

*Entered on WR spreadsheet on 3/15/04 H.K.***Wisconsin DNR Pre-CERCLIS Screening Worksheet****Instructions**

Information sources that can be used to fill out this worksheet include: BRRTS, SHWIMS, R&R files, WA files, regional geologic information resources, Waste Staff, County Solid Waste staff (if there is one for the county) and the EPA web site for CERCLIS. Other possible resources may include: city/town files, county files, aerial photos, readily available Sanborn Insurance maps and interviews with former employees or neighbors.

All comments should be referenced by section number on an attached sheet.

1. Site Name

Waste Disposal Site Name: Refuse Hideaway Landfill

Street or Route: 7562 USH 14

City/Town/Village: Middleton

State: WI

Zip Code: 53562

County: Dane

Is the site known by another name(s)? Yes No Unknown

If yes, name:

2. Legal Description of Site

Attach a map with site location and limits of fill/waste disposal area.

a. Locational Information: GIS

Polygon complete Date:

b. Locational Information: Other Sources

Latitude*: 43 deg. 05 min. 53 sec.

Longitude*: 89 deg. 34 min. 44sec.

Township: 7N

Range: 8E

Section: 8

1/4 - 1/4: SW of the NW

*Latitude and Longitude information is required on EPA screening checklist.

3. Site Background Information

Present Owner's Name: No owner; corporation is bankrupt.

Street or Route:

City/Town/Village:

State:

Zip Code:

Telephone Number (include area code):

Previous Owner's Name: Refuse Hideaway, Inc. (John (deceased) and Tom DeBeck (owner - Speedway Sand and Gravel))

Street or Route: 8500 Greenway Boulevard

City/Town/Village: Middleton

State: WI

Zip Code: 53562

Telephone Number (include area code): (608) 836-1071

Operator's Name: Currently, WDNR (Hank Kuehling - project manager).

Street or Route: South Central Region, 3911 Fish Hatchery Road

City/Town/Village: Fitchburg

State: WI

Zip Code: 53711

Telephone Number (include area code): (608) 275-3286

4. Waste Disposal Site's Regulatory ID Numbers

DNR FID (9 digits): 113112010

Solid Waste Facility License ID# (4 digits): 1953

Hazardous Waste Facility License ID# (5 digits): None

USEPA ID# (used for both RCRA and CERCLIS #s) (WI+Alpha+9 digits): WID980610604

BRRTS ID# (2 digit program-2 digit county-6 digit site specific): 02-13-000849

BRRTS Activity Name: LUST ERP SPILL VPLE

SHWIMS Site ID# (8 Digits): 1710200

Other:

5. Type of Site (Current and Historic) Check all that apply.

a. **Landfill**

- | | |
|---|---|
| <input checked="" type="checkbox"/> Approved | <input type="checkbox"/> Non-approved [see s.289.01(3) Wis. Stats] |
| <input checked="" type="checkbox"/> Engineered | <input type="checkbox"/> Unengineered |
| <input checked="" type="checkbox"/> Licensed | <input type="checkbox"/> Unlicensed |
| <input type="checkbox"/> Lined | <input checked="" type="checkbox"/> Unlined |
| <input type="checkbox"/> Construction / Demolition | <input type="checkbox"/> Exempted fill [NR500.08(1)+(2)] |

- Less than 50,000 cubic yards**
 50,000 to 500,000 cubic yards
 Greater than 500,000 cubic yards

Does the landfill have a closure plan? **yes** **no** **unknown**

Does the landfill have a groundwater monitoring plan? **yes** **no** **unknown**

Have groundwater monitoring wells been installed? **yes** **no** **unknown**

- Was a cover installed? **NR500 cap (NR504.07) (after July 1, 1996) (6" grading layer, 2' clay layer, geomembrane, 2 1/2 " drainage rooting layer & 6" topsoil)**
 NR500 cap (NR504.07) (prior to July 1, 1996) (same as above without geomembrane)
 NR180 cap (caps prior to 1986) (2' clay* * 6" topsoil)
 *material may vary across state depending on available borrow sources
 Other cover
 Unknown

What is the thickness of the cover? **< 6 in** **6-12 in** **12-24 in**
 > 24 in **unknown**

Present status of landfill site: Check all that apply.

