

## State of Wisconsin \ DEPARTMENT OF NATURAL RESOURCES

Scott Walker, Governor  
Cathy Stepp, Secretary  
Jean Romback-Bartels, Regional Director

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June 12, 2013

ROBERT BURKE  
1017 BRIARCLIFF DRIVE  
APPLETON WI 54915

### KEEP THIS DOCUMENT WITH YOUR PROPERTY RECORDS

SUBJECT: **Final Case Closure**  
637 Broad Street, Menasha, WI  
WDNR BRRTS Activity #: 02-71-384947

Dear Mr. Burke:

The Department of Natural Resources (DNR) considers "637 Broad Street" Property closed. No further investigation or remediation is required at this time. Provide this letter to anyone who purchases this property from you. Also attached is a Deed Affidavit for you to file with the Winnebago County Register of Deeds. This affidavit (once filed) will act to extinguish and/or supersede the 2006 affidavit that was placed on the property.

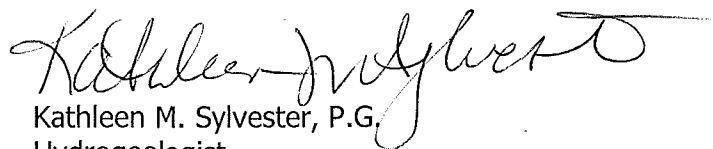
This final closure decision is based on the correspondence and data provided, and is issued under ch. NR 726, Wisconsin Administrative Code. I have reviewed the request for closure on April 30, 2013. The Closure Committee reviews environmental remediation cases for compliance with state laws and standards to maintain consistency in the closure of these cases. An email requesting proper abandonment of the monitoring well(s) on the property was sent to your consultant on April 30, 2013. Documentation regarding abandonment was received on June 12, 2013.

To summarize, this residential property had a potable well that had been improperly filled with waste oil cans and debris by a previous owner. The soil and potential groundwater contamination was discovered in 2002 during a home inspection for a property transaction. The debris area and soils were excavated in 2003; however, the required follow up investigation was never completed at that time. The DNR placed a deed affidavit on the property in 2006 to notify potential purchasers of the requirements. You purchased the property in 2011. In 2012-13 you hired A&E Geosciences to adequately assess and investigation any potential for remaining soil and groundwater contamination at the property.

Please be aware that the case may be reopened pursuant to s. NR 726.09, Wis. Adm. Code, if additional information regarding site conditions indicates that contamination on or from the site poses a threat to public health, safety, or welfare or to the environment.

The DNR appreciates your efforts to restore the environment at this site. If you have any questions regarding this closure decision or anything outlined in this letter, please contact me at (920) 424-0399, or by email at [kathy.sylvester@wisconsin.gov](mailto:kathy.sylvester@wisconsin.gov).

Sincerely,

A handwritten signature in black ink, appearing to read "Kathleen M. Sylvester". The signature is fluid and cursive, with a long horizontal stroke at the end.

Kathleen M. Sylvester, P.G.  
Hydrogeologist  
Remediation & Redevelopment Program

Attachment: AFFIDAVIT for filing.

cc: Case File – OSH  
Chris Ewald – A&E Geosciences (via email)

**SUBMIT AS UNBOUND PACKAGE IN THE ORDER SHOWN**

**Notice:** Pursuant to ch. 292, Wis. Stats., and chs. NR 726 and 746, Wis. Adm. Code, this form is required to be completed for case closure requests. The closure of a case means that the Department of Natural Resources (DNR) has determined that no further response is required at that time based on the information that has been submitted to the DNR. All sections of this form must be completed unless otherwise directed by the Department. Incomplete forms will be considered "administratively incomplete" and processing of the request will stop until required information is provided. Any section of the form not relevant to the case closure request must be fully filled out or explained on a separate page and attached to the relevant section of this form. DNR will consider your request administratively complete when the form and all sections are completed, all attachments are included, and the applicable fees required under ch. NR 749, Wis. Adm. Code, are included, and sent to the proper destinations. Personal information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records Law (ss. 19.31 - 19.39, Wis. Stats.).

**Site Information**

BRRTS No. 02-71-384947		Parcel ID No. 750034800	
BRRTS Activity (Site) Name 637 Broad Street		WTM Coordinates X 644582 Y 415464	
Street Address 637 Broad Street		City Menasha	State ZIP Code WI 54952-3164
Responsible Party (RP) Name Robert Burke			
Company Name			
Street Address 1017 N. Briarcliff Drive		City Appleton	State ZIP Code WI 54915
Phone Number (920) 740-1942		Email centauto03@yahoo.com	

Check here if the RP is the owner of the source property.

Environmental Consultant Name Christopher S. Ewald, P.G.			
Consulting Firm A&E Geosciences, LLC			
Street Address 2439 Hickory Lane		City Appleton	State ZIP Code WI 54915-1118
Phone Number (920) 851-7380		Email ewaldchris@yahoo.com	
Acres Ready For Use 0		Voluntary Party Liability Exemption Site? <input type="radio"/> Yes <input checked="" type="radio"/> No	

**Fees and Mailing of Closure Request**

*If any section is not relevant to the case closure request, you must fully explain the reasons why and attach that explanation to the relevant section of the form. All information submitted shall be legible. Providing illegible information may result in a submittal being considered incomplete until corrected.*

1. **Send a copy of page one** of this form and the applicable ch. NR 749, Wis. Adm. Code, fee(s) to the DNR regional Environmental Program Associate at <http://dnr.wi.gov/topic/Brownfields/Contact.html>. Check all fees that apply:

- \$750 Closure Fee  \$200 GIS Registry Fee for Soil  
 \$250 GIS Registry Fee for Groundwater Lost Well(s) Total Amount of Payment \$ \_\_\_\_\_

2. **Send one paper copy and one e-copy on compact disk of the entire closure package** to the Regional Project Manager assigned to your site. Submit as unbound, separate documents in the order and with the titles prescribed by this form. For electronic document submittal requirements, see <http://dnr.wi.gov/files/PDF/pubs/rr/RR690.pdf>.

## Site Summary

If any section is not relevant to the case closure request, you must fully explain the reasons why and attach that explanation to the relevant section of the form. All information submitted shall be legible. Providing illegible information may result in a submittal being considered incomplete until corrected.

### 1. General Site Information and Site History

- A. **Site Location:** Describe the physical location of the site, both generally and specific to its immediate surroundings.  
Site is a residential parcel on south side of the 600 block of Broad Street, Menasha. It is surrounded by other residential parcels.
- B. **Prior and current site usage:** Specifically describe the current and historic occupancy and types of use.  
Residential and residential.
- C. Describe how and when site contamination was discovered.  
December 12, 2004. Real estate inspection.
- D. Describe the type(s) and source(s) or suspected source(s) of contamination.  
Suspected contamination result of alleged disposal of waste petroleum products and other trash in abandoned dug potable well.
- E. Other relevant site description information (or enter Not Applicable).  
Alleged dumping activities by previous owner, not disclosed to current owner/responsible party at time of sale.
- F. List BRRTS activity site name and number for all other BRRTS activities at this property, including closed cases.  
none
- G. List BRRTS activity/site name(s) and number(s) for all properties immediately adjacent to this site, and those impacted by contamination from this site.  
none
- H. **Current zoning** (e.g. industrial, commercial, residential) for the site and for neighboring properties, and how verified (Provide documentation in Attachment G).  
Residential, "Existing Land Use and Zoning Regulations" Map from City of Menasha.

### 2. General Site Conditions

- A. Soil/Geology
  - i. Describe soil type(s) and relevant physical properties, thickness of soil column across the site, vertical and lateral variations in soil types.  
Winneconne silty clay loam (USDA). Or Till of the Kirby Lake Member of the Kewaunee Formation (Hooyer and Mode). Typical column: 8" sandy organic clay topsoil; 16" lean clay fill with sand and traces of organics, brown to gray brown, rather stiff; 14' lean clay with sand, brown to grayish brown, rather stiff to very stiff, with silty sand and gravel lenses, yellow brown to light gray; 2.5' silty gravel with sand (weathered bedrock) light gray to gray, extremely dense; dolomite bedrock (Ordovician Sinnipee Group).
  - ii. Describe the composition, location and lateral extent, and depth of fill or waste deposits on the site.  
Fill consists of approximately 2' of sandy organic clay (topsoil) and lean clay with sand and traces of organics. Fill and waste to approximately 8 to 10 feet in area of former potable well.
  - iii. Depth to bedrock, bedrock type, and whether or not it was encountered during the investigation.  
18.4 to 18.7 feet to bedrock in borings. Bedrock is an extremely hard gray dolomite and was encountered at the bottom of all three borings.
  - iv. Describe the nature and locations of current surface cover(s) across the site (e.g. natural vegetation, landscaped areas, gravel, hard surfaces, and buildings).  
Site is typical residential parcel. The house is located near the center of the lot biases slightly to the front making the rear yard larger. There is a sidewalk in front with a concrete walk extending to the front door. There is a concrete driveway extending from the street, along the west side of the lot to a garage in the rear yard. The balance of the property is grass. There are trees to the rear of the lot and along the east edge.
- B. Groundwater
  - i. **Discuss depth to groundwater and piezometric elevations.** Describe and explain depth variations, and whether free product affects measurement or water table elevation. Describe the stratigraphic unit(s) where water table was found or which were measured for piezometric levels.  
Depth to groundwater from the ground surface ranged from 8.01' in September 2012 when the well was developed and

first sampled to 6.80' in November 2012 during the second sampling event. This is likely due to seasonal variations. There is no free product at the site. The water table surface is present within the lean clay glacial till approximately 9 to 10 feet above the bedrock surface.

- ii. Discuss groundwater flow direction(s), shallow and deep. Describe and explain flow variations, including fracture flow if present.  
There is only one well at the site therefore flow direction could not be determined but is likely southeast towards the channel between Menasha and Doty Island.
- iii. Discuss groundwater flow characteristics: hydraulic conductivity, flow rate and permeability, or state why this information was not obtained.  
This information was not obtained as the scale of the project did not permit. However, conductivity is likely relatively low in the clay till and in the bedrock and relatively high in the approximate 2-foot layer of silty gravel with sand between the bedrock and till.
- iv. Identify and describe locations/distance of potable and/or municipal Wells within 1200 feet of the site.  
There do not appear to be any potable wells within 1200 feet of the site. The only well located is at Hart Park in Menasha which is approximately 0.7 miles north of the site.

### 3. Site Investigation Summary

#### A. General

- i. Provide a brief summary of the site investigation history. Reference previous submittals by name and date. Describe site investigation activities undertaken since the last submittal for this project and attach the appropriate documentation in Attachment C, if not previously provided.  
Three borings to bedrock. One of the borings converted to monitoring well. Soil samples (one per boring) and groundwater samples (2 rounds) analyzed for RCRA8 Metals, DRO, GRO, PAH, PCB, VOC. Third round groundwater sample analyzed for selenium.
- ii. Identify whether contamination extends beyond the source property boundary, describe the off-site media (e.g., soil, groundwater, etc.) impacted, and the vertical and horizontal extent of off-site impacts.  
No contamination extending beyond site boundary.
- iii. Identify any structural impediments to the completion of site investigation and/or remediation and whether these impediments are on the source property or off the source property. Identify the type and location of any structural impediment (e.g., structure) that also serves as the performance standard barrier for protection of the direct contact or the groundwater pathway.  
No impediments.

#### B. Soil

- i. Describe degree and extent of **soil contamination** at and from this site. Relate this to known or suspected sources and known or potential receptors/migration pathways.  
Soil contamination limited to arsenic, barium, chromium, lead and mercury. All but arsenic present at levels below direct contact standards. All including arsenic detected at a depth of 16 to 17.5 feet.
- ii. Describe the level and types of **soil contaminants** found in the upper four feet of the soil column.  
None.
- iii. Identify the ch. NR 720, Wis. Adm. Code, method used to establish the soil cleanup standards for this site: for example, a Residual Contaminant Level (RCL), a Site-Specific Residual Contaminant Level (SSRCL), or a Performance Standard as determined under ss NR 720.09, 720.11 and 720.19, Wis. Adm. Code. Identify the land use classification that was used to establish cleanup standards. Provide a copy of the supporting calculations/information in Attachment C.  
Residual contaminant level for non-industrial.

#### C. Groundwater

- i. Describe degree and extent of groundwater contamination at or from this site. Relate this to known or suspected sources and known or potential receptors/migration pathways. Specifically address any potential or existing impacts to water supply wells or interception with building foundation drain systems.  
All detected contaminants below the preventive action limit.
- ii. Describe the presence of free product at the site, including the thickness, depth, and locations.  
No free product detected

#### D. Vapor

i. Describe how the vapor migration pathway was assessed, including locations where vapor or indoor air samples were collected. If the vapor pathway was not assessed, explain reasons why.  
Vapor pathway not assessed as only contaminants are metals and not likely to move via vapors.

ii. Identify the applicable DNR action levels and the land use classification used to establish them. Describe where the DNR action levels were reached or exceeded (e.g., sub slab, indoor air or both).  
Not applicable.

E. Surface Water and Sediment

i. Identify whether surface water and/or sediment was assessed and describe the impacts found. If this pathway was not assessed, explain why.  
There is no surface water present at the site.

ii. Identify any surface water and/or sediment action levels used to assess the impacts for this pathway and how these were derived. Describe where the DNR action levels were reached or exceeded.  
Not applicable.

