

Route To: Watershed/Wastewater ☐ Waste Management ☐
Remediation/Revelpment ☐ Other ☐

Page 1 of 1

Facility/Project Name <u>Ironwood MGP Site</u>		License/Permit/Monitoring Number <u>WMW-1</u>	
Boring Drilled By: Name of crew chief (first, last) and Firm First Name: <u>MONR</u> Last Name: <u></u>		Date Drilling Started <u>10/20/2010</u> m m d d y y y y	Date Drilling Completed <u>10/20/2010</u> m m d d y y y y
Firm: <u>MONR</u>		Drilling Method <u>Geoprobe</u>	
WI Unique Well No.	DNR Well ID No.	Well Name <u>MW-1</u>	Final Static Water Level <u>6.1</u> Feet MSL
		Surface Elevation Feet MSL	Borehole Diameter <u>2.0</u> inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/>		Local Grid Location	
State Plane <u>N</u> , <u>E</u>		Lat <u>0</u> ' <u>"</u>	<input type="checkbox"/> N <input type="checkbox"/> E
<u>1/4</u> of <u>1/4</u> of Section <u></u> , T <u></u> N, R <u></u>		Long <u>0</u> ' <u>"</u>	Feet <input type="checkbox"/> S <input type="checkbox"/> W
Facility ID	County <u>Iron</u>	County Code	Civil Town/City/ or Village <u>Hurley</u>

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth in Feet (Below ground surface)	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1	4' / 24"		1	Brown silty sand & gravel	Gr				0.5	Dry				No data/seen
			2	Dark brown fine to medium grained sand & gravel little clay										
			3											
			4											
2	4' / 36"		5					1.0	Moist					No data/seen Sample SS-4 4-6 lbs. 0354
			6											
			7											
			8											
3	4' / 48"		9					0.7	Wet					No data/seen
			10											
			11	Bedrock 11.1'										

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

Signature [Signature] Firm MONR

This form is authorized by Chapters 281, 283, 289, 291, 292, 293, 295, and 299, Wis. Stats. Completion of this form is mandatory. Failure to file this form may result in 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 this form is not intended to be used for any other purpose. NOTE: See instructions for more information, including where the completed form should be sent.

Route to: Watershed/Wastewater ☐ Waste Management ☐
Remediation/Redevelopment ☐ Other ☐

MONITORING WELL CONSTRUCTION
Form 4400-113A Rev. 7-98

Facility/Project Name SI @ Hurley MGP		Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> E. ft. <input type="checkbox"/> S. <input type="checkbox"/> W.		Well Name WMW-1	
Facility License, Permit or Monitoring No.		Local Grid Origin (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/> Lat. 46° 26' 57.9" Long. 90° 10' 42.1" or		Wis. Unique Well No. DNR Well ID No.	
Facility ID		St. Plane Silur- ft. N. Street- ft. E. S/CN		Date Well Installed 10/20/2010 m m d d y y y y	
Type of Well Well Code Temp		Section Location of Waste/Source 1/4 of 1/4 of Sec. T. N. R. <input type="checkbox"/> E. <input type="checkbox"/> W.		Well Installed By: Name (first, last) and Firm MDNRE & WDNR	
Distance from Waste/Source ft. Apply <input type="checkbox"/>		Location of Well Relative to Waste/Source u <input checked="" type="checkbox"/> Upgradient s <input type="checkbox"/> Sidegradient d <input type="checkbox"/> Downgradient n <input type="checkbox"/> Not Known		Gov. Lot Number	

