg/l	_____
00403	<input type="checkbox"/> 068	T pH - Lab (su)	_____	_____
00270	<input type="checkbox"/> 069	T Selenium (Se)	µg/l	_____
01145	<input type="checkbox"/> 070	D Selenium (Se)	µg/l	_____
00929	<input checked="" type="checkbox"/> 071	T Sodium (Na)	mg/l	<u>2</u>
00930	<input type="checkbox"/> 072	D Sodium (Na)	mg/l	_____
00945	<input type="checkbox"/> 073	T Sulfate (SO ₄)	mg/l	_____
00946	<input type="checkbox"/> 074	D Sulfate (SO ₄)	mg/l	_____
00247	<input type="checkbox"/> 075	T Total Solids	mg/l	_____
00360	<input type="checkbox"/> 076	D Total Solids	mg/l	_____
00131	<input type="checkbox"/> 077	T Zinc (Zn)	µB/l	_____
00275	<input type="checkbox"/> 078	D Zinc (Zn)	µB/l	_____
Comments or Additional Parameters				
	<input checked="" type="checkbox"/> 079	JA Cu	_____	_____
	<input type="checkbox"/> 080	_____	_____	_____
	<input type="checkbox"/> 081	_____	_____	_____
	<input type="checkbox"/> 082	_____	_____	_____
	<input type="checkbox"/> 083	_____	_____	_____
	<input type="checkbox"/> 084	_____	_____	_____
	<input type="checkbox"/> 085	_____	_____	_____

BAS

R. H. Laessig, Ph.D., Director
Wisconsin State Laboratory of Hygiene
Madison, Wisconsin 53706

Date Received and Sample Number Jul 25 05 008502
Date Reported AUG 28 1985

Bill To: Hazardous Waste Non-Hazardous Waste Spill Program

City Name TP ANWA Lic. No. 0 Field No. B-19
County Shawano County Code 59 DNR Point ID No. _____
Collection Date: 07/23/85 Time (24-Hour Clock): 15:00
M M D D Y Y H H M M

Sample Location _____
Sample Description Monitoring well

Send Report To: _____
Name J. Reuben - DNR
Address Box 10448
City, State, Zip Code Green Bay
Collected By Reuben
Telephone (414) 497-4397

Account Number 1111

Sample Type: Monitoring Well Private well Lysimeter Surface Water
 Soil Sludge Waste Leachate
Filtered: Yes No
Enforcement: Yes No
Split Sample: Yes No
RCRA: Yes No
Depth to Water (Ft.) 12.5
00842 47 Water Elevation (MSL) _____
00010 11 Temperature (°C) Field 12.5
Cond-Field (Uncorrected) 4.50
00872 115 Cond-Field (µMHOS/CM@25°C) _____
00400 116 pH - Field (su) 6.4