**4. Remedial Actions Implemented and Residual Levels at Closure**

A. General: Provide a brief summary of the remedial action history. List previous remedial action report submittals by name and date. Identify remedial actions undertaken since the last submittal for this project and provide the appropriate documentation in Attachment C.

No remedial actions have been taken.

B. Describe any immediate or interim actions taken at the site under ch NR 708, Wis. Adm. Code.  
The former potable well had either been filled with soil by a previous owner or had slumped. Only a shallow depression remained. This was leveled off with clean fill and compacted to reduce the possibility of ponding and infiltration of precipitation.

C. Describe the *active* remedial actions taken at the site, including: type of remedial system(s) used for each media impacted; the size and location of any excavation or in-situ treatment; the effectiveness of the systems to address the contaminated media and substances; operational history of the systems; and summarize the performance of the active remedial actions. Provide any system performance documentation in Attachment A.7.

None

D. Provide a discussion of the nature, degree and extent of residual contamination that will remain at the site or on off-site affected properties after case closure.

The nature of the contamination in soil and groundwater is only RCRA metals. The only metal in the soil above the NR720 direct contact RCL is arsenic. Arsenic is present at 1.8 to 2.2 ug/kg in the soil however this is at the sample depth of 16-17.5 feet below the surface. If the arsenic is a result of the waste allegedly disposed of at the site it can not be present at a depth shallower than that which it was deposited at or the groundwater surface, whichever is higher. The waste was deposited at the bottom of the dug well which was at approximately 8 feet below the surface and the groundwater surface was measured at 6.80 to 8.01 feet below the surface. In the groundwater the only contaminants detected were RCRA metals. In the most recent sampling round all metals were present at levels below the PAL or not detected.

E. Describe the remaining soil contamination within four feet of ground surface (direct contact zone) that attains or exceeds the ch. NR720, Wis. Adm. Code, standard(s) for direct contact.

None

F. Describe the remaining soil contamination in the vadose zone that attains or exceeds the soil standard(s) for the groundwater pathway.

None

G. Describe how the residual contamination will be addressed, including but not limited to details concerning: covers, engineering controls or other barrier features; use of natural attenuation of groundwater; and vapor mitigation systems or measures.

There is no residual contamination which needs to be addressed.

H. If using natural attenuation as a groundwater remedy, describe how the data collected supports the conclusion that natural attenuation is effective in reducing contaminant mass and concentration, (e.g. stable or receding groundwater plume).

n/a

- I. Identify how all exposure pathways were removed and/or adequately addressed by immediate and/or remedial action(s) described above in paragraphs, B, C, D, E and F.  
Minimal contamination was detected. All that was detected were metals which are not prone to migration. They were detected at great depth which is not prone to direct contact. There is no surface water on site. There are no potable wells in the vicinity. The contamination does not leave the site.
- J. Identify any system hardware anticipated to be left in place after site closure, and explain the reasons why it will remain.  
none
- K. Identify the need for a ch. NR 140, Wis. Adm. Code, groundwater Preventive Action Limit (PAL) or Enforcement Standard (ES) exemption, and identify the affected monitoring points and applicable substances.  
none
- L. If a DNR action level for vapor intrusion was exceeded (for indoor air, sub slab, or both) describe where it was exceeded and how the pathway was addressed.  
none
- M. Describe the surface water and/or sediment contaminant concentrations and areas after remediation. If a DNR action level was exceeded, describe where it was exceeded and how the pathway was addressed.  
none

**5. Continuing Obligations: Situations where a maintenance plan(s) and inclusion on DNR's GIS Registry are required.**

Directions: Check all that apply to this case closure request:

	This scenario Applies to this Case Closure		Case Closure Scenario: Maintenance Plans and GIS Registry	Maintenance Plan (s) Required in Attachment D	GIS Registry Listing
	A. On-Site	B. Off-Site			
i.	<input type="checkbox"/>	<input type="checkbox"/>	Engineering Control/Barrier for Direct Contact	✓	✓
ii.	<input type="checkbox"/>	<input type="checkbox"/>	Engineering Control/Barrier for Groundwater Infiltration	✓	✓
iii.	<input type="checkbox"/>	<input type="checkbox"/>	Vapor Mitigation - post closure passive system	✓	✓
iv.	<input type="checkbox"/>	<input type="checkbox"/>	Vapor Mitigation - post closure active system	✓	✓
v.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	None of the above scenarios apply to this case closure	NA	NA

**6. Continuing Obligations: Situations where inclusion on DNR's GIS Registry is required.**

Directions: Check all that apply to this case closure request:

	This scenario Applies to this Case Closure		Case Closure Scenario: GIS Registry Only	GIS Registry Listing
	A. On-Site	B. Off-Site		
i.	<input type="checkbox"/>	<input type="checkbox"/>	Residual soil contamination exceeds ch. NR 720 generic or site-specific RCLs	✓
ii.	<input type="checkbox"/>	<input type="checkbox"/>	Sites with groundwater contamination equal to or greater than the ch. NR 140, enforcement standards (ES)	✓
iii.	<input type="checkbox"/>	<input type="checkbox"/>	Monitoring wells: lost, transferred or remaining in use	✓
iv.	<input type="checkbox"/>	<input type="checkbox"/>	Structural Impediment (not as a performance standard)	✓
v.	<input type="checkbox"/>	<input type="checkbox"/>	Residual soil contamination remaining at ch. NR 720 Industrial Use levels	✓
vi.	<input type="checkbox"/>	<input type="checkbox"/>	Vapor intrusion may be future, post-closure issue if building use or land use changes	✓
vii.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	None of the above scenarios apply to this case closure	NA

**7. Underground Storage Tanks**

- A. Were any tanks, piping or other associated tank system components removed as part of the investigation or remedial action?  Yes  No
- B. Do any upgraded tanks meeting the requirements of ch. SPS 310, Wis. Adm. Code, exist on the property?  Yes  No
- C. If the answer to question 7b is yes, is the leak detection system currently being monitored?  Yes  No

**Data Tables (Attachment A)**

*If any section is not relevant to the case closure request, you must fully explain the reasons why and attach that explanation to the relevant section of the form. All information submitted shall be legible. Providing illegible information may result in a submittal being considered incomplete until corrected.*

**General directions for Data Tables:**

- Use bold and italics font on information of importance on tables and figures. Use **bold font** for ch. NR 140, Wis. Adm. Code, groundwater enforcement standard (ES) attainments or exceedances, and *italicized font* for ch. NR 140, Wis. Adm. Code, groundwater preventive action limit (PAL) standard attainments or exceedances.
- Do not use shading or highlighting on the analytical tables.
- Include on Data Tables the level of detection for results which are below the detection level (i.e. do not just list as no detect (ND)).
- Include the units on data tables.
- Summaries of all data must include information collected by previous consultants.
- Do not submit lab data sheets unless these have not been submitted in a previous report. Tabulate all data required in s. NR 716.15(2)(g)3, Wis. Adm. Code, in the format required in s. NR 716.15(2)(h)3, Wis. Adm. Code.
- Include in Attachment A all of the following tables, in the order prescribed below, with the specific Closure Form titles noted on the separate attachments (e.g., Title: A.1. Groundwater Analytical Table; A.2. Pre-remedial Soil Analytical Table, etc).
- For required documents, each table (e.g., A.1., A.2., etc.) should be a separate PDF.

**A. Data Tables**

- A.1. **Groundwater Analytical Table(s):** Table(s) showing the analytical results and collection dates, for all groundwater sampling points e.g. monitoring wells, temporary wells, sumps, extraction wells, any potable wells and any other wells, extraction wells and any potable wells for which samples have been collected.
- A.2. **Pre-remedial Soil Analytical Table(s):** Table(s) showing the soil analytical results and collection dates - prior to conducting the interim and/or remedial action. Indicate if sample was collected above or below the all-time low water table (unsaturated verses saturated).
- A.3. **Post-remedial Soil Analytical Table(s):** Table(s) showing the post-remedial action soil analytical results and collection dates. Indicate if sample was collected above or below the all-time low water table (unsaturated verses saturated).
- A.4. **Pre and Post Remaining Soil Contamination Soil Analytical Table(s):** Table(s) showing only the pre and post remedial action soil analytical results that exceed a Residual Contaminate Level (RCL) or a Site-Specific Residual Level (SSRCL).
- A.5. **Vapor Analytical Table:** Table(s) showing type(s) of samples, sample collection methods, analytical method, sample



results, date of sample collection, time period for sample collection, method and results of leak detection, and date, method and results of communication testing.

- A.6. **Other Media of Concern (e.g., sediment or surface water):** Table(s) showing type(s) of sample, sample collection method, analytical method, sample results, date of sample collection, time period for sample collection, method and results sampling.
- A.7. **Water Level Elevations:** Table(s) showing all water level elevation measurements and dates from all monitoring wells. If present, free product should be noted on the table.
- A.8. **Other:** This attachment should include: 1) any available tabulated natural attenuation data; 2) data tables pertaining to engineered remedial systems that document operational history, demonstrate system performance and effectiveness, and display emissions data; and (3) any other data tables relevant to case closure not otherwise noted above. If this section is not applicable, please explain the reasons why.

## Maps and Figures (Attachment B)

*If any section is not relevant to the case closure request, you must fully explain the reasons why and attach that explanation to the relevant section of the form. All information submitted shall be legible. Providing illegible information may result in a submittal being considered incomplete until corrected.*

### General Directions for all Maps and Figures:

- If any map or figure is not relevant to the case closure request, you must fully explain the reason(s) why and attach that explanation (properly labeled with the map/ figure title) in Attachment B.
- Provide on paper no larger than 11 x 17 inches, unless otherwise directed by the Department. Maps and figures may be submitted in a larger electronic size than 11x17 inches, in a portable document format (pdf) readable by the Adobe Acrobat Reader. However, those larger-size documents must be legible when printed.
- Prepare visual aids, including maps, plans, drawings, fence diagrams, tables and photographs according to the applicable portions of ss. NR 716.15(2)(h)1 and 726.05(3)(a)4.d, Wis Adm. Code.
- Do not use shading or highlights on any of the analytical tables.
- Include all sample locations.
- Contour lines should be clearly labeled and defined.
- Include in Attachment B all of the following maps and figures, in the order prescribed below, with the specific Closure Form titles noted on the separate attachments (e.g., Title: B.1. Location Map; B.2. Detailed Site Map, etc).
- For the electronic copies that are required, each map (e.g., B.1.a., B.2.a, etc.,) should be a separate PDF.

#### B.1. Location Maps

- B.1.a. **Location Map:** A map outlining all properties within the contaminated site boundaries on a U.S.G.S. topographic map or plat map in sufficient detail to permit easy location of all impacted and/or adjacent parcels. If groundwater standards are exceeded, include the location of all potable wells, including municipal wells, within 1200 feet of the area of contamination.
- B.1.b. **Detailed Site Map:** A map that shows all relevant features (buildings, roads, current ground surface cover, individual property boundaries for on-site and applicable off-site properties, contaminant sources, utility lines, monitoring wells and potable wells) within the contaminated area. This map is to show the location of all contaminated public streets, and highway and railroad rights-of-way in relation to the source property and in relation to the boundaries of groundwater contamination exceeding a ch. NR 140 Enforcement Standard (ES), and/or in relation to the boundaries of soil contamination exceeding a Residual Contaminant Level (RCL) or a Site Specific Residual Contaminant Levels (SSRCL) as determined under ss. NR 720.09, 720.11 and 720.19, Wis. Adm. Code.
- B.1.c. **RR Site Map:** From RR Sites Map (<http://dnrm.wisconsin.gov/imf/imf.jsp?site=brts2>) attach a map depicting the source property, and all open and closed BRRTS sites within a half-mile radius or less of the property.

#### B.2. Soil Figures

- B.2.a. **Pre-remedial Soil Contamination:** Figure(s) showing the sample location of all pre-remedial, unsaturated contaminated soil and a single contour showing the horizontal extent of each area of contiguous residual soil contamination that exceeded a Residual Contaminant Level (RCL) or a Site-Specific Residual Contaminant Level (SSRCL) as determined under ss. NR 720.09, 720.11 and 720.19, Wis. Adm. Code.
- B.2.b. **Post-remedial Soil Contamination :** Figure(s) showing the sample location of all post-remedial, unsaturated contaminated soil and a single contour showing the horizontal extent of each area of contiguous residual soil contamination that exceeds a Residual Contaminant Level (RCL) or a Site-Specific Residual Contaminant Level (SSRCL) as determined under ss. NR 720.09, 720.11 and 720.19, Wis. Adm. Code. A separate contour line should be used to indicate the extent of residual direct contact exceedances.
- B.2.c. **Pre/Post Remaining Soil Contamination:** Figure(s) showing the only location of all pre and post remedial residual soil sample location(s) where unsaturated contaminated soil remains after remediation and a single contour showing the horizontal extent of each area of contiguous residual soil contamination that exceeds a Residual Contaminant Level (RCL) or a Site-Specific Residual Level (SSRCL) as determined under ss. NR 720.09, 720.11 and 720.19, Wis. Admin. Code. A separate contour line should be used to indicate the extent of residual direct contact exceedances.