- active** **inactive** **transitional (between active and closed)**
 monitoring **closed**

-
- | | |
|---|--|
| b. <input type="checkbox"/> Agricultural co-op | <input type="checkbox"/> Manufacturing - Type: |
| <input type="checkbox"/> Brush pile | <input type="checkbox"/> Old burn pit |
| <input type="checkbox"/> Bulk plant | <input type="checkbox"/> One-time disposal site |
| <input type="checkbox"/> Coal gas manufacturer | <input type="checkbox"/> Pipeline |
| <input type="checkbox"/> Deer pit | <input type="checkbox"/> RCRA generator |
| <input type="checkbox"/> Demolition debris | <input type="checkbox"/> Salvage yard |
| <input type="checkbox"/> Dry cleaner | <input type="checkbox"/> Service Station |
| <input type="checkbox"/> Electroplater | <input type="checkbox"/> Tannery |
| <input type="checkbox"/> Lagoon | <input type="checkbox"/> Unknown |
| | <input type="checkbox"/> Other: name - |

c. Date of Most Recent Status Report: 2000

Dates & Number of Years of Site Operations: 1974 to 1988 ; 14 years **unknown**

6. Waste Information & Geologic Environment

a. Known or Suspected Sources/Wastes Check all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Abandoned containers | <input checked="" type="checkbox"/> Known or suspected hazardous materials |
| <input type="checkbox"/> Above ground pipeline or tank | <input checked="" type="checkbox"/> Municipal waste |
| <input type="checkbox"/> Animal carcasses | <input type="checkbox"/> Paper mill sludge |
| <input checked="" type="checkbox"/> Buried drums | <input type="checkbox"/> Surface impoundment/lagoons |
| <input type="checkbox"/> Burning of materials | <input type="checkbox"/> Surface spills |
| <input checked="" type="checkbox"/> Demolition/Construction | <input type="checkbox"/> Transformer |
| <input type="checkbox"/> Fly ash | <input type="checkbox"/> Trees/brush |
| <input type="checkbox"/> Foundry sand | <input type="checkbox"/> Underground pipeline or tank |
| <input type="checkbox"/> Industrial accident | <input type="checkbox"/> Unknown |
| | <input type="checkbox"/> Other: name - |

b. Physical Characteristics of Sources/Wastes

- Liquid Solid Liquid & Solid Unknown

c. Waste Containment

- | | |
|---|--|
| <input checked="" type="checkbox"/> Engineered cover
<input type="checkbox"/> maintained <input type="checkbox"/> not maintained | <input checked="" type="checkbox"/> Functioning leachate collection & removal system |
| <input checked="" type="checkbox"/> Functioning & maintained run-off management system | <input type="checkbox"/> Liner |
| <input checked="" type="checkbox"/> Functioning groundwater monitoring system | <input type="checkbox"/> None |
| | <input type="checkbox"/> Unknown |
| | <input type="checkbox"/> Not applicable |

d. Soil Type (regional site specific):

Clay, silt or other fine grained soils present? (lacustrine, tills, etc.) yes no
At surface? yes no At depth? yes no _____ feet

Sand & gravel, coarse grained soils present? yes no
At surface? yes no At depth? yes no to bedrock, 10 or more feet

e. Depth to groundwater (regional site specific): 10 or feet

f. Direction of Groundwater Flow (regional site specific): SW

g. Depth to Bedrock (regional site specific): 10 or more feet

h. Bedrock Type (regional site specific): Sandstone

7. Receptor Information

a. Documentation of Site Visit

A site visit must be conducted to complete the site screening. If you do not have access to enter the property, the site visit should be conducted from the perimeter of the site with the use of binoculars. The intent of the site visit is to determine general site conditions/on-site activities and adjacent land use encroachment issues.