A. Protective pipe, top elevation _____ ft. MSL		1. Cap and lock? <input type="checkbox"/> Yes <input type="checkbox"/> No	
B. Well casing, top elevation _____ ft. MSL		2. Protective cover pipe: a. Inside diameter: _____ in. b. Length: _____ ft. c. Material: Steel <input type="checkbox"/> 04 Other <input type="checkbox"/>	
C. Land surface elevation _____ ft. MSL		d. Additional protection? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe: _____	
D. Surface seal, bottom _____ ft. MSL or _____ ft.		3. Surface seal: Bentonite <input type="checkbox"/> 30 Concrete <input type="checkbox"/> 01 Other <input type="checkbox"/>	
12. USCS classification of soil near screen: GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/> SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/>		4. Material between well casing and protective pipe: Bentonite <input type="checkbox"/> 30 Other <input type="checkbox"/>	
13. Sieve analysis performed? <input type="checkbox"/> Yes <input type="checkbox"/> No		5. Annular space seal: a. Granular/Chipped Bentonite <input type="checkbox"/> 33 b. _____ Lbs/gal mud weight ... Bentonite-sand slurry <input type="checkbox"/> 35 c. _____ Lbs/gal mud weight ... Bentonite slurry <input type="checkbox"/> 31 d. _____ % Bentonite ... Bentonite-cement grout <input type="checkbox"/> 50 e. _____ Ft ³ volume added for any of the above f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input type="checkbox"/> 08	
14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input type="checkbox"/> 41 Other <input checked="" type="checkbox"/> Geoprobe		6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input type="checkbox"/> 32 c. _____ Other <input type="checkbox"/>	
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input checked="" type="checkbox"/> 99		7. Fine sand material: Manufacturer, product name & mesh size a. _____ b. Volume added _____ ft ³	
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Filter pack material: Manufacturer, product name & mesh size a. _____ b. Volume added _____ ft ³	
Describe _____		9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23 Flush threaded PVC schedule 80 <input type="checkbox"/> 24 Other <input type="checkbox"/>	
17. Source of water (attach analysis, if required): None		10. Screen material: a. Screen type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>	
E. Bentonite seal, top _____ ft. MSL or _____ ft.	b. Manufacturer _____		
F. Fine sand, top _____ ft. MSL or _____ ft.	c. Slot size: _____ in.		
G. Filter pack, top _____ ft. MSL or _____ ft.	d. Slotted length: _____ ft.		
H. Screen joint, top _____ ft. MSL or 6.1 ft.	11. Backfill material (below filter pack): None <input type="checkbox"/> 14 Other <input type="checkbox"/>		
I. Well bottom _____ ft. MSL or 11.1 ft.			
J. Filter pack, bottom _____ ft. MSL or _____ ft.			
K. Borehole, bottom _____ ft. MSL or 11.1 ft.			
L. Borehole, diameter _____ in.			
M. O.D. well casing _____ in.			
N. I.D. well casing 1" in.			

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

Signature

William Schultz

Firm

10-20-10 - WDNR

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.

Route To: Watershed/Wastewater ☐ Waste Management ☐
Remediation/Revelopment ☐ Other ☐

Page 1 of 1

Facility/Project Name <u>Ironwood MGP Site</u>			License/Permit/Monitoring Number <u>WMW-2</u>		Boring Number <u>WMW-2</u>
Boring Drilled By: Name of crew chief (first, last) and Firm First Name: <u>MDNR</u> Last Name: <u></u>			Date Drilling Started <u>10/20/2010</u> m m d d y y y y	Date Drilling Completed <u>10/20/2010</u> m m d d y y y y	Drilling Method <u>Geoprobe</u>
WI Unique Well No.	DNR Well ID No.	Well Name <u>MW-1</u>	Final Static Water Level <u>4.81</u> Feet MSL	Surface Elevation ____ Feet MSL	Borehole Diameter <u>2.0</u> inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/> State Plane _____ N, _____ E			Local Grid Location ____ Feet <input type="checkbox"/> N <input type="checkbox"/> E ____ Feet <input type="checkbox"/> S <input type="checkbox"/> W		
1/4 of _____ 1/4 of Section _____, T _____ N, R _____			Facility ID _____ County <u>Iron</u> County Code _____ Civil Town/City/ or Village <u>Hurley</u>		

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth in Feet (Below ground surface)	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1	4' / 24"		1	Organic topsoil	PT									No odor/sheen
				Fine to medium grained sand	GP									
			2	Tan gravel										
				(Silty) sand medium to coarse grained & gravel little fines	GM			0.7		Dry				
2	4' / 34"		3											No odor/sheen
			4					0.8		Dry				
			5											
			6					0.8		Dry				
3	4' / 27"		7											No odor/sheen
			8	Sand, medium to coarse grained w/ gravel	GP			0.5		Wet				
			9											
			10	Sand, fine to medium grained (Silty) w/ gravel	GM			0.3		Wet				
			11	EOB 11.25'				0.3		Wet				No odor/sheen

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

Signature John M. M. Firm MDNR

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Route to: Watershed/Wastewater ☐ Waste Management ☐
Remediation/Redevelopment ☐ Other ☐