### B.3. Groundwater Figures

- B.3.a. **Geologic Cross-Section Figure(s):** One or more cross-section diagrams showing soil types and correlations across the site, water table and piezometric elevations, and locations and elevations of geologic rock units, if encountered. Display on one or more figures all of the following:
- Source location(s) and vertical extent of residual soil contamination exceeding a Residual Contaminant Level (RCL) or a Site Specific Residual Contaminant Level (SSRCL).
  - Source location(s) and lateral and vertical extent if groundwater contamination exceeds a ch. NR 140 Enforcement Standard (ES)
  - Surface features, including buildings and basements, and show surface elevation changes.
  - Any areas of active remediation within the cross section path, such as excavations or treatment zones.
  - Include a map displaying the cross-section location(s), if they are not displayed on the Detailed Site Map (Map B.1b)
- B.3.b. **Groundwater Isoconcentration:** Figure(s) showing the horizontal extent of the post-remedial groundwater contamination exceeding a ch. NR 140, Wis. Adm. Code, Preventive Action Limit (PAL) and/or an Enforcement Standard (ES). Indicate the date and direction of groundwater flow based on the most recent sampling data.
- B.3.c. **Groundwater Flow Direction:** Figure(s) representing groundwater movement at the site. If the flow direction varies by more than 20° over the history of the site, submit two groundwater flow maps showing the maximum variation in flow direction.
- B.3.d. **Monitoring Wells:** Figure(s) showing all monitoring wells, with well identification number. Clearly designate any wells that: (1) are proposed to be abandoned; (2) cannot be located; (3) are being transferred; (4) will be retained for further sampling, or (5) have been previously abandoned.

### B.4. Vapor Maps and Other Media

- B.4.a. **Vapor Intrusion Map:** Map(s) showing all locations and results for samples taken to investigate the vapor intrusion pathway, in relation to remaining soil and groundwater contamination, including sub-slab, indoor air, soil vapor, ambient air, and communication testing. Show locations and footprints of affected structures and utility corridors, and/or where residual contamination poses a future risk of vapor intrusion.
- B.4.b. **Other media of concern (e.g., sediment or surface water):** Map(s) showing all sampling locations and results for other media investigation. Include the date of sample collection and identify where any standards are exceeded.
- B.4.c. **Other:** Include any other relevant maps and figures not otherwise noted above. (This section may remain blank)

## Documentation of Remedial Action (Attachment C)

*If any section is not relevant to the case closure request, you must fully explain the reasons why and attach that explanation to the relevant section of the form. All information submitted shall be legible. Providing illegible information may result in a submittal being considered incomplete until corrected.*

### General Directions:

- Include in Attachment C all of the following documentation, in the order prescribed below, with the specific Closure Form titles noted on the separate attachments (e.g., Title: C.1. Site Investigation Documentation; C.2. Investigative Waste, etc).
  - If the documentation requested below is "not applicable" to the site-specific circumstances, include a brief explanation to support that conclusion.
  - If the documentation requested below has already been submitted to the Department, please note the title and date of the report for that particular document requested.
- C.1. **Site investigation documentation**, that has not otherwise been previously submitted.
  - C.2. **Investigative waste** disposal documentation.
  - C.3. **NR 720.19 analysis**, assumptions and calculations for site specific RCLs (SSRCLs), with justification, including EPA Soil Screening Level Model Calculations and results.
  - C.4. **Construction documentation** or as-built report for any constructed remedial action or portion of, or interim action specified in s. NR 724.02(1), Wis. Adm. Code.
  - C.5. **Decommissioning of Remedial Systems.** Include plans to properly abandon any systems or equipment upon receiving conditional closure.
  - C.6. **Photos.** For sites or facilities with a cover or other performance standard, a structural impediment or a vapor mitigation system. Include one or more photographs documenting the condition and extent of the feature at the time of the closure request. Pertinent features should be visible and discernible. Photographs must be labeled with the site name, the features shown, location and the date on which the photograph was taken.
  - C.7. **Other.** Include any other relevant documentation not otherwise noted above. (This section may remain blank)

## Maintenance Plan(s) (Attachment D)

*If any section is not relevant to the case closure request, you must fully explain the reasons why and attach that explanation to the relevant section of the form. All information submitted shall be legible. Providing illegible information may result in a submittal being considered incomplete until corrected.*

When one or more "maintenance plans" are required for a site closure, include in each maintenance plan all required information in sections D.1. through D.5. below, and attach the plan(s) in Attachment D. The following "model" maintenance plans can be located at: (1) Maintenance plan for a engineering control or cover: <http://dnr.wi.gov/topic/Brownfields/documents/maintenance-plan.pdf>; and (2) Maintenance plan for vapor intrusion: [http://dnr.wi.gov/topic/Brownfields/documents/appendix5\\_606.pdf](http://dnr.wi.gov/topic/Brownfields/documents/appendix5_606.pdf).

- D.1. **Location map(s)** which show(s): (1) the feature that requires maintenance; (2) the location of the feature(s) that require(s) maintenance - on and off the source property; (3) the extent of the structure or feature(s) to be maintained, in relation to other structures or features on the site; (4) the extent and type of residual contamination; and (5) and all property boundaries.
- D.2. **Brief descriptions** of the type, depth and location of residual contamination.
- D.3. **Description of maintenance action(s)** required for maximizing effectiveness of the engineered control, vapor mitigation system, feature or other action for which maintenance is required.
- D.4. **Inspection log**, to be maintained on site, or at a location specified in the maintenance plan or approval letter.
- D.5. **Contact information**, including the name, address and phone number of the individual or facility who will be conducting the maintenance.

### **Monitoring Well Information (Attachment E)**

*If any section is not relevant to the case closure request, you must fully explain the reasons why and attach that explanation to the relevant section of the form. All information submitted shall be legible. Providing illegible information may result in a submittal being considered incomplete until corrected.*

#### **General Directions:**

Attach monitoring well construction and development forms (DNR FORM 4400-113 A and B: [http://dnr.wi.gov/topic/groundwater/documents/forms/4400\\_113\\_1\\_2.pdf](http://dnr.wi.gov/topic/groundwater/documents/forms/4400_113_1_2.pdf)) for all wells that will remain in-use, be transferred to another party or that could not be located. A figure of these wells should be included in Attachment B.3.d.

#### **Select One:**

- No monitoring wells were required as part of this response action.
- All monitoring wells have been located and will be properly abandoned upon the DNR granting conditional closure to the site
- Select One or More:**
  - Not all monitoring wells can be located, despite good faith efforts. Attachment E must include description of efforts made to locate the "lost" wells.
  - One or more wells will be transferred to another owner upon case closure being granted. Attachment E should include documentation identifying the name, address and email for the new owner(s).
  - One or more wells will remain in use at the site after this closure. Attachment E must include documentation as to the reason(s) the well(s) will remain in use.

**Notifications to Owners of Impacted Properties (Attachment F)**

If any section is not relevant to the case closure request, you must fully explain the reasons why and attach that explanation to the relevant section of the form. All information submitted shall be legible. Providing illegible information may result in a submittal being considered incomplete until corrected.

**General Directions:**

- State law requires that the responsible party provide a 30-day, written advance notice (i.e., a letter) to certain persons prior to applying for case closure. This requirement applies if: (1) the person conducting the response action does not own the source property; (2) the contamination has migrated onto another property; and/or (3) one or more monitoring wells will not be abandoned.
- A model "template letter" for these mandatory notifications can be downloaded at: <http://dnr.wi.gov/files/PDF/pubs/rr/RR919.pdf>.

**Check all that apply to the site-specific circumstances of this case closure:**

	<b>A. Impacted Source Property and Owner is not Conducting Cleanup</b>	<b>B. Impacted Right of Way</b>	<b>C. Impacted Off-Site Property Owner</b>	<b>Impacted Property Notification Situations: Ch. NR 726 Appendix A Letter</b>
1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Residual groundwater contamination exceeds Ch. NR 140 Wis. Administrative Code enforcement standards.
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Residual soil contamination that attains or exceeds standards is present after the remedial action is complete, and must be properly managed should it be excavated or removed.
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	An engineered cover or a soil barrier (e.g. pavement) must be maintained over contaminated soil for direct contact or groundwater infiltration concerns.
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Industrial land use soil standards were used for the clean-up standard.
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A vapor mitigation system (or other specific vapor protection) must be operated and maintained.
6.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Vapor assessment needed if use changes.
7.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Structural impediment.
8.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Lost, transferred or open monitoring wells.
9.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Not Applicable.

If any of the previous boxes in rows 1 thru 8 were checked, include the following as part of Attachment F:

- FORM 4400-246;
- Copy of each letter sent, 30 days or more prior to requesting closure; and
- Proof of receipt for each letter.
- For this site closure, 0 (number) property (ies) has/have been impacted, the owners have been notified, and copies of the letters and receipts are included in Attachment F.

**Source Legal Documents (Attachment G)**

If any section is not relevant to the case closure request, you must fully explain the reasons why and attach that explanation to the relevant section of the form. All information submitted shall be legible. Providing illegible information may result in a submittal being considered incomplete until corrected.

Include all of the following documents, in this order, in Attachment G:

- G.1. **Deeds - Source Property and Other Impacted Properties:** The most recent deed with legal descriptions clearly labeled for (1) the **Source Property** (where the contamination originated) and (2) all **off-source** (off-site) properties where letters were required to be sent per the ch. NR 700, Wis. Adm. Code, rule series (e.g., off-site cover maintenance required, lost monitoring well, off-site cover property impacts to groundwater exceeding the ch. NR 140, Wis. Adm. Code).  
*Note: If a property has been purchased with a land contract and the purchaser has not yet received a deed, a copy of the land contract which includes the legal description shall be submitted instead of the most recent deed. If the property has been inherited, written documentation of the property transfer should be submitted along with the most recent deed.*
- G.2. **Certified Survey Map:** A copy of the certified survey map or the relevant section of the recorded plat map for those properties where the legal description in the most recent deed refers to a certified survey map or a recorded plat map. (Lots on subdivided or platted property (e.g. lot 2 of xyz subdivision)).
- G.3. **Verification of Zoning:** Documentation (e.g., official zoning map or letter from municipality) of the property's or properties' current zoning status.
- G.4. **Signed Statement:** A statement signed by the Responsible Party (RP), which states that he or she believes that the attached legal description(s) accurately describe(s) the correct contaminated property or properties.

**Signatures and Findings for Closure Determination**

If any section is not relevant to the case closure request, you must fully explain the reasons why and attach that explanation to the relevant section of the form. All information submitted shall be legible. Providing illegible information may result in a submittal being considered incomplete until corrected.

Check the correct signature block below for this case closure request, and have the proper environmental professional(s) sign this document, in accordance with the ch. NR 700 Wis. Adm. Code rule series. Both boxes may be checked if applicable to this case closure.

- A response action(s) for this site addresses groundwater contamination (including natural attenuation remedies). In this situation, the closure request must be prepared by, or under the supervision of, a professional engineer and a hydrogeologist, as defined in ch. NR 712, Wis. Adm. Code. Include both signatures provided below with the submittal.
- The response action(s) for this site addresses media other than groundwater. In this situation, the case closure request must be prepared by, or under the supervision of, a professional engineer, as defined in ch. NR 712, Wis. Adm. Code. The "engineering certification" language below, at a minimum, must be signed.

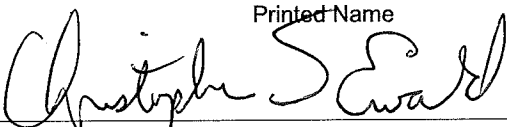
**Engineering Certification**

I \_\_\_\_\_ hereby certify that I am a registered professional engineer in the State of Wisconsin, registered in accordance with the requirements of ch. A-E 4, Wis. Adm. Code; that this case closure request has been prepared in accordance with the Rules of Professional Conduct in ch. A-E 8, Wis. Adm. Code; and that, to the best of my knowledge, all information contained in this case closure request is correct and the document was prepared in compliance with all applicable requirements in chs. NR 700 to 726, Wis. Adm. Code. All phases of work necessary to obtain data, develop conclusions, recommendations and prepare submittals for this case closure request have been prepared by me, or their preparation has been supervised by me. Specifically, with respect to compliance with the rules, in my professional opinion a site investigation has been conducted in accordance with ch. NR 716, Wis. Adm. Code, and all necessary remedial actions have been completed in accordance with chs. NR 140, NR 718, NR 720, NR 722, NR 724 and NR 726, Wis. Adm. Codes."

Printed Name	Title	
Signature	Date	P.E. Stamp and Number

**Hydrogeologist Certification**

I Christopher S. Ewald, P.G. hereby certify that I am a hydrogeologist as that term is defined in s. NR 712.03 (1), Wis. Adm. Code, and that, to the best of my knowledge, all of the information contained in this case closure request is correct and the document was prepared in compliance with all applicable requirements in chs. NR 700 to 726, Wis. Adm. Code. All phases of work necessary to address groundwater contamination including obtaining data, developing conclusions, recommendations and preparing submittals for this case closure request have been prepared by me, or their preparation has been supervised by me. Specifically, with respect to compliance with the rules, in my professional opinion a site investigation has been conducted in accordance with ch. NR 716, Wis. Adm. Code, and all necessary remedial actions have been completed in accordance with chs. NR 140, NR 718, NR 720, NR 722, NR 724 and NR 726, Wis. Adm. Codes."