T - Total; D - Dissolved

00410	<input type="checkbox"/>	002	T	Alkalinity (as CaCO ₃)	_____	mg/l
00036	<input type="checkbox"/>	233	D			
	<input checked="" type="checkbox"/>	022	T	Arsenic (As)	<u>< 10</u>	µg/l
	<input type="checkbox"/>	038	D			
01007	<input type="checkbox"/>	073	T	Barium (Ba)	_____	µg/l
01005	<input type="checkbox"/>	139	D			
00310	<input type="checkbox"/>	026	T	BOD-5 Day	_____	mg/l
00311	<input type="checkbox"/>	157	D			
01022	<input type="checkbox"/>	004	T	Boron (B)	_____	µg/l
01020	<input type="checkbox"/>	048	D			
00120	<input type="checkbox"/>	031	T	Cadmium (Cd)	_____	µg/l
00312	<input type="checkbox"/>	010	D			
00916	<input type="checkbox"/>	032	T	Calcium (Ca)	_____	mg/l
00915	<input type="checkbox"/>	034	D			
00340	<input type="checkbox"/>	033	T	COD	_____	mg/l
00116	<input type="checkbox"/>	046	D			
00095	<input type="checkbox"/>	014		Cond-Lab (µmhos) @25°C	_____	
00307	<input type="checkbox"/>	025		Chloride (Cl)	_____	mg/l
00122	<input type="checkbox"/>	005	T	Chromium (Cr)	_____	µg/l
00273	<input type="checkbox"/>	005	D			
00274	<input type="checkbox"/>	009	T	Chromium Hex	_____	µg/l
01220	<input type="checkbox"/>	009	D			
00123	<input checked="" type="checkbox"/>	006	T	Copper (Cu)	<u>18</u>	µg/l
00277	<input type="checkbox"/>	006	D			
00305	<input type="checkbox"/>	025	T	Fluoride (F)	_____	mg/l
00950	<input type="checkbox"/>	028	D			
00900	<input type="checkbox"/>	028	T	Hardness (as CaCO ₃)	_____	mg/l
	<input type="checkbox"/>	073	T	Iron (Fe) Total	_____	mg/l
01046	<input type="checkbox"/>	044	D	Iron Dissolved	_____	µg/l

00125	<input checked="" type="checkbox"/>	074	T	Lead (Pb)	<u>< 3</u>	µg/l
00240	<input type="checkbox"/>	030	D			
00348	<input type="checkbox"/>	076	T	Magnesium (Mg)	_____	mg/l
00925	<input type="checkbox"/>	037	D			
00253	<input type="checkbox"/>	075	T	Manganese (Mn)	_____	µg/l
00316	<input type="checkbox"/>	045	D			
00126	<input type="checkbox"/>	000	T	Mercury (Hg)	_____	µg/l
71890	<input type="checkbox"/>	041	D			
00631	<input type="checkbox"/>	005	D	NO ₃ + NO ₂ (as N)	_____	mg/l
00625	<input type="checkbox"/>	007	T	Kjeldahl-N	_____	mg/l
00623	<input type="checkbox"/>	006	D			
00403	<input type="checkbox"/>	007		pH - Lab (su)	_____	
00270	<input type="checkbox"/>	000	T	Selenium (Se)	_____	µg/l
01145	<input type="checkbox"/>	000	D			
00929	<input checked="" type="checkbox"/>	000	T	Sodium (Na)	<u>8</u>	mg/l
00930	<input type="checkbox"/>	005	D			
00945	<input type="checkbox"/>	016	T	Sulfate (SO ₄)	_____	mg/l
00946	<input type="checkbox"/>	006	D			
00247	<input type="checkbox"/>	000	T	Total Solids	_____	mg/l
00360	<input type="checkbox"/>	000	D	Total Dis. Solids	_____	mg/l
00131	<input type="checkbox"/>	000	T	Zinc (Zn)	<u>0.1</u>	µg/l
00275	<input type="checkbox"/>	000	D			

Comments or Additional Parameters
SA Cu

R. H. Laessig, Ph.D., Director
Wisconsin State Laboratory of Hygiene
Madison, Wisconsin 53706

Date Received and Sample Number _____
Date Reported AUG 28 1985

Bill To: Hazardous Waste Non-Hazardous Waste Spill Program

SEP 4 1985

City Name TN ANWA Lic. No. 0 Field No. B-20

County Shawano County Code 57 DNR Point ID No. _____

Collection Date: 07/23/85 Time (24-Hour Clock): 15:00
M M D D Y Y H H M M

Sample Location _____

Sample Description Monitoring well

Name	<u>J. Reyburn - owner</u>
Address	<u>Box 10448</u>
City, State, Zip Code	<u>Green Bay.</u>