Name of person(s) conducting site visit: Hank Kuehling

Date of site visit: 10/3/00

On-site inspection conducted?: yes no

General site conditions: Document any observed releases and note whether you were able to walk the site. Some examples of things to be aware of include leachate seeps, or evidence of seeps such as stained soil/vegetation; stressed vegetation as a sign of gas migration to the surface, or of leachate seeps; quality and coverage of vegetation on the cap; odors which may indicate gas migration to the atmosphere; erosion of the cap; maintenance of positive drainage over the capped area; visual desiccation cracks in the cap.

Indicate comments on an attached sheet.

Please attach the following to the end of the worksheet:

photographs (required) digital photographs (optional) site sketch (optional)

b. Adjacent Land Uses (indicate all directions) Check all that apply.

- | | | | | | | | | |
|--|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|--|-----------------------------|--|--|
| <input type="checkbox"/> Agricultural: | <input type="checkbox"/> N | <input checked="" type="checkbox"/> S | <input type="checkbox"/> E | <input type="checkbox"/> W | <input type="checkbox"/> NE | <input type="checkbox"/> NW | <input checked="" type="checkbox"/> SE | <input checked="" type="checkbox"/> SW |
| <input type="checkbox"/> Industrial: | <input type="checkbox"/> N | <input type="checkbox"/> S | <input checked="" type="checkbox"/> E | <input type="checkbox"/> W | <input type="checkbox"/> NE | <input type="checkbox"/> NW | <input type="checkbox"/> SE | <input type="checkbox"/> SW |
| <input type="checkbox"/> Recreational: | <input type="checkbox"/> N | <input type="checkbox"/> S | <input type="checkbox"/> E | <input type="checkbox"/> W | <input type="checkbox"/> NE | <input type="checkbox"/> NW | <input type="checkbox"/> SE | <input type="checkbox"/> SW |
| <input type="checkbox"/> Residential: | <input type="checkbox"/> N | <input type="checkbox"/> S | <input type="checkbox"/> E | <input type="checkbox"/> W | <input type="checkbox"/> NE | <input type="checkbox"/> NW | <input type="checkbox"/> SE | <input type="checkbox"/> SW |
| <input type="checkbox"/> Undeveloped: | <input checked="" type="checkbox"/> N | <input type="checkbox"/> S | <input checked="" type="checkbox"/> E | <input checked="" type="checkbox"/> W | <input checked="" type="checkbox"/> NE | <input type="checkbox"/> NW | <input checked="" type="checkbox"/> SE | <input type="checkbox"/> SW |
| <input type="checkbox"/> Other: name - | <input type="checkbox"/> N | <input type="checkbox"/> S | <input type="checkbox"/> E | <input type="checkbox"/> W | <input type="checkbox"/> NE | <input type="checkbox"/> NW | <input type="checkbox"/> SE | <input type="checkbox"/> SW |

c. Potential Groundwater Receptors

Distance to & direction of nearest municipal well: > 1/2 mile feet, direction- east

Distance to & direction of nearest other-than-municipal well: > 1/2 mile feet, direction- south

Distance to & direction of nearest non-community well: > 1/2 mile feet, direction- south

Distance to & direction of nearest private well: 2,500 feet, direction- southwest

Distance to & direction of nearest residence: 2,500 feet, direction- southwest

Homes within 300 feet of waste (gas migration potential); 0 # of homes

Homes between 300 & 1,000 ft to waste (gas migration potential); 0 # of homes

Distance to & direction of nearest building: 50 feet, direction- north

Type of building: on-site building commercial industrial unknown

Indicate any other information on attached comment sheet.