Christopher S. Ewald, P.G.	Geologist, Hydrogeologist, Owner
Printed Name	Title
	7 JUN 2013
Signature	Date

Attachment A 1  
Groundwater Analytical Table(s)

# Table A1

Table 3 – 637 Broad Street Limited Site Investigation Groundwater Results

MW-1 25 Sept 12	25 Sept 12 (µg/kg)	29 Nov 12 (µg/kg)	13 Feb 13 (µg/kg)	NR140 PAL (µg/kg)	NR140 ES (µg/kg)
RCRA 8 Metals					
Arsenic	<b>36</b> (over ES)	< 6.5		1	10
Barium	88	94		400	2000
Cadmium	< 0.16	< 0.70		0.5	5
Chromium	1.6*	< 1.4		10	100
Lead	<b>3.0</b> (over PAL)	< 1.9		1.5	15
Mercury	< 0.015	< 0.049		0.2	2
Selenium	1.7*	<b>110</b> (over ES)	5.0	10	50
Silver	0.48*	4.5*		10	50
DRO	< 100	< 100			
GRO	< 100	< 100			
PAH	ND	ND			
PCB	ND	ND			
VOC	ND	ND			
Water Level	-8.01	-6.80	-7.43		

Attachment A 2  
Pre-remedial Soil Analytical Table(s)



# Table A2

Table 1 – 637 Broad Street Limited Site Investigation Soil Results

Boring No.	Depth (feet)	PID (IUI)	RCRA 8 (mg/kg)	DRO (mg/kg)	GRO (mg/kg)	PAH (µg/kg)	PCB (mg/kg)	VOC (µg/kg)
SB-1	0-2	0.0	-	-	-	-	-	-
	2-4	0.0	-	-	-	-	-	-
	4-6	0.0	-	-	-	-	-	-
	Dotted line indicates 6-7.5	0.0	-	-	-	-	-	-
All-time low water level	8.5-10	0.0	-	-	-	-	-	-
	11-12.5	0.0	-	-	-	-	-	-
	13.5-15	0.0	-	-	-	-	-	-
	16-17.5	0.0	See table 2	< 10	< 10	ND	ND	ND
SB-2	0-2	0.0	-	-	-	-	-	-
	2-4	0.0	-	-	-	-	-	-
	4-6	0.0	-	-	-	-	-	-
	Dotted line indicates 6-7.5	0.0	-	-	-	-	-	-
All-time low water level	8.5-10	0.0	-	-	-	-	-	-
	11-12.5	0.0	-	-	-	-	-	-
	13.5-15	0.0	-	-	-	-	-	-
	16-17.5	0.0	See table 2	< 10	< 10	ND	ND	ND
SB-3	0-2	0.0	-	-	-	-	-	-
	2-4	0.0	-	-	-	-	-	-
	4-6	0.0	-	-	-	-	-	-
	Dotted line indicates 6-7.5	0.0	-	-	-	-	-	-
All-time low water level	8.5-10	0.0	-	-	-	-	-	-
	11-12.5	0.0	-	-	-	-	-	-
	13.5-15	0.0	-	-	-	-	-	-
	16-17.5	0.0	See table 2	< 10	< 10	ND	ND	ND
	18.5-20	0.0	-	-	-	-	-	-

Table 2 – 637 Broad Street Limited Site Investigation Soil Results

Metal (NR720 Direct Contact Standard)	SB-1 Results (mg/kg)	SB-2 Results (mg/kg)	SB-3 Results (mg/kg)
Arsenic (0.039)	1.9	2.2	1.8
Barium	3.8	6.0	8.8
Cadmium (8)	< 0.04	< 0.04	< 0.04
Chromium (14)	3.9	4.9	5.1
Lead (50)	6.8	7.8	8.3
Mercury	0.0030* (between LOD and LOQ)	0.0040*	0.0027*
Selenium	< 0.32	< 0.32	< 0.32

Attachment A 3  
Post-remedial (Residual) Soil Analytical Table(s)

Not Included.

No remediation was performed or necessary.

Attachment A 4  
Pre and Post Remaining Soil Contamination Soil Analytical  
Table(s)

Not Included.

No remaining soil exceeds RCLs or SSRCLs.

Attachment A 5  
Vapor Analytical Table

Not Included.

Vapor pathway not a concern.

Attachment A 6  
Other Media of Concern

Not Included.

No other media of concern.

Attachment A 7  
Water Level Elevations

# Table A7

Table 3 – 637 Broad Street Limited Site Investigation Groundwater Results

MW-1 25 Sept 12	25 Sept 12 (µg/kg)	29 Nov 12 (µg/kg)	13 Feb 13 (µg/kg)	NR140 PAL (µg/kg)	NR140 ES (µg/kg)
RCRA 8 Metals					
Arsenic	<b>36</b> (over ES)	< 6.5		1	10
Barium	88	94		400	2000
Cadmium	< 0.16	< 0.70		0.5	5
Chromium	1.6*	< 1.4		10	100
Lead	3.0 (over PAL)	< 1.9		1.5	15
Mercury	< 0.015	< 0.049		0.2	2
Selenium	1.7*	<b>110</b> (over ES)	5.0	10	50
Silver	0.48*	4.5*		10	50
DRO	< 100	< 100			
GRO	< 100	< 100			
PAH	ND	ND			
PCB	ND	ND			
VOC	ND	ND			
Water Level	-8.01	-6.80	-7.43		

Attachment A 8  
Other

Not Included.

No additional tabulated data for this section.