Collected By Reyburn

Telephone (414) 497-4397



Sample Type		Filtered
<input checked="" type="checkbox"/> M Monitoring Well	<input type="checkbox"/> I Soil	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> P Private well	<input type="checkbox"/> U Sludge	Enforcement
<input type="checkbox"/> Y Lysimeter	<input type="checkbox"/> W Waste	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> S Surface Water	<input type="checkbox"/> L Leachate	Split Sample
<input type="checkbox"/> D _____		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No WA
		RCRA
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Depth to Water (Ft.)	<u>12.62</u>
00842	047 Water Elevation (MSL)	_____
00010	033 Temperature (°C) Field	<u>12.5</u>
	Cond-Field (Uncorrected)	<u>340</u>
00872	025 Cond-Field (µMHOS/CM@25°C)	_____
00400	056 pH - Field (su)	<u>6.7</u>

T - Total; D - Dissolved	Code	Parameter	Unit	Value
00410	<input type="checkbox"/> 002 T	Alkalinity (as CaCO ₃)	mg/l	_____
09036	<input type="checkbox"/> 033 D	Alkalinity (as CaCO ₃)	mg/l	_____
00000	<input checked="" type="checkbox"/> 002 T	Arsenic (As)	µg/l	<u>< 10</u>
01007	<input type="checkbox"/> 003 T	Barium (Ba)	µg/l	_____
01005	<input type="checkbox"/> 039 D	Barium (Ba)	µg/l	_____
00310	<input type="checkbox"/> 006 T	BOD-5 Day	mg/l	_____
00311	<input type="checkbox"/> 057 D	BOD-5 Day	mg/l	_____
01022	<input type="checkbox"/> 008 T	Boron (B)	µg/l	_____
01020	<input type="checkbox"/> 008 D	Boron (B)	µg/l	_____
00120	<input type="checkbox"/> 031 T	Cadmium (Cd)	µg/l	_____
00312	<input type="checkbox"/> 031 D	Cadmium (Cd)	µg/l	_____
00916	<input type="checkbox"/> 002 T	Calcium (Ca)	mg/l	_____
00915	<input type="checkbox"/> 002 D	Calcium (Ca)	mg/l	_____
00340	<input type="checkbox"/> 003 T	COD	mg/l	_____
80116	<input type="checkbox"/> 003 D	COD	mg/l	_____
00095	<input type="checkbox"/> 014	Cond-Lab (µmhos) @25°C	_____	_____
00307	<input type="checkbox"/> 005	Chloride (Cl)	mg/l	_____
00122	<input type="checkbox"/> 009 T	Chromium (Cr)	µg/l	_____
00273	<input type="checkbox"/> 009 D	Chromium (Cr)	µg/l	_____
00274	<input type="checkbox"/> 009 T	Chromium Hex	µg/l	_____
01220	<input type="checkbox"/> 009 D	Chromium Hex	µg/l	_____
00123	<input checked="" type="checkbox"/> 011 T	Copper (Cu)	µg/l	<u>20</u>
00277	<input type="checkbox"/> 011 D	Copper (Cu)	µg/l	_____
00305	<input type="checkbox"/> 005 T	Fluoride (F)	mg/l	_____
00950	<input type="checkbox"/> 005 D	Fluoride (F)	mg/l	_____
00900	<input type="checkbox"/> 008 T	Hardness (as CaCO ₃)	mg/l	_____
	<input type="checkbox"/> 008 D	Hardness (as CaCO ₃)	mg/l	_____
	<input type="checkbox"/> 003 T	Iron (Fe) Total	mg/l	_____
01046	<input type="checkbox"/> 004 D	Iron Dissolved	µg/l	_____