d. Potential Surface Water Receptors

- Type: creek; _____ ft drainage ditch; 200 ft intermittent stream; _____ ft
- lake; 5 ft river; _____ ft wetland; 200 ft

e. Observed Releases

Is there an observed release to a surface water body? yes no unknown

Is there an observed leachate seep? yes no unknown

Is there an observed release to soils? yes no unknown

Are there any odors of concern? yes no unknown

8. Database Selection & Screening Decision

A. Are there environmental data for the media of concern?

- | | | | |
|---------------------------|---|--|------------------------------|
| 1. Groundwater: | <input checked="" type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> n/a |
| 2. Soil | <input type="checkbox"/> yes | <input checked="" type="checkbox"/> no | <input type="checkbox"/> n/a |
| 3. Surface water/sediment | <input type="checkbox"/> yes | <input checked="" type="checkbox"/> no | <input type="checkbox"/> n/a |
| 4. Air | <input type="checkbox"/> yes | <input checked="" type="checkbox"/> no | <input type="checkbox"/> n/a |

If yes, go to B

If no, go to C

B. Based on data from A, is there a documented release to the environment?

Yes: Groundwater Soil Surface water/sediment Air

No

If yes, the site goes into BRRTS – go to F, do not fill out C, D & E

If no, go to C

C. Based on answers to question 7e, did you observe a release to surface water, leachate seep, soil or air?

Yes – go to F

No – go to D

D. Based on known or suspected sources/wastes, their physical characteristics, containment & geologic environment, do you suspect there has been or will be a release to the environment?

Yes Groundwater Soil Surface water/sediment Air

No

If yes, go to F

If no, go to E

E. If there is NOT a likelihood of a release or an observed release of concern, does the site fit any of the following archive criteria?

1. No documented waste disposal and no evidence on-site.
 2. Documented waste removal and no evidence on-site.
 3. Waste facility is no longer regulated and is not a threat to public health, safety, welfare or the environment. [See NR500.08(1)&(2)]
 4. Almost no site information and unable to locate site.

If yes to any of the criteria, the site is archived – update Registry

No, site does NOT fit archive criteria.

If archive criteria are not met, site goes to SHWIMS – skip F and G

F. Based on proximity to receptors, environmental data or observations, and other relevant factors, is there a need for immediate action? (Is there a known or high potential for an imminent threat to human health?)

Yes; Should state/local health departments be contacted? yes no

No

G. Based on known or suspected sources/wastes, their physical characteristics, containment & geologic environment at this site, is initial or further sampling recommended?

Yes: soil groundwater surface water air (landfill gas)

No

9. Sampling Explanation & Other Work Recommended

- a. Briefly explain on attached comment sheet the sampling recommendation. If sampling is recommended, please include an approximate number of samples and type of media.
- b. If you believe additional work is needed (addressing leachate problems, exposed waste, inadequate cover, etc.) please indicate on comment page.

10. CERCLIS Screening Decision

- DO NOT add to CERCLIS -- see attached EPA Checklist
- Add to CERCLIS* -- see attached EPA Checklist
DNR Regional Office recommends that a Superfund Preliminary Assessment/Site Investigation be conducted by the Region, with potential for a Hazard Ranking Score and inclusion on the NPL.

Signature of Team Supervisor

Date

* Only sites that are being added to CERCLIS require the signature of the RR Team Supervisor.

11. BRRTS & SHWIMS Information

- Site is in BRRTS
- Site is in SHWIMS

-
- Add site to BRRTS, follow regional procedure (If B is yes)
 - Add site to SHWIMS (If C is yes or if D is yes and if E is no)
 - Archive site (If E is yes)

-
- Update information in BRRTS, follow regional procedure
 - Update information in SHWIMS, attach printout with changes highlighted

Print Name of Screener: *Hank Ruehling*

Hank Ruehling

11/16/00

Signature of Screener

Date

Name of file reviewer, if different than screener:

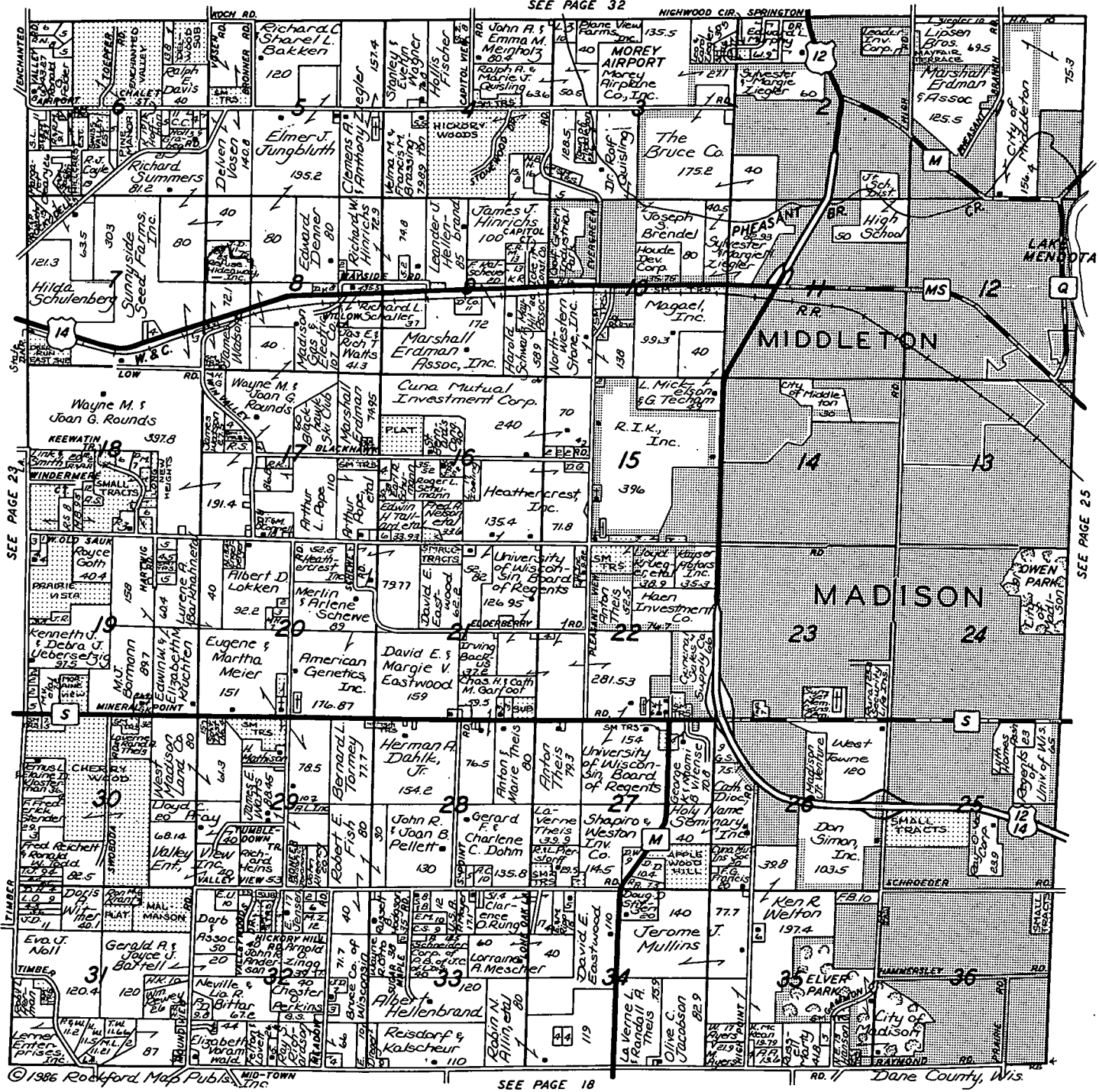
Comments

7.c. The commercial building is being monitored for methane.

7.d. The "lake" noted is actually a small sedimentation basin.

9. Groundwater monitoring is an on-going part of the O&M of the site.

10. The site is already listed in the CERCLIS program.



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