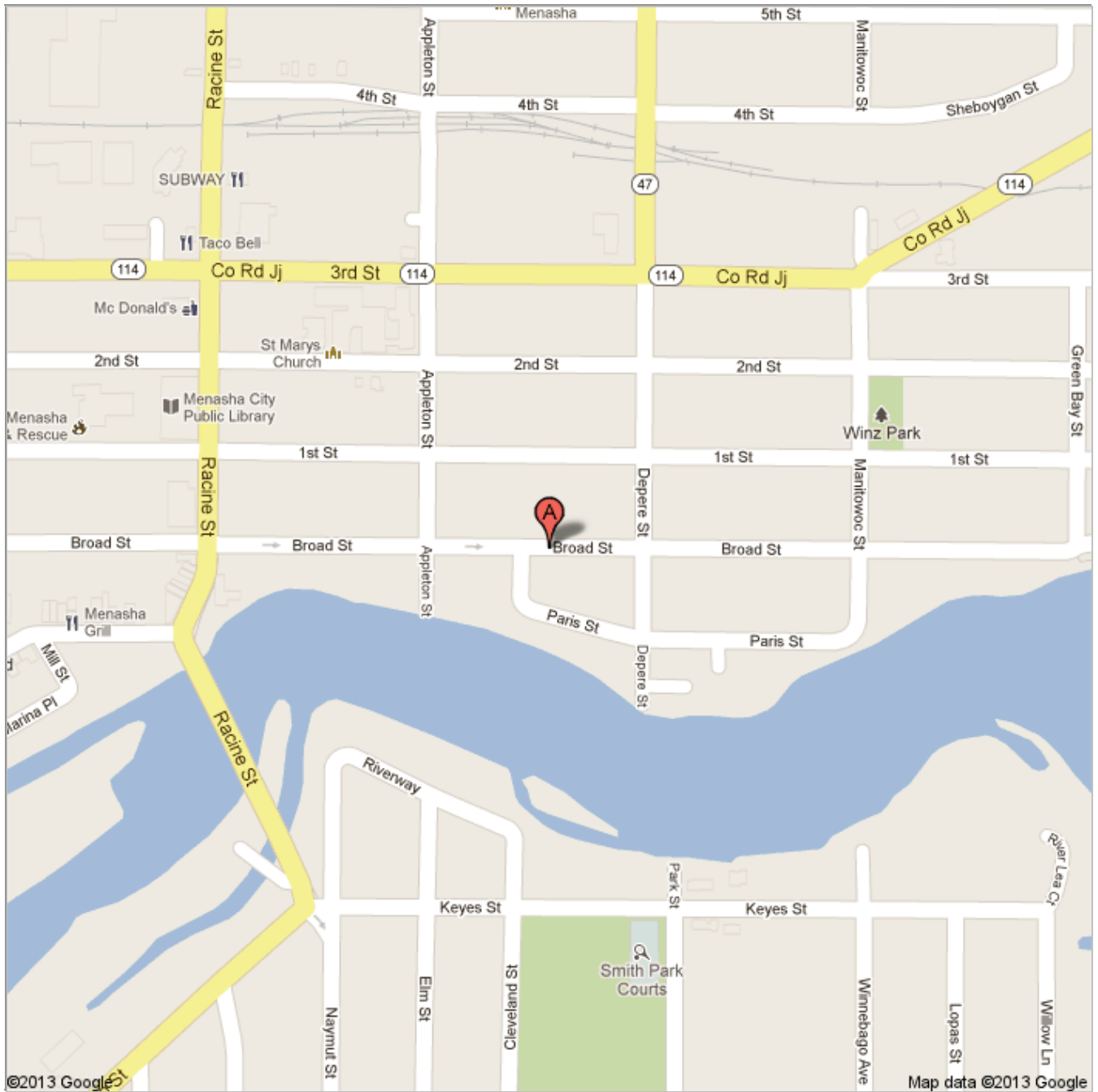


Attachment B 1A  
Location Map



Address **637 Broad St**  
**Menasha, WI 54952**

Location Map



Attachment B 1B  
Detailed Site Map

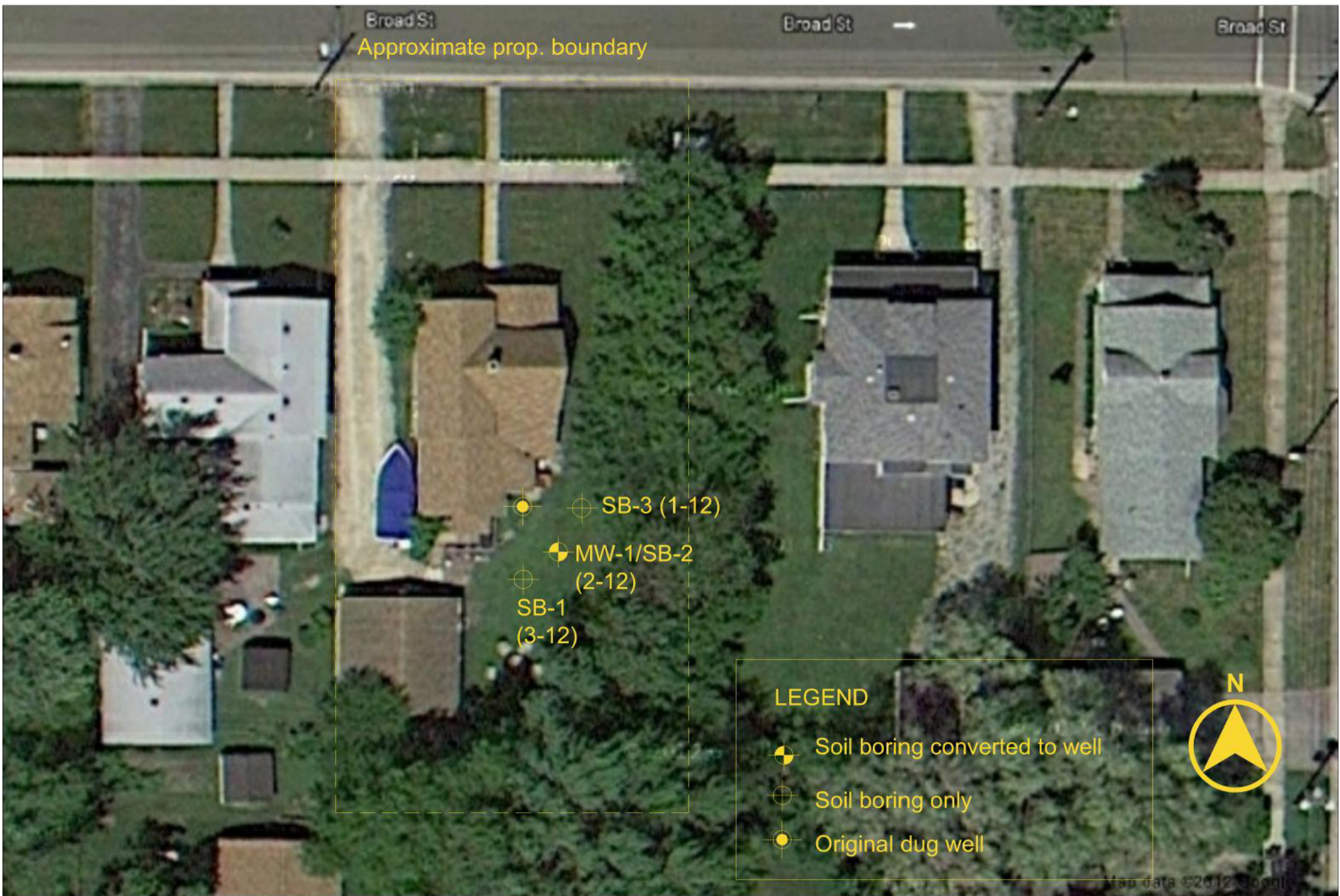


Figure 1 - Site Features and Sampling Locations

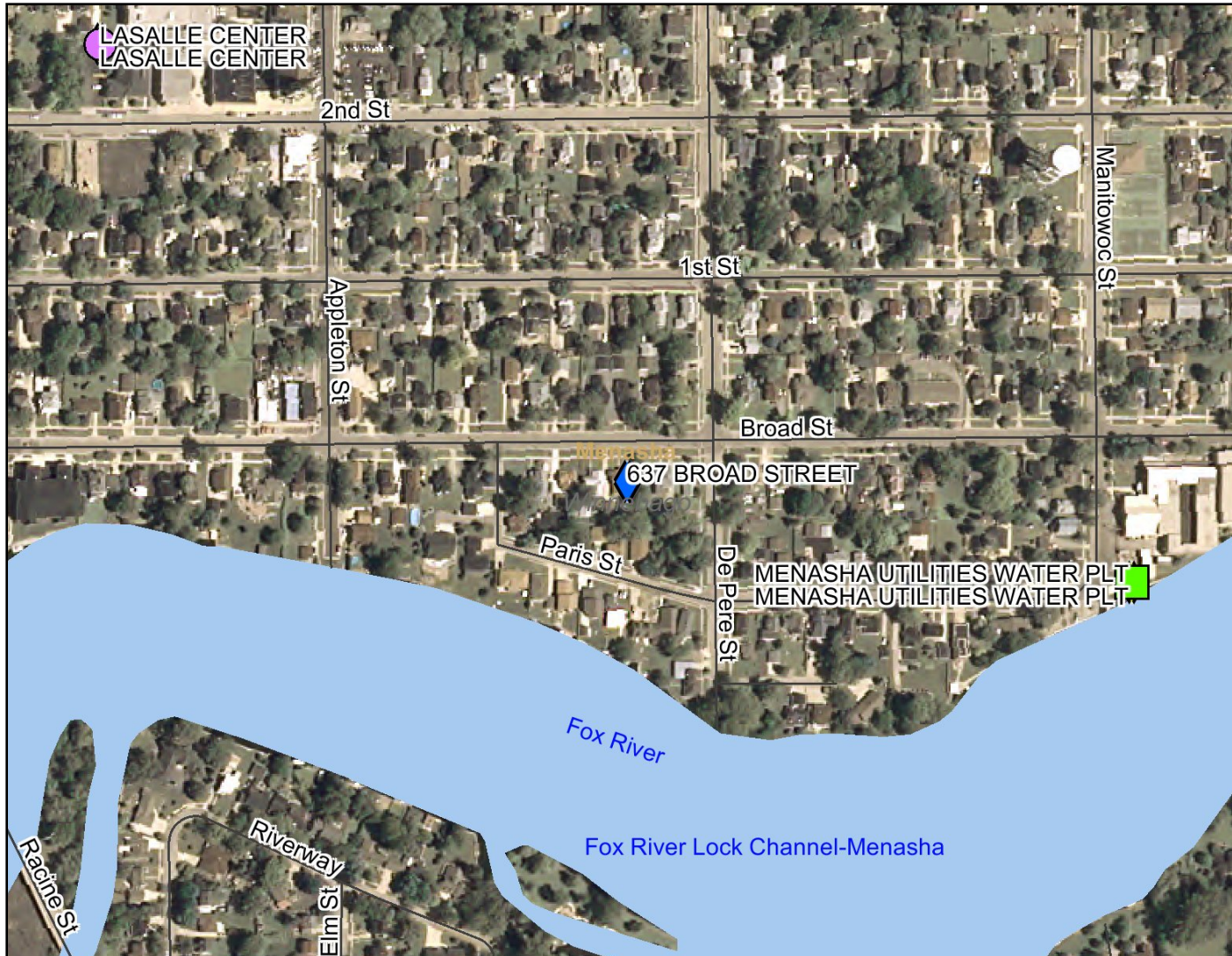
637 Broad Street Site, Menasha, Wisconsin

Project AEG12-14


31 Dec 12

Attachment B 1C  
RR Site Map

Map Created on Apr 01, 2013



**Legend**

-  Drycleaner Environmental Response Fund
-  Green Space Grant
-  Ready for Reuse
-  (SAG) Site Assessment Grant
-  State Funded Response
-  Sustainable Urban Development Zone
-  General Liability Clarification Letter
-  Superfund NPL
-  Voluntary Party Liability Exemption
-  Drycleaner Environmental Response Fund - site boundaries shown
-  Green Space Grant - site boundaries shown
-  Ready for Reuse - site boundaries shown
-  (SAG) Site Assessment Grant - site boundaries shown
-  State Funded Response - site boundaries shown
-  Sustainable Urban Development Zone - site boundaries shown

0 400 800 1200 ft.

Map created on Apr 1, 2013

Note: Not all RR Sites have been geo-located yet.



Scale: 1:4,190

This map is a user generated static output from an Internet mapping site and is for general reference only. Data layers that appear on this map may or may not be accurate, current, or otherwise reliable. THIS MAP IS NOT TO BE USED FOR NAVIGATION.

Attachment B 2A  
Pre-remedial Soil Contamination

Not Included.

There is no soil remaining above RCLs. Arsenic is present in all three borings above the direct contact standard but at a depth below the direct contact zone (0-4').

Attachment B 2B  
Post-remedial Soil Contamination

Not Included.

No remediation conducted or necessary.



Attachment B 2C  
Pre/Post Remaining Soil Contamination

Not Included.

There is no soil remaining above RCLs. Arsenic is present in all three borings above the direct contact standard but at a depth below the direct contact zone (0-4').

Attachment B 3A  
Geologic Cross-Section Figure(s)

Not Included.

Borings too close together for meaningful cross-section.

Attachment B 3B  
Groundwater Isoconcentration Figure(s)

Not Included.

There is only one well.

Attachment B 3C  
Groundwater Flow Direction Figure(s)

Not Included.

There is only one well.

Attachment B 3D  
Monitoring Wells

Not Included.

There is only one well on-site. It has no Unique ID Number. It is known only as MW-1. It is proposed to be abandoned upon closure of the site. It can be located. It will not be transferred. It will not be retained for further sampling. It has not been previously abandoned.

Attachment B 4A  
Vapor Intrusion Map

Not Included.

Vapor intrusion is not a concern.

Attachment B 4B  
Other Media of Concern

Not Included.

There are no other media of concern.

Attachment B 4C  
Other

Not Included.

There are no other relevant maps or figures.



Attachment C  
Documentation of Remedial Action

Not Included.

No remedial actions were conducted.

## Attachment D Maintenance Plan

Not Included.

An impervious surface may not be necessary at the site. The remaining contaminated soil is below the water table and therefore already exposed to subsurface water. Infiltrating surface water will not pass through the contaminated soil before reaching the groundwater and therefore should not significantly affect contaminant concentrations in the groundwater except to possibly lower them. Contaminant concentrations in the groundwater are shown to be below the ES and historically dropping.

Attachment E  
Monitoring Well Information



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Wisconsin

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**TEST BORING LOG**

**Project:** ENVIRONMENTAL DRILLING

**Location:** MENASHA, WISCONSIN

**RVT File No:** N12-291

**Page:** 1 of 1

**Surface Elev:** Not Det'n

**Scale:** 1" = 4'

**Boring No:** 1-12

**GENERAL NOTES**

**Drilling Method:**  
HSA = Hollow Stem Auger  
FA = Flight Auger  
DM = Drilling Mud  
\_X = AX, BX, or NX Coring

**Sampling Method:**  
SS = Split Spoon  
3T = 3" Shelby Tube  
F = Flight Auger Sample  
B = Bag Sample  
P = Test Pit Sample  
CR = Core Recovery  
NSR = No Sample Recovery  
MH = Manual SPT Hammer  
AH = Auto SPT Hammer

**Water Level Symbol:**  
WLD = Water Level During Drilling  
WLA = Water Level After Drilling  
WL = Water Level At 24 Hours  
WL\_\_ = Water Level At \_\_ Hours

**Laboratory Test Symbols:**  
LL/PL = Liquid Limit/Plastic Limit  
P200 = Percent Passing #200 Sieve  
MA\* = Mechanical Analysis  
Qu = Unconfined Compressive Str  
Pq = Hand Penetrometer Reading  
DD = Dry Density  
W = Moisture Content (by Weight)  
RQD = Rock Quality Designation  
\* = See attached graph

**DRILLING NOTES**

Started: 9/18/12

Completed: 9/18/12

Driller: GABR/HDS Method: 4 1/4" HSA 0' to 18.4' (AH)

Depth (ft)	Blow Counts			Field Classification and Remarks Note: [ ] Indicates Possible Geologic Origin	Water Level Information	Sample		Laboratory Tests						
	0/6	6/12	Total (N)			No.	Type	W (%)	DD (pcf)	LL PL	Qu (psf)	Other		
18"	2	3		SANDY ORGANIC CLAY, dark greyish brown, moist, medium (OL)										
	4	5	7	[TOPSOIL]		1	SS							
	4	5		FILL, mostly Lean Clay, with Sand and traces of Organics, reddish brown, light grey, and greyish brown, moist, rather stiff to stiff (CL)										
	5	6	10	[FILL]		2	SS					Pq (tsf) = 4.5+		
5	7	11												
6	12	19	23	FILL, mostly Sandy Lean Clay, brown, greyish brown, light grey, and yellowish brown, moist, stiff (CL)										
	7	12		[FILL]		3	SS					Pq (tsf) = 4.0		
	13		25	LEAN CLAY, with Sand and Gravel, brown and light grey, moist, stiff to hard (CL)										
		11		[GLACIAL TILL]		4	SS					Pq (tsf) = 4.5+		
	12	13	25		WLA	5	SS					Pq (tsf) = 4.5+		
	9	19												
	24		43											
	50 3"		50 3"											
16	12	13		SILTY SAND, greyish brown and grey, moist to water bearing, very dense (SM)	WLD									
	20		33	[OUTWASH]		6	SS					Pq (tsf) = 4.5+		
18.4				End of Boring at 18.4'		7	SS							
						8	SS							



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Madison  
Wisconsin

Geotechnical, Environmental, and Construction Consulting

### TEST BORING LOG

**Project:** ENVIRONMENTAL DRILLING

**Location:** MENASHA, WISCONSIN

**RVT File No:** N12-291

**Page:** 1 of 1

**Surface Elev:** Not Det'n

**Scale:** 1" = 4'

**Boring No:** 2-12

#### GENERAL NOTES

**Drilling Method:**  
HSA = Hollow Stem Auger  
FA = Flight Auger  
DM = Drilling Mud  
\_X = AX, BX, or NX Coring

**Sampling Method:**  
SS = Split Spoon  
3T = 3" Shelby Tube  
F = Flight Auger Sample  
B = Bag Sample  
P = Test Pit Sample  
CR = Core Recovery  
NSR = No Sample Recovery  
MH = Manual SPT Hammer  
AH = Auto SPT Hammer

**Water Level Symbol:**  
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WLA = Water Level After Drilling  
WL = Water Level At 24 Hours  
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**Laboratory Test Symbols:**  
LL/PL = Liquid Limit/Plastic Limit  
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MA\* = Mechanical Analysis  
Qu = Unconfined Compressive Str  
Pq = Hand Penetrometer Reading  
DD = Dry Density  
W = Moisture Content (by Weight)  
RQD = Rock Quality Designation  
\* = See attached graph

#### DRILLING NOTES

Started: 9/18/12

Completed: 9/18/12

Driller: GABR/HDS Method: 4 1/4" HSA 0' to 18.4' (AH)

Depth (ft)	Blow Counts			Field Classification and Remarks Note: [ ] Indicates Possible Geologic Origin	Water Level Information	Sample		Laboratory Tests								
	0/6	6/12	Total (N)			No.	Type	W (%)	DD (pcf)	LL PL	Qu (psf)	Other				
8"	4	5		SANDY ORGANIC CLAY, dark greyish brown, moist, rather stiff (OL)												
2	6	7	11	[TOPSOIL]		1	SS									
	4	6		FILL, mostly Lean Clay, with Sand and traces of Organics, brown and greyish brown, moist, rather stiff (CL)												
	7	8	13	[FILL]		2	SS							Pq (tsf) = 4.5+		
5	8	16		LEAN CLAY, with Sand, brown and greyish brown, moist, rather stiff to very stiff (CL)												
6	24	12	40	[POSSIBLE FILL]		3	SS							Pq (tsf) = 4.5+		
	7	10		SILTY SAND, with Gravel, yellowish brown and light grey, moist, very dense (SM)												
	17		27	[POSSIBLE FILL]		4	SS									
		10		LEAN CLAY, with Sand and Gravel, brown, light grey, and grey, moist, stiff to hard (CL)												
	14	20	34	[GLACIAL TILL]		5	SS							Pq (tsf) = 4.5+		
	7	17														
	19		36			6	SS							Pq (tsf) = 4.5		
	50/3"		50/3"			7	SS							Pq (tsf) = 4.5		
16		50/5"	50/5"	SILTY GRAVEL, with Sand, light grey and grey, moist to water bearing, extremely dense (GM)	WLD	8	SS									
				[GLACIAL TILL]												
18.4				End of Boring at 18.4'												



Appleton  
Green Bay  
Madison  
Wisconsin

Geotechnical, Environmental, and Construction Consulting

# TEST BORING LOG

**Project:** ENVIRONMENTAL DRILLING

**Location:** MENASHA, WISCONSIN

**RVT File No:** N12-291

**Page:** 1 of 1

**Surface Elev:** Not Det'n

**Scale:** 1" = 4'

**Boring No:** 3-12

### GENERAL NOTES

Drilling Method:  
HSA = Hollow Stem Auger  
FA = Flight Auger  
DM = Drilling Mud  
\_X = AX, BX, or NX Coring

Sampling Method:  
SS = Split Spoon  
3T = 3" Shelby Tube  
F = Flight Auger Sample  
B = Bag Sample  
P = Test Pit Sample  
CR = Core Recovery  
NSR = No Sample Recovery  
MH = Manual SPT Hammer  
AH = Auto SPT Hammer