00125	<input checked="" type="checkbox"/> 004 T	Lead (Pb)	µg/l	<u>< 3</u>
00240	<input checked="" type="checkbox"/> 050 D	Lead (Pb)	µg/l	_____
00348	<input type="checkbox"/> 076 T	Magnesium (Mg)	mg/l	_____
00925	<input type="checkbox"/> 037 D	Magnesium (Mg)	mg/l	_____
00253	<input type="checkbox"/> 079 T	Manganese (Mn)	µg/l	_____
00316	<input type="checkbox"/> 045 D	Manganese (Mn)	µg/l	_____
00126	<input type="checkbox"/> 000 T	Mercury (Hg)	µg/l	_____
71890	<input type="checkbox"/> 041 D	Mercury (Hg)	µg/l	_____
00631	<input type="checkbox"/> 005 D	NO ₃ + NO ₂ (as N)	mg/l	_____
00625	<input type="checkbox"/> 007 T	Kjeldahl-N	mg/l	_____
00623	<input type="checkbox"/> 016 D	Kjeldahl-N	mg/l	_____
00403	<input type="checkbox"/> 097	pH - Lab (su)	_____	_____
00270	<input type="checkbox"/> 010 T	Selenium (Se)	µg/l	_____
01145	<input type="checkbox"/> 008 D	Selenium (Se)	µg/l	_____
00929	<input checked="" type="checkbox"/> 013 T	Sodium (Na)	mg/l	<u>2</u>
00930	<input checked="" type="checkbox"/> 035 D	Sodium (Na)	mg/l	_____
00945	<input type="checkbox"/> 016 T	Sulfate (SO ₄)	mg/l	_____
00946	<input type="checkbox"/> 036 D	Sulfate (SO ₄)	mg/l	_____
00247	<input type="checkbox"/> 008 T	Total Solids	mg/l	_____
00360	<input type="checkbox"/> 004 D	Total Dis. Solids	mg/l	_____
00131	<input type="checkbox"/> 008 T	Zinc (Zn)	µg/l	_____
00275	<input type="checkbox"/> 008 D	Zinc (Zn)	µg/l	_____
Comments or Additional Parameters				
	<input checked="" type="checkbox"/> 016	SA Cu	_____	_____
	<input type="checkbox"/>	_____	_____	_____
	<input type="checkbox"/>	_____	_____	_____
	<input type="checkbox"/>	_____	_____	_____
	<input type="checkbox"/>	_____	_____	_____
	<input type="checkbox"/>	_____	_____	_____
	<input type="checkbox"/>	_____	_____	_____
	<input type="checkbox"/>	_____	_____	_____

R. H. Laessig, Ph.D., Director
Wisconsin State Laboratory of Hygiene
Madison, Wisconsin 53706

Date Received and Sample Number _____
Date Reported AUG 28 1985

Bill To: Hazardous Waste Non-Hazardous Waste Spill Program

DATE - 1985

City Name TW ANIMA

Lic. No. 0 Field No. B-13A

County Shawano

County Code 59 DNR Point ID No. _____

Collection Date: 07/23/85
M M / D D / Y Y

Time (24-Hour Clock): 15:00
H H : M M

Sample Location _____

Sample Description Monitoring well

Send Report To: _____

Name	<u>J. Reburn - DNR</u>
Address	<u>Box 10448</u>
City, State, Zip Code	<u>Green Bay</u>

Collected By Reburn

Telephone (414) 497-4397

Account Number 1-8120

Sample Type

- Monitoring Well
- Private well
- Lysimeter
- Surface Water
- Soil
- Sludge
- Waste
- Leachate

Filtered

Yes No

Enforcement

Yes No

Split Sample

Yes No

RCRA

Yes No

WA

00842 13 Depth to Water (Ft.)

00010 13 Water Elevation (MSL)

00010 210 Temperature (°C) Field

00872 6.3 Cond-Field (µMHOS; CM@25°C)

00400 6.3 pH - Field (su)

