

Beggs, Tauren R - DNR

From: Beggs, Tauren R - DNR
Sent: Wednesday, December 13, 2017 9:11 AM
To: Chronert, Roxanne N - DNR (Roxanne.Chronert@wisconsin.gov); Ales, Stephen M - DNR
Subject: FW: Initial Potable Well Sample, Newton
Attachments: GWChem.VOC.Anita Moore 3008 S26th.8Nov17.pdf; VOC Test Req.Anita Moore.3008 S 26th.8Nov17.pdf

Importance: High

FYI – results from 1st potable well that was sampled south of Novy’s residence where the first vinyl chloride detect was found on S. 26th Street also had an enforcement standard for vinyl chloride.

We are committed to service excellence.

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

Tauren R. Beggs

Phone: (920) 662-5178
Tauren.Beggs@wisconsin.gov

From: Beggs, Tauren R - DNR
Sent: Wednesday, December 13, 2017 9:07 AM
To: GravelPit <GravelPit@manitowoc.org>; Henderson, Dave (Dave.Henderson@aecom.com) <Dave.Henderson@aecom.com>
Cc: Kasdorf, James H Jr - DNR <James.KasdorfJr@wisconsin.gov>
Subject: FW: Initial Potable Well Sample, Newton
Importance: High

We received the potable well results from state lab for 3008 S. 36th Street this morning. Vinyl chloride was above the enforcement standard. No well log information but likely at similar depths as other wells in the area. We have to notify the property owner and provide results. Bottled water will need to be provided. We need to discuss next steps.

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Tauren R. Beggs

Phone: (920) 662-5178
Tauren.Beggs@wisconsin.gov

From: Kasdorf, James H Jr - DNR
Sent: Wednesday, December 13, 2017 8:46 AM
To: Beggs, Tauren R - DNR <Tauren.Beggs@wisconsin.gov>
Subject: RE: Initial Potable Well Sample, Newton

Hi Tauren & Janelle:

Here are the VOC test results:

Anita Moore VOC Results (EPA 8260)

3008 South 36th Street Manitowoc, WI
November 8, 2017

77093 1,2-DICHLOROETHYLENE CIS	1.0 ug/L	0.30
39175 VINYL CHLORIDE	0.47 ug/L	0.20

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Jim Kasdorf

Phone: (920) 387-7872

James.KasdorfJr@Wisconsin.gov

From: Beggs, Tauren R - DNR
Sent: Tuesday, December 12, 2017 4:07 PM
To: Kasdorf, James H Jr - DNR <James.KasdorfJr@wisconsin.gov>
Subject: Initial Potable Well Sample, Newton

Hi Jim,

JaNelle does not have a copy of the test form for the initial potable well sample collected. JaNelle said you can contact Zana Sijan, laboratory coordinator (Zana.Sijan@wisconsin.gov, desk phone: 608-264-8589 or secondary: 608-622-5203), provide her with the sample name and Zana can get you the results. I can't recall what you named the sample, otherwise, I would have contacted Zana.

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Tauren R. Beggs

Hydrogeologist & Northeast Region Land Recycling Expert
Remediation and Redevelopment Program
Wisconsin Department of Natural Resources
2984 Shawano Ave
Green Bay, WI 54313
Phone: (920) 662-5178
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Wisconsin Department of Natural Resources

Laboratory Report

12/13/2017

Lab: 113133790

Sample: 353508001

Page 1 of 3

Laboratory: Wisconsin State Laboratory of Hygiene

DNR ID 113133790

2601 Agriculture Dr

Madison

WI 53718

Phone : 800-442-4618

Fax Phone : 608-224-6213

Sample:

Field #: ANITA MOORE

Sample #: 353508001

Collection Start: 11/08/2017 09:09 am

Collection End: 11/08/2017 09:09 am

Collected by: JIM KASDORF

Waterbody/Outfall Id:

ID #:

ID Point #: SPIGOT W SIDE

County: Manitowoc

Account #: RR051

Sample Location: 3008 SOUTH 26TH STREET NEWTON, WI 54420

Sample Description:

Sample Source: Private (other)

Sample Depth:

Date Reported: 11/16/2017

Sample Status: COMPLETE

Project No:

Sample Reason:

Comment:

Analyses and Results:

Analysis Method		Analysis Date	Lab Comment			
EPA 8260B in Water		11/14/2017				
Code	Description	Result	Units	LOD	Report Limit	LOQ
77562	1,1,1,2-TETRACHLOROETHANE	0.0	ug/L	0.50		1.6
34506	1,1,1-TRICHLOROETHANE	0.0	ug/L	0.50		1.6
34516	1,1,2,2-TETRACHLOROETHANE	0.0	ug/L	0.50		1.6
34511	1,1,2-TRICHLOROETHANE	0.0	ug/L	0.50		1.6
34496	1,1-DICHLOROETHANE	0.0	ug/L	0.30		0.95
34501	1,1-DICHLOROETHYLENE	0.0	ug/L	0.50		1.6
77168	1,1-DICHLOROPROPENE	0.0	ug/L	0.50		1.6
77613	1,2,3-TRICHLOROBENZENE	0.0	ug/L	0.50		1.6
77443	1,2,3-TRICHLOROPROPANE	0.0	ug/L	1.0		3.2
34551	1,2,4-TRICHLOROBENZENE	0.0	ug/L	0.50		1.6
77222	1,2,4-TRIMETHYLBENZENE	0.0	ug/L	0.20		0.64
38437	1,2-DIBROMO-3- CHLOROPROPANE	0.0	ug/L	1.0		3.2
77651	1,2-DIBROMOETHANE	0.0	ug/L	0.50		1.6
34536	1,2-DICHLOROBENZENE	0.0	ug/L	0.25		0.80
34531	1,2-DICHLOROETHANE	0.0	ug/L	0.50		1.6
77093	1,2-DICHLOROETHYLENE CIS	1.0	ug/L	0.30		0.95
34546	1,2-DICHLOROETHYLENE TRANS	0.0	ug/L	0.50		1.6
34541	1,2-DICHLOROPROPANE	0.0	ug/L	0.50		1.6

Wisconsin Department of Natural Resources

Laboratory Report

12/13/2017

Lab: 113133790

Sample: 353508001

Page 2 of 3

Code	Description	Result	Units	LOD	Report Limit	LOQ
77226	1,3,5-TRIMETHYLBENZENE	0.0	ug/L	0.20		0.64
34566	1,3-DICHLOROBENZENE	0.0	ug/L	0.25		0.80
77173	1,3-DICHLOROPROPANE	0.0	ug/L	0.30		0.95
34704	1,3-DICHLOROPROPENE-CIS	0.0	ug/L	0.30		0.95
34699	1,3-DICHLOROPROPENE-TRANS	0.0	ug/L	0.50		1.6
34571	1,4-DICHLOROBENZENE	0.0	ug/L	0.25		0.80
77170	2,2-DICHLOROPROPANE	0.0	ug/L	0.50		1.6
77275	2-CHLOROTOLUENE	0.0	ug/L	0.30		0.95
81552	ACETONE	0.0	ug/L	3.0		9.5
34030	BENZENE	0.0	ug/L	0.30		0.95
81555	BROMOBENZENE	0.0	ug/L	0.50		1.6
77297	BROMOCHLOROMETHANE	0.0	ug/L	0.50		1.6
32101	BROMODICHLOROMETHANE	0.0	ug/L	0.50		1.6
32104	BROMOFORM	0.0	ug/L	1.0		3.2
34413	BROMOMETHANE	0.0	ug/L	0.50		1.6
77350	BUTYLBENZENE SEC	0.0	ug/L	0.20		0.64
77353	BUTYLBENZENE TERT	0.0	ug/L	0.50		1.6
77041	CARBON DISULFIDE	0.0	ug/L	0.30		0.95
32102	CARBON TETRACHLORIDE	0.0	ug/L	0.50		1.6
34301	CHLOROBENZENE	0.0	ug/L	0.25		0.80
34311	CHLOROETHANE	0.0	ug/L	0.50		1.6
32106	CHLOROFORM	0.0	ug/L	0.25		0.80
34418	CHLOROMETHANE	0.0	ug/L	1.0		3.2
32105	DIBROMOCHLOROMETHANE	0.0	ug/L	0.50		1.6
77596	DIBROMOMETHANE	0.0	ug/L	0.50		1.6
34668	DICHLORODIFLUOROMETHANE	0.0	ug/L	0.50		1.6
	<i>Comment: The Lower QC limit for the calibration check is exceeded. The lab matrix spike does not meet the lower QC limit.</i>					
81577	DIISOPROPYL ETHER	0.0	ug/L	0.25		0.80
34371	ETHYLBENZENE	0.0	ug/L	0.20		0.64
34391	HEXACHLOROBUTADIENE	0.0	ug/L	0.50		1.6
81590	HEXANE, MIXTURE OF ISOMERS	0.0	ug/L	0.50		1.6
77223	ISOPROPYLBENZENE	0.0	ug/L	0.20		0.64
85795	M/P-XYLENE	0.0	ug/L	0.40		1.3