Water Level Symbol:  
WLD = Water Level During Drilling  
WLA = Water Level After Drilling  
WL = Water Level At 24 Hours  
WL\_\_ = Water Level At \_\_ Hours

Laboratory Test Symbols:  
LL/PL = Liquid Limit/Plastic Limit  
P200 = Percent Passing #200 Sieve  
MA\* = Mechanical Analysis  
Qu = Unconfined Compressive Str  
Pq = Hand Penetrometer Reading  
DD = Dry Density  
W = Moisture Content (by Weight)  
RQD = Rock Quality Designation  
\* = See attached graph

### DRILLING NOTES

Started: 9/19/12

Completed: 9/19/12

Driller: GABR/HDS Method: 4 1/4" HSA 0' to 18.7' (AH)

Depth (ft)	Blow Counts			Field Classification and Remarks Note: [ ] Indicates Possible Geologic Origin	Water Level Information	Sample		Laboratory Tests						
	0/6	6/12	Total (N)			No.	Type	W (%)	DD (pcf)	LL PL	Qu (psf)	Other		
7"	4	5		ORGANIC CLAY, with Sand, dark greyish brown, moist, rather stiff (OL) [TOPSOIL]		1	SS							
	5	7	10											
	6	8		FILL, mostly Sandy Lean Clay, with traces of Organics, brown and grey, moist, rather stiff (CL) [FILL]		2	SS							
4	8	9	16											
	15	50	50	FILL, mostly Silty Sand, with Gravel, light grey and light yellowish brown, moist, extremely dense (SM) [FILL]		3	SS					Pq (tsf) = 4.5+		
5	6"	6"	6"											
	14	50	50	FILL, mostly Lean Clay, with Sand and Gravel, brown, light grey, and greyish brown, moist, hard (CL) [FILL]		4	SS							
	10"	10"	10"											
8 1/2	8	9	18	LEAN CLAY, with Sand and a little Gravel, brown and grey, moist, rather stiff (CL) [GLACIAL TILL]		5	SS					Pq (tsf) = 4.0		
	9	9												
11	14	50	50	SILTY SAND, with Gravel and Cobbles, greyish brown and grey, moist to water bearing, extremely dense (SM) [GLACIAL TILL]		6	SS							
	11"	11"	11"											
	15													
	50	50	50		WLA	7	SS							
	5"	5"	5"											
	50	50	50		WLD	8	SS							
	5"	5"	5"											
18.7	50	50	50	End of Boring at 18.7'		9	SS							
	8"	8"	8"											

Facility/Project Name <b>637 BROAD ST.</b>	Local Grid Location of Well <b>10.5</b> ft. <input type="checkbox"/> N. <input checked="" type="checkbox"/> S. <b>10.5</b> ft. <input type="checkbox"/> E. <input checked="" type="checkbox"/> W.	Well Name <b>MW-1</b>
Facility License, Permit or Monitoring No.	Local Grid Origin (estimated: <input type="checkbox"/> ) or Well Location <input type="checkbox"/> Lat. _____ "Long. _____ " or	Wis. Unique Well No. <b>DNR Well ID No.</b>
Facility ID	St. Plane _____ ft. N. _____ ft. E. S/C/N	Date Well Installed <b>09/19/2012</b> m m d d y y y y
Type of Well Well Code <b>11, MW</b>	Section Location of Waste/Source <b>SW 1/4 of SW 1/4 of Sec. 14, T. 20 N, R. 17</b> <input type="checkbox"/> E <input checked="" type="checkbox"/> W	Well Installed By: Name (first, last) and Firm <b>CHRIS EWALD A&amp;E GEOSCIENCES, LLC</b>
Distance from Waste/Source <b>15</b> ft.	Enf. Stds. Apply <input checked="" type="checkbox"/>	Location of Well Relative to Waste/Source u <input type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input checked="" type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known
		Gov. Lot Number

\* A. Protective pipe, top elevation \* **102.29** ft. MSL

B. Well casing, top elevation \* **102.12** ft. MSL

C. Land surface elevation \* **100.00** ft. MSL

D. Surface seal, bottom \_\_\_\_\_ ft. MSL or \_\_\_\_\_ ft.

12. USCS classification of soil near screen:  
GP  GM  GC  GW  SW  SP   
SM  SC  ML  MH  CL  CH   
Bedrock

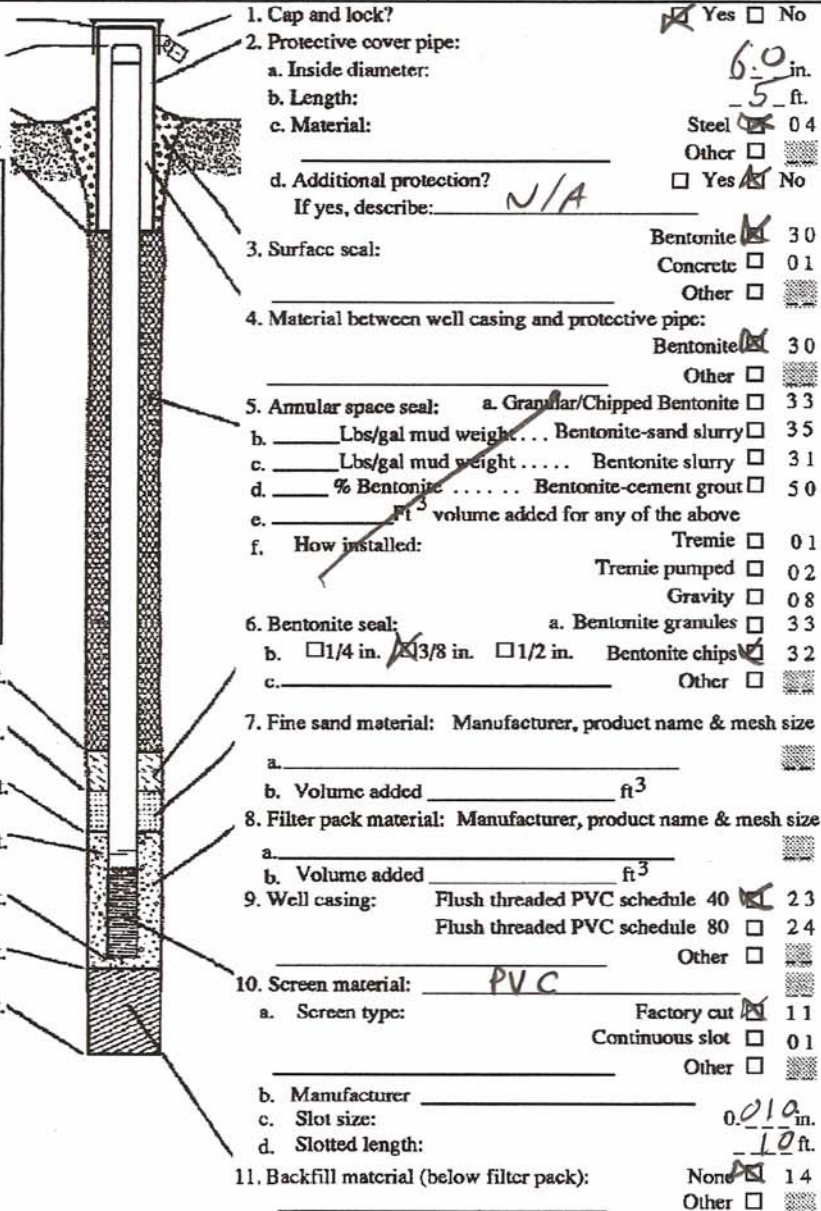
13. Sieve analysis performed?  Yes  No

14. Drilling method used: Rotary  50  
Hollow Stem Auger  41  
Other

15. Drilling fluid used: Water  02 Air  01  
Drilling Mud  03 None  99

16. Drilling additives used?  Yes  No  
Describe **N/A**

17. Source of water (attach analysis, if required):  
**N/A**



E. Bentonite seal, top \* **100** ft. MSL or \_\_\_\_\_ ft.

F. Fine sand, top **95.98** ft. MSL or \_\_\_\_\_ ft.

G. Filter pack, top \* **93.98** ft. MSL or \_\_\_\_\_ ft.

H. Screen joint, top \* **91.98** ft. MSL or \_\_\_\_\_ ft.

I. Well bottom \* **81.68** ft. MSL or \_\_\_\_\_ ft.

J. Filter pack, bottom \* **81.67** ft. MSL or \_\_\_\_\_ ft.

K. Borehole, bottom \* **81.67** ft. MSL or \_\_\_\_\_ ft.

L. Borehole, diameter **8.0** in.

M. O.D. well casing **2.4** in.

N. I.D. well casing **2.0** in.

1. Cap and lock?  Yes  No

2. Protective cover pipe:  
a. Inside diameter: **6.0** in.  
b. Length: **5** ft.  
c. Material: Steel  04  
Other

d. Additional protection?  Yes  No  
If yes, describe: **N/A**

3. Surface seal: Bentonite  30  
Concrete  01  
Other

4. Material between well casing and protective pipe: Bentonite  30  
Other

5. Annular space seal:  
a. Granular/Chipped Bentonite  33  
b. \_\_\_\_\_ Lbs/gal mud weight . . . . . Bentonite-sand slurry  35  
c. \_\_\_\_\_ Lbs/gal mud weight . . . . . Bentonite slurry  31  
d. \_\_\_\_\_ % Bentonite . . . . . Bentonite-cement grout  50  
e. \_\_\_\_\_ ft<sup>3</sup> volume added for any of the above  
f. How installed: Tremie  01  
Tremie pumped  02  
Gravity  08

6. Bentonite seal:  
a. Bentonite granules  33  
b.  1/4 in.  3/8 in.  1/2 in. Bentonite chips  32  
c. \_\_\_\_\_ Other

7. Fine sand material: Manufacturer, product name & mesh size  
a. \_\_\_\_\_  
b. Volume added \_\_\_\_\_ ft<sup>3</sup>

8. Filter pack material: Manufacturer, product name & mesh size  
a. \_\_\_\_\_  
b. Volume added \_\_\_\_\_ ft<sup>3</sup>

9. Well casing: Flush threaded PVC schedule 40  23  
Flush threaded PVC schedule 80  24  
Other

10. Screen material: **PVC**  
a. Screen type: Factory cut  11  
Continuous slot  01  
Other

b. Manufacturer \_\_\_\_\_  
c. Slot size: **0.010** in.  
d. Slotted length: **1.0** ft.

11. Backfill material (below filter pack): None  14  
Other

I hereby certify that the information on this form is true and correct to the best of my knowledge.  
Signature **Christopher S. Enck** Firm **A&E GEOSCIENCES, LLC.**

Please complete both Forms 4400-113A and 4400-113B and return them to the appropriate DNR office and bureau. Completion of these reports is required by chs. 160, 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291, 292, 293, 295, and 299, Wis. Stats., failure to file these forms may result in a forfeiture of between \$10 and \$25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on these forms is not intended to be used for any other purpose. NOTE: See the instructions for more information, including where the completed forms should be sent.

\* ALL ELEV USE ARBITRARY GROUND SURFACE ELEV. OF 100.00'

Route to: Watershed/Wastewater  Waste Management

Remediation/Redevelopment  Other

Facility/Project Name 637 BROAD ST.	County Name WINNEBAGO	Well Name MW-1
Facility License, Permit or Monitoring Number	County Code 71	Wis. Unique Well Number _____
		DNR Well ID Number _____

1. Can this well be purged dry?  Yes  No

2. Well development method

- surged with bailer and bailed  41
- surged with bailer and pumped  61
- surged with block and bailed  42
- surged with block and pumped  62
- surged with block, bailed and pumped  70
- compressed air  20
- bailed only  10
- pumped only  51
- pumped slowly  50
- Other  \_\_\_\_\_

3. Time spent developing well 80 min.

4. Depth of well (from top of well casing) 20.4 ft.

5. Inside diameter of well 2.00 in.

6. Volume of water in filter pack and well casing 55 gal.

7. Volume of water removed from well 155 gal.

8. Volume of water added (if any) 00 gal.

9. Source of water added N/A

10. Analysis performed on water added?  Yes  No  
(If yes, attach results) N/A

	Before Development	After Development
11. Depth to Water (from top of well casing)	a. <u>10.13</u> ft.	<u>14.24</u> ft.
Date	b. <u>09,25,2012</u>	<u>09,25,2012</u>
Time	c. <u>10:25</u> <input checked="" type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<u>11:45</u> <input checked="" type="checkbox"/> a.m. <input type="checkbox"/> p.m.
12. Sediment in well bottom	<u>14.0</u> inches	<u>0.0</u> inches
13. Water clarity	Clear <input type="checkbox"/> 10 Turbid <input checked="" type="checkbox"/> 15 (Describe) <u>NEARLY SILT</u>	Clear <input type="checkbox"/> 20 Turbid <input checked="" type="checkbox"/> 25 (Describe) <u>CLOUDY BUT NO SEDIMENT</u>

Fill in if drilling fluids were used and well is at solid waste facility:

14. Total suspended solids N/A mg/l N/A mg/l

15. COD N/A mg/l N/A mg/l

16. Well developed by: Name (first, last) and Firm

First Name: CARIS Last Name: EWALD

Firm: A&E GEOSCIENCES, LLC

17. Additional comments on development:

2.2' TO TOP OF PROTOP. 2.21  
19.27' TO BOTTOM -0.09  
20.44 TO BOTTOM 2.12

GS. TO TOP OF PVC 2.12'  
20.44  
- 19.27  
1.17

Name and Address of Facility Contact/Owner/Responsible Party

First Name: ROBERT Last Name: BURKE

Facility/Firm: PROPERTY OWNER

Street: 637 BROAD STREET

City/State/Zip: MENASHA, WI

I hereby certify that the above information is true and correct to the best of my knowledge.