T - Total; D - Dissolved	Code	Parameter	Unit	Value
<input type="checkbox"/>	00410	Alkalinity (as CaCO ₃)	mg/l	
<input checked="" type="checkbox"/>	00338	Arsenic (As)	µg/l	<u>< 10</u>
<input type="checkbox"/>	01007	Barium (Ba)	µg/l	
<input type="checkbox"/>	00310	BOD-5 Day	mg/l	
<input type="checkbox"/>	01022	Boron (B)	µg/l	
<input type="checkbox"/>	00120	Cadmium (Cd)	µg/l	
<input type="checkbox"/>	00916	Calcium (Ca)	mg/l	
<input type="checkbox"/>	00340	COD	mg/l	
<input type="checkbox"/>	00095	Cond-Lab (µmhos) @25°C		
<input type="checkbox"/>	00307	Chloride (Cl)	mg/l	
<input type="checkbox"/>	00122	Chromium (Cr)	µg/l	
<input type="checkbox"/>	00274	Chromium Hex	µg/l	
<input checked="" type="checkbox"/>	00123	Copper (Cu)	µg/l	<u>11</u>
<input type="checkbox"/>	00305	Fluoride (F)	mg/l	
<input type="checkbox"/>	00900	Hardness (as CaCO ₃)	mg/l	
<input type="checkbox"/>	0073	Iron (Fe) Total	mg/l	
<input type="checkbox"/>	01046	Iron Dissolved	µg/l	

<input checked="" type="checkbox"/>	00125	Lead (Pb)	µg/l	<u>< 3</u>
<input type="checkbox"/>	00348	Magnesium (Mg)	mg/l	
<input type="checkbox"/>	00253	Manganese (Mn)	µg/l	
<input type="checkbox"/>	00126	Mercury (Hg)	µg/l	
<input type="checkbox"/>	00631	NO ₃ + NO ₂ (as N)	mg/l	
<input type="checkbox"/>	00625	Kjeldahl-N	mg/l	
<input type="checkbox"/>	00403	pH - Lab (su)		
<input type="checkbox"/>	00270	Selenium (Se)	µg/l	
<input checked="" type="checkbox"/>	00929	Sodium (Na)	mg/l	<u>2</u>
<input type="checkbox"/>	00945	Sulfate (SO ₄)	mg/l	
<input type="checkbox"/>	00247	Total Solids	mg/l	
<input type="checkbox"/>	00360	Total Dis. Solids	mg/l	
<input type="checkbox"/>	00131	Zinc (Zn)	µg/l	

Comments or Additional Parameters

SA Cu

R. H. Laessig, Ph.D., Director
Wisconsin State Laboratory of Hygiene
Madison, Wisconsin 53706

Date Received and Sample Number _____

Date Reported JUL 25 1985 006501

AUG 28 1985

Bill To: Hazardous Waste Non-Hazardous Waste Spill Program

SEP 4 1985

City Name TN AN:WA Lic No 0 Field No B-13

County Shannon County Code 59 DNR Point ID No. _____

Collection Date: 07/23/85 Time (24-Hour Clock): 15:00
M M D D Y Y H H M M

Sample Location _____

Sample Description Monitoring well

Name	<u>Reyburn -DNR</u>
Address	<u>Box 10448</u>
City, State, Zip Code	<u>Greer Ark</u>

Collected By Reyburn

Telephone (414) 497-4397



Sample Type

Monitoring Well Soil
 Private well Sludge
 Lysimeter Waste
 Surface Water Leachate