Facility/Project Name SI @ Humby MGP	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> E. <input type="checkbox"/> S. <input type="checkbox"/> W.	Well Name WMW-2
Facility License, Permit or Monitoring No.	Local Grid Origin (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/> Lat. 46° 27' 7.7" Long. 90° 10' 45.2" or	Wis. Unique Well No. DNR Well ID No.
Facility ID	St. Plane Maple St. N. Street ft. E. S/C/N	Date Well Installed 10/20/2010 m m d d y y v v v v
Type of Well Well Code TEMP	Section Location of Waste/Source 1/4 of 1/4 of Sec. T. N. R. <input type="checkbox"/> E. <input type="checkbox"/> W.	Well Installed By: Name (first, last) and Firm MDNREG WDNR
Distance from Waste/Source ft.	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	
Enf. Stds. Apply <input type="checkbox"/>	Gov. Lot Number	

A. Protective pipe, top elevation	ft. MSL	1. Cap and lock? <input type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation	ft. MSL	2. Protective cover pipe: a. Inside diameter: in.
C. Land surface elevation	ft. MSL	b. Length: ft.
D. Surface seal, bottom	ft. MSL or ft.	c. Material: Steel <input type="checkbox"/> 04 Other <input type="checkbox"/>
12. USCS classification of soil near screen: GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/> SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/>		d. Additional protection? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe:
13. Sieve analysis performed? <input type="checkbox"/> Yes <input type="checkbox"/> No		3. Surface seal: Bentonite <input type="checkbox"/> 30 Concrete <input type="checkbox"/> 01 Other <input type="checkbox"/>
14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input type="checkbox"/> 41 Geoprobe Other <input checked="" type="checkbox"/>		4. Material between well casing and protective pipe: Bentonite <input type="checkbox"/> 30 Other <input type="checkbox"/>
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input checked="" type="checkbox"/> 99		5. Annular space seal: a. Granular/Chipped Bentonite <input type="checkbox"/> 33 b. Lbs/gal mud weight ... Bentonite-sand slurry <input type="checkbox"/> 35 c. Lbs/gal mud weight ... Bentonite slurry <input type="checkbox"/> 31 d. % Bentonite ... Bentonite-cement grout <input type="checkbox"/> 50 e. Ft ³ volume added for any of the above
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input type="checkbox"/> 08
Describe		6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input type="checkbox"/> 32 c. Other <input type="checkbox"/>
17. Source of water (attach analysis, if required): None		7. Fine sand material: Manufacturer, product name & mesh size a. b. Volume added ft ³
E. Bentonite seal, top	ft. MSL or ft.	8. Filter pack material: Manufacturer, product name & mesh size a. b. Volume added ft ³
F. Fine sand, top	ft. MSL or ft.	9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23 Flush threaded PVC schedule 80 <input type="checkbox"/> 24 Other <input type="checkbox"/>
G. Filter pack, top	ft. MSL or ft.	10. Screen material: a. Screen type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>
H. Screen joint, top	ft. MSL or 6.25 ft.	b. Manufacturer c. Slot size: 0. in.
I. Well bottom	ft. MSL or 11.25 ft.	d. Slotted length: 5 ft.
J. Filter pack, bottom	ft. MSL or ft.	11. Backfill material (below filter pack): None <input checked="" type="checkbox"/> 14 Other <input type="checkbox"/>
K. Borehole, bottom	ft. MSL or 11.25 ft.	
L. Borehole, diameter	in.	
M. O.D. well casing	in.	
N. I.D. well casing	1" in.	

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

Signature William Schultz Firm WDNR

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Route To: Watershed/Wastewater ☐ Waste Management ☐
Remediation/Revelopment ☐ Other ☐

Page 1 of 1

Facility/Project Name <u>Ironwood MGP site</u>			License/Permit/Monitoring Number <u>WMW-3</u>		Boring Number <u>WMW-3</u>
Boring Drilled By: Name of crew chief (first, last) and Firm First Name: <u>MDNR</u> Last Name: <u></u>			Date Drilling Started <u>10/20/2010</u> m m d d y y y y	Date Drilling Completed <u>10/20/2010</u> m m d d y y y y	Drilling Method <u>Geoprobe</u>
WI Unique Well No.	DNR Well ID No.	Well Name <u>MW-3</u>	Final Static Water Level ____ Feet MSL	Surface Elevation ____ Feet MSL	Borehole Diameter <u>2.0</u> inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/> State Plane _____ N, _____ E			Local Grid Location ____ N _____ E ____ S _____ W		
1/4 of _____ 1/4 of Section _____, T _____ N, R _____			Lat _____ Long _____		
Facility ID		County <u>Iron</u>	County Code	Civil Town/City/ or Village <u>Houley</u>	