Signature: Christopher S Ewald

Print Name: CHRISTOPHER S. EWALD

Firm: A&E GEOSCIENCES, LLC

NOTE: See instructions for more information including a list of county codes and well type codes.



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<input type="checkbox"/> <b>Verification Only of Fill and Seal</b>	<b>Route to:</b>		
	<input type="checkbox"/> Drinking Water	<input type="checkbox"/> Watershed/Wastewater	<input checked="" type="checkbox"/> Remediation/Redevelopment
	<input type="checkbox"/> Waste Management	<input type="checkbox"/> Other: _____	

<b>1. Well Location Information</b>	<b>2. Facility / Owner Information</b>
County <u>WINNEBAGO</u>	Facility Name <u>637 BROAD ST.</u>
WI Unique Well # of Removed Well _____	Facility ID (FID or PWS) _____
Hicap # _____	License/Permit/Monitoring # _____

Latitude / Longitude (Degrees and Minutes) ____ ° ____ ' N ____ ° ____ ' W	Method Code (see instructions) _____
--	---

1/4 SW 1/4 SW or Gov't Lot #	Section <u>14</u>	Township <u>20 N</u>	Range <u>17</u>	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner <u>ROBERT BURKE</u>
Well Street Address <u>637 BROAD ST</u>					Present Well Owner <u>ROBERT BURKE</u>

Well City, Village or Town <u>CITY OF MENASHA</u>	Well ZIP Code <u>54952</u>	Mailing Address of Present Owner <u>1017 N. BRIARCLIFF DRIVE</u>	
Subdivision Name _____	Lot # _____	City of Present Owner <u>APPLETON</u>	State ZIP Code <u>WI 54915</u>

Reason For Removal From Service <u>PROJECT CLOSURE</u>	WI Unique Well # of Replacement Well <u>N/A</u>
---	--

<b>3. Well / Drillhole / Borehole Information</b>	<b>4. Pump, Liner, Screen, Casing &amp; Sealing Material</b>
<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input checked="" type="checkbox"/> Borehole / Drillhole	Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Screen removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A Did sealing material rise to surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Did material settle after 24 hours? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A If bentonite chips were used, were they hydrated with water from a known safe source? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Original Construction Date (mm/dd/yyyy) <u>09/19/2012</u>	Required Method of Placing Sealing Material
If a Well Construction Report is available, please attach. _____	<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input checked="" type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____
Construction Type:	Sealing Materials
<input checked="" type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____	<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Clay-Sand Slurry (11 lb./gal. wt.) <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite-Sand Slurry " " <input type="checkbox"/> Concrete <input type="checkbox"/> Bentonite Chips
Formation Type:	For Monitoring Wells and Monitoring Well Boreholes Only:
<input checked="" type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	<input checked="" type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout <input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry
Total Well Depth From Ground Surface (ft.) <u>18.7</u>	Casing Diameter (in.) <u>N/A</u>
Lower Drillhole Diameter (in.) <u>8.0</u>	Casing Depth (ft.) <u>N/A</u>
Was well annular space grouted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unknown	Depth to Water (feet) <u>15.5 AT TIME OF DRILL</u>
If yes, to what depth (feet)? <u>N/A BOREHOLE ONLY</u>	

<b>5. Material Used To Fill Well / Drillhole</b>	<b>6. Comments</b>								
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>From (ft.)</th> <th>To (ft.)</th> <th>No. Yards, Sacks Sealant or Volume (circle one)</th> <th>Mix Ratio or Mud Weight</th> </tr> </thead> <tbody> <tr> <td>Surface</td> <td><u>18.7</u></td> <td><u>2 BAGS</u></td> <td><u>N/A</u></td> </tr> </tbody> </table>	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight	Surface	<u>18.7</u>	<u>2 BAGS</u>	<u>N/A</u>	<u>NO UNIQUE NO. GIVEN, LOCAL NAME IS SB-1 (RVT # 3-12)</u>
From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight						
Surface	<u>18.7</u>	<u>2 BAGS</u>	<u>N/A</u>						

<b>7. Supervision of Work</b>	<b>DNR Use Only</b>
Name of Person or Firm Doing Filling & Sealing <u>A&amp;E GEOSCIENCES LLC</u>	Date Received _____
License # <u>PG: 6749</u>	Noted By _____
Date of Filling & Sealing (mm/dd/yyyy) <u>09/19/2012</u>	Comments _____
Street or Route <u>2139 HICKORY LANE</u>	Telephone Number <u>(920) 851-7380</u>
City <u>APPLETON</u>	Signature of Person Doing Work <u>Christopher S. Erard</u>
State <u>WI</u>	Date Signed <u>2 JUN 13</u>
ZIP Code <u>54915</u>	

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and ch. NR 141, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

**Verification Only of Fill and Seal**

Route to:

Drinking Water       Watershed/Wastewater       Remediation/Redevelopment

Waste Management       Other: \_\_\_\_\_

<b>1. Well Location Information</b>				<b>2. Facility / Owner Information</b>			
County <b>WINNEBAGO</b>		WI Unique Well # of Removed Well _____		Hicap # _____		Facility Name <b>637 BROAD ST.</b>	
Latitude / Longitude (Degrees and Minutes) ____ ° ____ ' N ____ ° ____ ' W		Method Code (see instructions) _____		Facility ID (FID or PWS) _____		License/Permit/Monitoring # _____	
1/4 SW 1/4 SW or Gov't Lot #		Section <b>14</b>	Township <b>20 N</b>	Range <b>17</b>	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner <b>ROBERT BURKE</b>	
Well Street Address <b>637 BROAD ST</b>		Well City, Village or Town <b>CITY OF MENASHA</b>		Well ZIP Code <b>54952</b>		Present Well Owner <b>ROBERT BURKE</b>	
Subdivision Name _____		Lot # _____		Mailing Address of Present Owner <b>1017 N. BRIARCLIFF DRIVE</b>		City of Present Owner <b>APPLETON</b>	
State <b>WI</b>		ZIP Code <b>54915</b>					

Reason For Removal From Service: **PROJECT CLOSURE**      WI Unique Well # of Replacement Well: **N/A**

**3. Well / Drillhole / Borehole Information**

Monitoring Well      Original Construction Date (mm/dd/yyyy): **09/19/2012**

Water Well

Borehole / Drillhole

If a Well Construction Report is available, please attach.

Construction Type:

Drilled       Driven (Sandpoint)       Dug

Other (specify): \_\_\_\_\_

**4. Pump, Liner, Screen, Casing & Sealing Material**

Pump and piping removed?       Yes       No       N/A

Liner(s) removed?       Yes       No       N/A

Screen removed?       Yes       No       N/A

Casing left in place?       Yes       No       N/A

Was casing cut off below surface?       Yes       No       N/A

Did sealing material rise to surface?       Yes       No       N/A

Did material settle after 24 hours?       Yes       No       N/A

If yes, was hole retopped?       Yes       No       N/A

If bentonite chips were used, were they hydrated with water from a known safe source?       Yes       No       N/A

Formation Type:

Unconsolidated Formation       Bedrock

Total Well Depth From Ground Surface (ft.): **18.4**      Casing Diameter (in.): **2.0**

Lower Drillhole Diameter (in.): **8.0**      Casing Depth (ft.): **18.3**

Was well annular space grouted?       Yes       No       Unknown

If yes, to what depth (feet)? **N/A**      Depth to Water (feet): **7.4 AVG.**

Required Method of Placing Sealing Material

Conductor Pipe-Gravity       Conductor Pipe-Pumped

Screened & Poured (Bentonite Chips)       Other (Explain): \_\_\_\_\_

Sealing Materials

Neat Cement Grout       Clay-Sand Slurry (11 lb./gal. wt.)

Sand-Cement (Concrete) Grout       Bentonite-Sand Slurry " "

Concrete       Bentonite Chips

For Monitoring Wells and Monitoring Well Boreholes Only:

Bentonite Chips       Bentonite - Cement Grout

Granular Bentonite       Bentonite - Sand Slurry

**5. Material Used To Fill Well / Drillhole**

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface	18.4	1 BAG	N/A

**6. Comments**

**NO UNIQUE NO. GIVEN, LOCAL NAME IS MW-1/SB-2 (RVT#2-12)**

**7. Supervision of Work**

Name of Person or Firm Doing Filling & Sealing <b>A&amp;E GEOSCIENCES LLC</b>	License # <b>PG: 6749</b>	Date of Filling & Sealing (mm/dd/yyyy) <b>05/31/2013</b>	<b>DNR Use Only</b>	
Street or Route <b>2739 HICKORY LANE</b>			Date Received	Noted By
City <b>APPLETON</b>			Telephone Number <b>(920) 851-7380</b>	Comments
State <b>WI</b>	ZIP Code <b>54915</b>	Signature of Person Doing Work <b>Christopher S. Ewald</b>	Date Signed <b>2 JUN 13</b>	

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**Verification Only of Fill and Seal**

**Route to:**

Drinking Water       Watershed/Wastewater       Remediation/Redevelopment

Waste Management       Other: \_\_\_\_\_

<b>1. Well Location Information</b>				<b>2. Facility / Owner Information</b>			
County <b>WINNEBAGO</b>		WI Unique Well # of Removed Well _____		Hicap # _____		Facility Name <b>637 BROAD ST.</b>	
Latitude / Longitude (Degrees and Minutes) ____ ° ____ ' ____ " N ____ ° ____ ' ____ " W				Facility ID (FID or PWS) _____			
Method Code (see instructions) _____				License/Permit/Monitoring # _____			
1/4 SW 1/4 SW or Gov't Lot #		Section <b>14</b>	Township <b>20 N</b>	Range <b>17</b>	<input checked="" type="checkbox"/> E <input type="checkbox"/> W	Original Well Owner <b>ROBERT BURKE</b>	
Well Street Address <b>637 BROAD ST</b>						Present Well Owner <b>ROBERT BURKE</b>	
Well City, Village or Town <b>CITY OF MENASHA</b>				Well ZIP Code <b>54952</b>			
Subdivision Name _____				Lot # _____		Mailing Address of Present Owner <b>1317 N. BRIARCLIFF DRIVE</b>	
City of Present Owner <b>APPLETON</b>				State <b>WI</b>	ZIP Code <b>54915</b>		

Reason For Removal From Service: **PROJECT CLOSURE**      WI Unique Well # of Replacement Well: **N/A**

**3. Well / Drillhole / Borehole Information**

Monitoring Well       Water Well       Borehole / Drillhole

Original Construction Date (mm/dd/yyyy): **09/19/2012**

If a Well Construction Report is available, please attach. \_\_\_\_\_

Construction Type:

Drilled       Driven (Sandpoint)       Dug

Other (specify): \_\_\_\_\_

Formation Type:

Unconsolidated Formation       Bedrock

Total Well Depth From Ground Surface (ft.): **18.7**      Casing Diameter (in.): **N/A**

Lower Drillhole Diameter (in.): **8.0**      Casing Depth (ft.): **N/A**

Was well annular space grouted?       Yes       No       Unknown

If yes, to what depth (feet)? **N/A BOREHOLE ONLY**      Depth to Water (feet) **13.0' AT DRILLING**

**4. Pump, Liner, Screen, Casing & Sealing Material**

Pump and piping removed?       Yes       No       N/A

Liner(s) removed?       Yes       No       N/A

Screen removed?       Yes       No       N/A

Casing left in place?       Yes       No       N/A

Was casing cut off below surface?       Yes       No       N/A

Did sealing material rise to surface?       Yes       No       N/A

Did material settle after 24 hours?       Yes       No       N/A

If yes, was hole retopped?       Yes       No       N/A

If bentonite chips were used, were they hydrated with water from a known safe source?       Yes       No       N/A

Required Method of Placing Sealing Material

Conductor Pipe-Gravity       Conductor Pipe-Pumped

Screened & Poured (Bentonite Chips)       Other (Explain): \_\_\_\_\_

Sealing Materials

Neat Cement Grout       Clay-Sand Slurry (11 lb./gal. wt.)

Sand-Cement (Concrete) Grout       Bentonite-Sand Slurry " "

Concrete       Bentonite Chips

For Monitoring Wells and Monitoring Well Boreholes Only:

Bentonite Chips       Bentonite - Cement Grout

Granular Bentonite       Bentonite - Sand Slurry

**5. Material Used To Fill Well / Drillhole**

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface	18.7	2 BAGS	N/A

**6. Comments**

**NO UNIQUE NO. GIVEN, LOCAL NAME IS SB-3 (RVT # 1-12)**

**7. Supervision of Work**

Name of Person or Firm Doing Filling & Sealing <b>A&amp;E GEOSCIENCES LLC</b>		License # <b>PG: 6749</b>	Date of Filling & Sealing (mm/dd/yyyy) <b>09/19/2012</b>	<b>DNR Use Only</b>	
Street or Route <b>2139 HICKORY LANE</b>		Telephone Number <b>(920) 851-7380</b>		Date Received	Noted By
City <b>APPLETON</b>		State <b>WI</b>	ZIP Code <b>54915</b>	Signature of Person Doing Work <b>Christopher S. Ewald</b>	
				Date Signed <b>2 JUN 13</b>	

Attachment F  
Notifications to Owners of Impacted Properties

Not Included.