Filtered
 Yes No

Enforcement
 Yes No

Split Sample
 Yes No WA

RCRA
 Yes No

Depth to Water (Ft.) 13.51

00842 047 Water Elevation (MSL) _____

00010 010 Temperature (°C) Field 12

Cond-Field (Uncorrected) 360

00872 015 Cond-Field (µMHOS/CM@25°C) _____

00400 036 pH - Field (su) 6.67

T - Total; D - Dissolved

00410	<input type="checkbox"/>	002	T	Alkalinity (as CaCO ₃)	_____ mg/l
39036	<input type="checkbox"/>	033	D		
	<input checked="" type="checkbox"/>	002	T	Arsenic (As)	<u>380</u> µg/l
	<input type="checkbox"/>	038	D		
01007	<input type="checkbox"/>	023	T	Barium (Ba)	_____ µg/l
01005	<input type="checkbox"/>	039	D		
00310	<input type="checkbox"/>	026	T	BOD-5 Day	_____ mg/l
00311	<input type="checkbox"/>	037	D		
01022	<input type="checkbox"/>	008	T	Boron (B)	_____ µg/l
01020	<input type="checkbox"/>	018	D		
00120	<input type="checkbox"/>	031	T	Cadmium (Cd)	_____ µg/l
00312	<input type="checkbox"/>	038	D		
00916	<input type="checkbox"/>	002	T	Calcium (Ca)	_____ mg/l
00915	<input type="checkbox"/>	034	D		
00340	<input type="checkbox"/>	023	T	COD	_____ mg/l
80116	<input type="checkbox"/>	046	D		
00095	<input type="checkbox"/>	014		Cond-Lab (µmhos) @25°C	_____
00307	<input type="checkbox"/>	005		Chloride (Cl)	_____ mg/l
00122	<input type="checkbox"/>	008	T	Chromium (Cr)	_____ µg/l
00273	<input type="checkbox"/>	008	D		
00274	<input type="checkbox"/>	008	T	Chromium Hex	_____ µg/l
01220	<input type="checkbox"/>	008	D		
00123	<input checked="" type="checkbox"/>	001	T	Copper (Cu)	<u>14</u> µg/l
00277	<input type="checkbox"/>	001	D		
00305	<input type="checkbox"/>	005	T	Fluoride (F)	_____ mg/l
00950	<input type="checkbox"/>	001	D		
00900	<input type="checkbox"/>	004	T	Hardness (as CaCO ₃)	_____ mg/l
	<input type="checkbox"/>	003	T	Iron (Fe) Total	_____ mg/l
01046	<input type="checkbox"/>	004	D	Iron Dissolved	_____ µg/l

00125	<input checked="" type="checkbox"/>	001	T	Lead (Pb)	<u>< 3</u> µg/l
00240	<input type="checkbox"/>	002	D		
00348	<input type="checkbox"/>	076	T	Magnesium (Mg)	_____ mg/l
00925	<input type="checkbox"/>	037	D		
00253	<input type="checkbox"/>	079	T	Manganese (Mn)	_____ µg/l
00316	<input type="checkbox"/>	065	D		
00126	<input type="checkbox"/>	000	T	Mercury (Hg)	_____ µg/l
71890	<input type="checkbox"/>	001	D		
00631	<input type="checkbox"/>	005	D	NO ₃ + NO ₂ (as N)	_____ mg/l
00625	<input type="checkbox"/>	007	T	Kjeldahl-N	_____ mg/l
00623	<input type="checkbox"/>	016	D		
00403	<input type="checkbox"/>	007		pH - Lab (su)	_____
00270	<input type="checkbox"/>	000	T	Selenium (Se)	_____ µg/l
01145	<input type="checkbox"/>	000	D		
00929	<input checked="" type="checkbox"/>	005	T	Sodium (Na)	<u>1</u> mg/l
00930	<input type="checkbox"/>	005	D		
00945	<input type="checkbox"/>	005	T	Sulfate (SO ₄)	_____ mg/l
00946	<input type="checkbox"/>	005	D		
00247	<input type="checkbox"/>	004	T	Total Solids	_____ mg/l
00360	<input type="checkbox"/>	004	D	Total Dis. Solids	_____ mg/l
00131	<input type="checkbox"/>	001	T	Zinc (Zn)	_____ µg/l
00275	<input type="checkbox"/>	001	D		

Comments or Additional Parameters

016 SA Cu

016 SA As

016 SA As

BAS

Bill To: Hazardous Waste Non-Hazardous Waste Spill Program

SEP 4 1985

City Name TN ANIWA

Lic. No. 0 Field No. B-12

County Shawano

County Code 59 DNR Point ID No. _____

Collection Date: 07/23/85
M M / D D / Y Y

Time (24-Hour Clock): 15:00
H H : M M

Sample Location _____

Sample Description Monitoring well

Name	<u>J. Reyburn DNR</u>
Address	<u>Box 10448</u>
City, State, Zip Code	<u>Green Bay</u>