Sample Number and Type	Length Att. & Recovered (in)	Blow Counts	Depth in Feet (below ground surface)	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plasticity Index	P 200	
1	4' / 23"		-1	organic topsoil	pt									No odor / Sheen
			-2	silty clay, little sand & gravel	GC			0.4		M				Moist
			-3											No odor / Sheen
			-4					0.3		M				Moist
2	4' / 38"		-5											No odor / Sheen
			-6					0.2		M				Moist
			-7											No odor / Sheen
			-8					12.2		W				Moist / wet
3	4' / 44"		-9	silty sand & gravel some clay	GM									No odor / Sheen
			-10					10.2		W				Wet
			-11					9.4		W				No odor / Sheen

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

Signature [Signature] Firm MDNR

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Route to: Watershed/Wastewater ☐ Waste Management ☐
Remediation/Redevelopment ☐ Other ☐

Facility/Project Name St. @ Hunley MGP	Local Grid Location of Well ft. <input type="checkbox"/> N. <input type="checkbox"/> S. <input type="checkbox"/> E. <input type="checkbox"/> W.	Well Name WMW-3
Facility License, Permit or Monitoring No.	Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Well Location <input type="checkbox"/> Lat. 46° 27' 15.2" Long. 90° 10' 43.7" or	Wis. Unique Well No. DNR Well ID No.
Facility ID	St. Plane OAK ft. N. 57-007 ft. E. S/CN	Date Well Installed 10/20/2010 m m d d y y v v v v
Type of Well Well Code TEMP	Section Location of Waste/Source 1/4 of 1/4 of Sec. T. N. R. <input type="checkbox"/> E <input type="checkbox"/> W	Well Installed By: Name (first, last) and Firm MDNRE & WDNR
Distance from Waste/Source ft.	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	
Enf. Stds. Apply <input type="checkbox"/>	Gov. Lot Number	