No off-site properties were impacted.

Attachment G  
Source Legal Documents

Included:

Deed

Certified Survey Map (if applicable/referenced in deed)

Verification of Zoning

Signed Statement

1570029

REGISTER'S OFFICE  
WINNEBAGO COUNTY, WI  
RECORDED ON

04/20/2011 09:32AM

JULIE PAGEL  
REGISTER OF DEEDS

RECORDING FEE \$30.00  
TRANSFER FEE

# OF PAGES 3

STATE BAR OF WISCONSIN FORM 1 - 2000  
SPECIAL WARRANTY DEED

Document Number

T10-029104

**This Deed**, made between FANNIE MAE A/K/A FEDERAL NATIONAL MORTGAGE ASSOCIATION Grantor, and ROBERT BURKE, A SINGLE MAN Grantee.

Grantor, for a valuable consideration, conveys to Grantee the following described real estate in ~~Calumet~~ County, State of Wisconsin (the "Property") (if more space is needed, please attach addendum):

SEE ATTACHED EXHIBIT "A" \* Winnebago County

Grantor is exempt from all taxation imposed by any state, county, municipality or local taxing authority, except for real property taxes.

Thus, Grantor is exempt from any and all transfer taxes.

See, 12 U.S.C. 1723a (c)(2). *Exempt per 77.25 (2)*

GRANTEE HEREIN SHALL BE PROHIBITED FROM CONVEYING CAPTIONED PROPERTY FOR A SALES PRICE OF GREATER THAN \$40,836 FOR A PERIOD OF

3 MONTH(S)

FROM THE DATE OF THIS DEED. GRANTEE SHALL ALSO BE PROHIBITED FROM ENCUMBERING SUBJECT PROPERTY WITH A SECURITY INTEREST IN THE PRINCIPAL AMOUNT OF GREATER THAN \$40,836 FOR A PERIOD OF

3 MONTH(S)

FROM THE DATE OF THIS DEED. THESE RESTRICTIONS SHALL RUN WITH THE LAND AND ARE NOT PERSONAL TO GRANTEE. THIS RESTRICTION SHALL TERMINATE IMMEDIATELY UPON CONVEYANCE AT ANY FORECLOSURE SALE RELATED TO A MORTGAGE OR DEED OF TRUST.

Together with all appurtenant rights, title and interests.

5-00348-00

Parcel Identification Number (PIN)

This IS / IS NOT homestead property.

Grantor warrants that the title to the Property is good, indefeasible in fee simple and free and clear of encumbrances, arising by, through or under Grantor, except RESTRICTIONS AND EASEMENTS OF RECORD, RECORDED BUILDING AND USE RESTRICTIONS AND COVENANTS, MUNICIPAL AND ZONING ORDINANCES, CURRENT TAXES AND ASSESSMENTS NOT YET DUE.

Dated this 4/18/11.

Recording Area

Name and Return Address

ROBERT BURKE

1017 NORTH BRIARCLIFF DRIVE

APPLETON, WI 54915



FANNIE MAE A/K/A FEDERAL NATIONAL MORTGAGE ASSOCIATION

BY: Jeanette M. Shaffer  
JEANETTE M. SHAFFER, AUTHORIZED REPRESENTATIVE OF NATIONAL REAL ESTATE INFORMATION SERVICES, LP AS POWER OF ATTORNEY

**AUTHENTICATION**

Signature(s) \_\_\_\_\_ authenticated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\* \_\_\_\_\_  
TITLE: MEMBER STATE BAR OF WISCONSIN  
(If not, \_\_\_\_\_ authorized by § 706.06, Wis. Stats.)

THIS INSTRUMENT WAS DRAFTED BY  
FRANCIS P. DEC. ESQ.

(Signatures may be authenticated or acknowledged. Both are not necessary.)

\*Names of persons signing in any capacity must be typed or printed below their signature.

WARRANTY DEED

STATE BAR OF WISCONSIN

FORM No. 1 - 2000

Our File No. ANA201109422

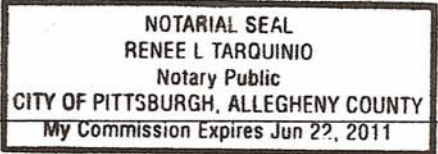
**ACKNOWLEDGMENT**

STATE OF ~~WISCONSIN~~ Pennsylvania )  
\_\_\_\_\_ County of Allegheny ) ss.

Personally came before me this 4/18/11, the above named Jeanette M. Shaffer, authorized representative of National Real Estate Information Services, LP as Power of Attorney FOR FANNIE MAE A/K/A FEDERAL NATIONAL MORTGAGE ASSOCIATION a CORPORATION, GRANTOR(S) to me known to be the person s who executed the foregoing instrument and acknowledged the same.

Renee L. Tarquinio

\* \_\_\_\_\_  
Notary Public, State of Wisconsin  
My Commission is permanent. (If not, state expiration date: 6/22/11)





**EXHIBIT A**

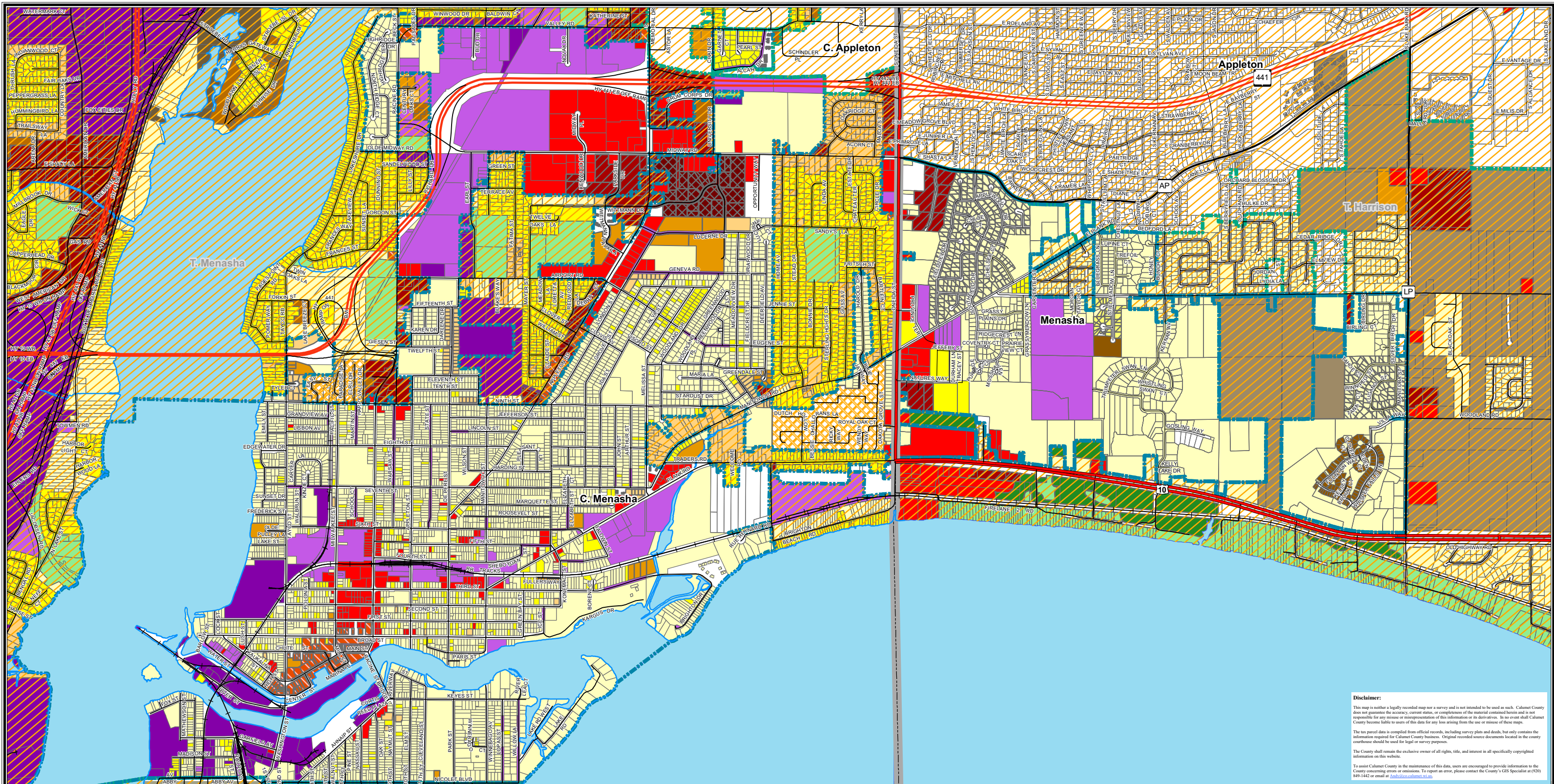
**LEGAL DESCRIPTION**

THE TRACT OF LAND IN WINNEBAGO COUNTY, WISCONSIN AS DESCRIBED AS FOLLOWS:

LOT 4 AND THE WEST 1/2 OF LOT 3 OF BLOCK 1 IN REPLAT OF BLOCK 21 AND LOTS 7, 8, 9, 10, 11, 12, 13 AND 14, BLOCK 20,  
IN THE CITY OF MENASHA, WINNEBAGO COUNTY, WISCONSIN.

TAX MAP OR PARCEL ID NO.: 5-00348-00

PROPERTY COMMONLY KNOWN AS: 637 BROAD STREET, MENASHA, WI 54952



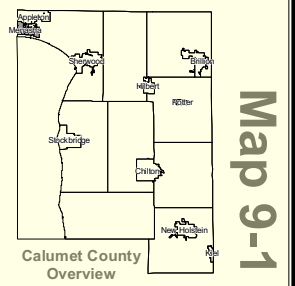
**Disclaimer:**  
 This map is neither a legally recorded map nor a survey and is not intended to be used as such. Calumet County does not guarantee the accuracy, current status, or completeness of the material contained herein and is not responsible for any misuse or misrepresentation of this information or its derivatives. In no event shall Calumet County become liable to users of this data for any loss arising from the use or misuse of these maps.  
 The tax parcel data is compiled from official records, including survey plans and deeds, but only contains the information required for Calumet County business. Original recorded source documents located in the county courthouse should be used for legal or survey purposes.  
 The County shall remain the exclusive owner of all rights, title, and interest in all specifically copyrighted information on this website.  
 To assist Calumet County in the maintenance of this data, users are encouraged to provide information to the County concerning errors or omissions. To report an error, please contact the County's GIS Specialist at (920) 849-1442 or email at [gis@calumetcounty.org](mailto:gis@calumetcounty.org).

# Existing Land Use and Zoning Regulations

## City of Menasha, Calumet & Winnebago Counties

Map date: 2006  
 Calumet County LIO  
 206 Court St  
 Chilton, WI 53014  
 920-849-1442  
 1 inch equals 1,968 feet

Railroad	Lakes	<b>Town of Harrison Zoning</b>	Conservancy (CON)	<b>Town of Menasha Zoning</b>	Heavy Industrial (M-2)	<b>City of Menasha Zoning</b>	Single-Family Residence (R-1)
Federal Highways	Parcel Boundaries	Exclusive Ag (A-1)	Industrial (I)	Agri-Business (A-1)	Mobile Home (MH-1)	General Commercial (C-1)	Single Family Low Density Residence (R-1A)
State Highways	City of Menasha Boundary	Transitional Ag (A-2)	Residential (R-1)	General Farming (A-2)	Institutional and Recreational Park (P-1)	Central Commercial (C-2)	Two-Family Residence (R-2)
County Highways	Other Municipal Boundaries	General Ag (A-3)	Residential (R-2)	Local Service (B-1)	Rural Residential (R-1)	Business and Office (C-3)	Multi-Family, Zero Lot Line Residence (R-2A)
Local Roads	County Line	Local and Neighborhood Commercial (C-1)	Multi-Family Residential (R-3)	Community Business (B-2)	Suburban Residential (R-2)	Business Park (C-4)	Multi-Family, Medium Density Residence (R-3)
City Streets		Community and Area Wide Commercial (C-2)	Residential Planned Development (R-4)	General Business (B-3)	Two Family Residential (R-3)	Heavy Industrial (I-1)	Multi-Family, High Density Residence (R-4)
Rivers		Commercial/Light Industrial (C-3)	Recreational (REC)	Business Park (B-4)	Multiple Family Residential (R-4)	General Industrial (I-2)	Planned Unit Development (PUD)
				Planned Commercial Business (B-5)	Planned Residential (R-5)	Mobile Home (MH)	
				Light Industrial (M-1)			



Map 9-1

# 637 BROAD STREET PROPERTY

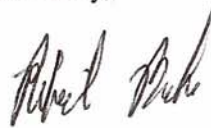
March 28, 2013

Statement to the Wisconsin Department of Natural Resources  
Regarding the GIS Registry for the 637 Broad Street site  
WDNR BRRTS # 02-71-384947

Dear Sir or Madam:

The attached GIS Registry Packet is for the property as described in the attached Warranty Deed, Document Number 110-029106, of the Southwest Quarter of the Southwest Quarter of Section 14, Township 20 North, Range 17 East, City of Menasha, Winnebago County, Wisconsin. It is also known as 637 Broad Street and Parcel Number 750034800. It is for the 637 Broad Street site. It is my belief that the legal descriptions attached to this statement are complete and accurate.

Sincerely,



Mr. Robert Burke  
Property Owner