Collected By Reyburn

Telephone (414) 497-4397

Accession Number 100120

Sample Type		Filtered
<input checked="" type="checkbox"/> MW	Monitoring Well	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> PW	Private well	Enforcement
<input type="checkbox"/> LY	Lysimeter	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> SW	Surface Water	Split Sample
<input type="checkbox"/> S	Soil	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> U	Sludge	RCRA
<input type="checkbox"/> W	Waste	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> L	Leachate	WA

00842	Depth to Water (Ft.)	<u>12.92</u>
00010	Water Elevation (MSL)	_____
00872	Temperature (°C) Field	<u>12.5</u>
00400	Cond-Field (Uncorrected)	<u>600</u>
	Cond-Field (µMHOS/CM@25°C)	<u>_____</u>
	pH - Field (su)	<u>6.8</u>

T - Total	D - Dissolved	Parameter	Result	Unit
00410	<input type="checkbox"/>	Alkalinity (as CaCO ₃)	_____	mg/l
00336	<input type="checkbox"/>	Arsenic (As)	<u>590</u>	µg/l
01007	<input type="checkbox"/>	Barium (Ba)	_____	µg/l
00310	<input type="checkbox"/>	BOD-5 Day	_____	mg/l
01022	<input type="checkbox"/>	Boron (B)	_____	µg/l
00120	<input type="checkbox"/>	Cadmium (Cd)	_____	µg/l
00916	<input type="checkbox"/>	Calcium (Ca)	_____	mg/l
00340	<input type="checkbox"/>	COD	_____	mg/l
00095	<input type="checkbox"/>	Cond-Lab (µmhos) @25°C	_____	_____
00307	<input type="checkbox"/>	Chloride (Cl)	_____	mg/l
00122	<input type="checkbox"/>	Chromium (Cr)	_____	µg/l
00274	<input type="checkbox"/>	Chromium Hex	_____	µg/l
00123	<input checked="" type="checkbox"/>	Copper (Cu)	<u>8</u>	µg/l
00305	<input type="checkbox"/>	Fluoride (F)	_____	mg/l
00900	<input type="checkbox"/>	Hardness (as CaCO ₃)	_____	mg/l
01046	<input type="checkbox"/>	Iron (Fe) Total	_____	mg/l
	<input type="checkbox"/>	Iron Dissolved	_____	µg/l

00125	<input checked="" type="checkbox"/>	Lead (Pb)	<u>< 3</u>	µg/l
00348	<input type="checkbox"/>	Magnesium (Mg)	_____	mg/l
00253	<input type="checkbox"/>	Manganese (Mn)	_____	µg/l
00126	<input type="checkbox"/>	Mercury (Hg)	_____	µg/l
00631	<input type="checkbox"/>	NO ₃ + NO ₂ (as N)	_____	mg/l
00625	<input type="checkbox"/>	Kjeldahl-N	_____	mg/l
00403	<input type="checkbox"/>	pH - Lab (su)	_____	_____
00270	<input type="checkbox"/>	Selenium (Se)	_____	µg/l
00929	<input checked="" type="checkbox"/>	Sodium (Na)	<u>9</u>	mg/l
00945	<input type="checkbox"/>	Sulfate (SO ₄)	_____	mg/l
00247	<input type="checkbox"/>	Total Solids	_____	mg/l
00360	<input type="checkbox"/>	Total Dis. Solids	_____	mg/l
00131	<input type="checkbox"/>	Zinc (Zn)	_____	µg/l

Comments or Additional Parameters

316 SA Cu

316 SA As

316 SA As

R. H. Laessig, Ph.D., Director
Wisconsin State Laboratory of Hygiene
Madison, Wisconsin 53706

Date Received and Sample Number 715008499
AUG 28 1985

Date Reported _____