**Wisconsin Department of Natural Resources
Laboratory Report**

12/13/2017

Lab: 113133790

Sample: 353508001

Page 3 of 3

<i>Code</i>	<i>Description</i>	<i>Result</i>	<i>Units</i>	<i>LOD</i>	<i>Report Limit</i>	<i>LOQ</i>
81595	METHYL ETHYL KETONE	0.0	ug/L	3.0		9.5
78133	METHYL ISOBUTYL KETONE (MIBK)	0.0	ug/L	2.0		6.4
78032	METHYL TERT BUTYL ETHER	0.0	ug/L	0.30		0.95
34423	METHYLENE CHLORIDE	0.0	ug/L	0.50		1.6
77342	N-BUTYLBENZENE	0.0	ug/L	0.20		0.64
77224	N-PROPYLBENZENE	0.0	ug/L	0.20		0.64
34696	NAPHTHALENE	0.0	ug/L	0.30		0.95
77135	O-XYLENE	0.0	ug/L	0.30		0.95
77277	P-CHLOROTOLUENE	0.0	ug/L	0.30		0.95
77356	P-ISOPROPYLTOLUENE	0.0	ug/L	0.20		0.64
77128	STYRENE	0.0	ug/L	0.25		0.80
34475	TETRACHLOROETHYLENE	0.0	ug/L	0.50		1.6
81607	TETRAHYDROFURAN	0.0	ug/L	2.0		6.4
34010	TOLUENE	0.0	ug/L	0.25		0.80
39180	TRICHLOROETHYLENE	0.0	ug/L	0.50		1.6
34488	TRICHLOROFLUOROMETHANE	0.0	ug/L	0.50		1.6
	<i>Comment: The Lower QC limit for the calibration check is exceeded. The lab matrix spike does not meet the lower QC limit.</i>					
81611	TRICHLOROTRIFLUOROETHANE	0.0	ug/L	0.50		1.6
39175	VINYL CHLORIDE	0.47	ug/L	0.20		0.64


Billing and Reporting			
Account Number <i>RR051</i>	Field Number (Bottle Label ID) <i>ANITA MOORE</i>	Report to Address (Non-DNR only)	
DNR User ID <i>KASDORF J</i>	Report To Name <i>JIM KASDORF</i>	City <i>DNR-HORIZON</i>	State ZIP <i>WI</i>
Date Results Needed (mm/dd/yyyy)		Report to Email (Non-DNR only)	

Date and Time of Sample Collection			
Date (mm/dd/yyyy) <i>11/08/2017</i>	Time (24-hr clock) <i>0909 AM</i>	End Date (mm/dd/yyyy) <i>11/08/2017</i>	End Time

Sample Type			
Sample Type: (select one)	<input type="radio"/> SU Surface Water	<input type="radio"/> NP Storm Water	<input type="radio"/> EF Effluent (Treated Wastewater)
	<input type="radio"/> D Public Drinking Water	<input type="radio"/> MW Monitoring Well	<input checked="" type="radio"/> PO Private Well
	<input type="radio"/> SL Sludge	<input type="radio"/> SO Soil	<input type="radio"/> TI Tissue
			<input type="radio"/> IF Influent (Untreated wastewater)
			<input type="radio"/> SE Sediment

Who collected the sample		
Collected By Name <i>Jim Kasdorf (DNR)</i>	Telephone <i>715-579-9729</i>	Email <i>JAMES.KASDORFJR@WISCONSIN.GOV</i>

Where the sample was collected		
Station ID (STORET #)	Sample Address or Location Description <i>3003 SOUTH 26TH STREET NEWTON, WI 54220</i>	
County <i>Manitowish</i>	Waterbody ID (WBIC) <i>NA</i>	Point / Outfall (or SWIMS Fieldwork Seq No) <i>SPRIGOT WEST SIDE of HOME</i>


Sample Details	
Sample Description / Device Description	11/09/17 10:51 TB  353508002
Enforcement? <input type="radio"/> Yes <input checked="" type="radio"/> No	If Field QC Sample (select one): <input type="radio"/> Duplicate <input type="radio"/> Blank <input type="radio"/> _____
If yes, include chain of custody form.	_____ ft <input type="radio"/> m <input type="radio"/> in <input type="radio"/> cm
Is Sample Disinfected? <input type="radio"/> Yes <input checked="" type="radio"/> No	Grant or Project Number
If yes, how?	_____ .om of Sample Interval: _____ - _____ ft <input type="radio"/> m <input type="radio"/> in <input type="radio"/> cm

Analyses Requested	
VOCs Water / Soil (check one of the following) Disinfection Byproducts <input type="checkbox"/> Haloacetic Acids (552.3) <input type="checkbox"/> Total Trihalomethanes <input checked="" type="checkbox"/> Quantification (EPA Method 8260) <input checked="" type="checkbox"/> Quantification (Drinking Water-EPA Method 524.2) Non-VOC Scan <input type="checkbox"/> EPA 525 <input type="checkbox"/> LCMS Scan Halogenated Compounds <input type="checkbox"/> PCB Aroclor Identification <input type="checkbox"/> PCB Congeners <input type="checkbox"/> PBDEs <input type="checkbox"/> Perfluorinated Compounds Petroleum Products <input type="checkbox"/> Petroleum Fingerprint <input type="checkbox"/> PAHs (GCMS) Pesticides <input type="checkbox"/> List in additional parameters section to the right Others <input type="checkbox"/> Glycols <input type="checkbox"/> Benzotriazoles <input type="checkbox"/> Organic Carbon (Field Filtered? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Contaminants	Toxicity Characteristic Leaching Procedure (TCLP) (Check one or more of the following) <input type="checkbox"/> VOCs - TCLP <input type="checkbox"/> Haz. Waste Char Additional Parameters

TEMP	HNO3	pH
Ray Gun Glass Plastic	ID's IN/AN336 Bottle ID	pH R2 22 14 Bottle ID
<i>7</i> 6 8	A B C D	A B C D
<i>Co ZICED</i>	E F G	E F G
<i>UK</i>		

11/09/17 10:51
 ANITA MOORE

 353508001

11/09/17 10:51
 RR051
 For lab use:
 Sample Temp:
 Iced

 353508

Please enclose this form in the mailer along with the sample and send to the State Lab of Hygiene.

Field Parameters - Optional

Only fill out if directed by your project coordinator.

Temperature - Sample (°C)	_ _ . _	Gage Height (ft)	_ _ . _
Temperature - Ambient Air (°C)	_ _ . _	Flow (cfs)	_ _ . _
DO (mg/l)	_ _ . _	Flow (MGD)	_ _ . _
% Saturation	_ _ . _	Depth to Groundwater	_ _ . _
pH (su)	_ _ . _	<small>ft or m</small>	_ _ . _
Secchi Depth (feet or meters)	_ _ . _	Turbidity (NTU)	_ _ . _
<small>ft or m</small>	_ _ . _	Transparency Tube (cm)	_ _ . _
Secchi Depth Hit Bottom?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Nitrates (mg/l)	_ _ . _
Cloud Cover (%)	_ _ . _		
Cond (µS/CM@25°C)	_ _ . _		

Tips

See Chapter 4 "Lab Slips" of the Field Procedures Manual (see <http://intranet.dnr.state.wi.us/int/es/science/ls/Forms/Instructions.htm>) for further instructions and definitions.

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.

Sample Depth – If you sample in a lake, this is required.

Field Parameters – If you do fill this out, the data will go into SWIMS automatically. Please do not re-enter. Also, you must QA the data once it arrives in SWIMS.