A. Protective pipe, top elevation _____ ft. MSL	1. Cap and lock? <input type="checkbox"/> Yes <input type="checkbox"/> No
B. Well casing, top elevation _____ ft. MSL	2. Protective cover pipe: a. Inside diameter: _____ in. b. Length: _____ ft. c. Material: Steel <input type="checkbox"/> 04 Other <input type="checkbox"/>
C. Land surface elevation _____ ft. MSL	d. Additional protection? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe: _____
D. Surface seal, bottom _____ ft. MSL or _____ ft.	3. Surface seal: Bentonite <input type="checkbox"/> 30 Concrete <input type="checkbox"/> 01 Other <input type="checkbox"/>
12. USCS classification of soil near screen: GP <input type="checkbox"/> GM <input type="checkbox"/> GC <input type="checkbox"/> GW <input type="checkbox"/> SW <input type="checkbox"/> SP <input type="checkbox"/> SM <input type="checkbox"/> SC <input type="checkbox"/> ML <input type="checkbox"/> MH <input type="checkbox"/> CL <input type="checkbox"/> CH <input type="checkbox"/> Bedrock <input type="checkbox"/>	4. Material between well casing and protective pipe: Bentonite <input type="checkbox"/> 30 Other <input type="checkbox"/>
13. Sieve analysis performed? <input type="checkbox"/> Yes <input type="checkbox"/> No	5. Annular space seal: a. Granular/Chipped Bentonite <input type="checkbox"/> 33 b. _____ Lbs/gal mud weight ... Bentonite-sand slurry <input type="checkbox"/> 35 c. _____ Lbs/gal mud weight ... Bentonite slurry <input type="checkbox"/> 31 d. _____ % Bentonite ... Bentonite-cement grout <input type="checkbox"/> 50 e. _____ Ft ³ volume added for any of the above
14. Drilling method used: Rotary <input type="checkbox"/> 50 Hollow Stem Auger <input type="checkbox"/> 41 Geoprobe Other <input checked="" type="checkbox"/>	f. How installed: Tremie <input type="checkbox"/> 01 Tremie pumped <input type="checkbox"/> 02 Gravity <input type="checkbox"/> 08
15. Drilling fluid used: Water <input type="checkbox"/> 02 Air <input type="checkbox"/> 01 Drilling Mud <input type="checkbox"/> 03 None <input checked="" type="checkbox"/> 99	6. Bentonite seal: a. Bentonite granules <input type="checkbox"/> 33 b. <input type="checkbox"/> 1/4 in. <input type="checkbox"/> 3/8 in. <input type="checkbox"/> 1/2 in. Bentonite chips <input type="checkbox"/> 32 c. _____ Other <input type="checkbox"/>
16. Drilling additives used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7. Fine sand material: Manufacturer, product name & mesh size a. _____ b. Volume added _____ ft ³
Describe _____	8. Filter pack material: Manufacturer, product name & mesh size a. _____ b. Volume added _____ ft ³
17. Source of water (attach analysis, if required): None	9. Well casing: Flush threaded PVC schedule 40 <input checked="" type="checkbox"/> 23 Flush threaded PVC schedule 80 <input type="checkbox"/> 24 Other <input type="checkbox"/>
E. Bentonite seal, top _____ ft. MSL or _____ ft.	10. Screen material: a. Screen type: Factory cut <input checked="" type="checkbox"/> 11 Continuous slot <input type="checkbox"/> 01 Other <input type="checkbox"/>
F. Fine sand, top _____ ft. MSL or _____ ft.	b. Manufacturer _____ c. Slot size: _____ in. d. Slotted length: 5 ft.
G. Filter pack, top _____ ft. MSL or _____ ft.	11. Backfill material (below filter pack): None <input checked="" type="checkbox"/> 14 Other <input type="checkbox"/>
H. Screen joint, top _____ ft. MSL or 7.35 ft.	
I. Well bottom _____ ft. MSL or 12.35 ft.	
J. Filter pack, bottom _____ ft. MSL or _____ ft.	
K. Borehole, bottom _____ ft. MSL or 12.35 ft.	
L. Borehole, diameter _____ in.	
M. O.D. well casing _____ in.	
N. I.D. well casing _____ in.	

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

Signature **William Schultz** Firm **WDNR**

**MONITORING WELL SAMPLING
FIELDBOOK**

**WDNR Brownfields Environmental
Assessment Program**

Site Name: Ironwood MGP Inspection Type: _____

Cerclis #: MTIN 00051055 Inspection Date: 10/20/10

Sampler: Phil Richard (print)
Phil E. Rich (sign)

Recorder: John Sager (print)
John Sager (sign)

CROSSED-OUT (X) PAGES INDICATE LEFT INTENTIONALLY BLANK BY RECORDER

MONITORING WELL SAMPLING

PAGE 1 OF 6

Sample Number: W5-1Sampling Time: 1150Well Name: WMMW-1PID/FID Reading: ---QC Sample: YES ☒ NO ☐ DuplicateMSD ☐ Rinsate ☐ Trip Blank ☐Depth to Bottom: 11.1 (ft)Water Column Length (A): 5.0 (ft)Depth to Water: 6.1 (ft)Inside Well Diameter: 1.0 (in)Volume to be purged (Ax B) 0.815Time purging began 0900Time purging complete 1100Purged dry YES ☒ NO ☐

Inches *	B
1.00	0.163
1.25	0.255
1.50	0.367
2.00	0.652
3.00	1.469
4.00	2.610

*Inside Well Diameter

Sampling Equipment: Roing / tubingDedicated Equipment: YES ☒ NO ☐

Bailer No.: _____

Sample Description (include color, odor, turbidity, etc.): Clear, no odor, small amount of sediment / slightly turbid

Comments (include problems encountered/deviations from sampling plan) _____

MONITORING WELL SAMPLING

PAGE 2 OF 6

Sample Number: W5-2Sampling Time: 1120Well Name: WMMW-2PID/FID Reading: ---QC Sample: YES ☒ NO ☐ DuplicateMSD ☒ Rinsate ☐ Trip Blank ☐Depth to Bottom: 11.25 (ft)

Water Column Length (A): _____ (ft)

Depth to Water: 4.81 (ft)Inside Well Diameter: 1.0 (in)

Volume to be purged (Ax B) _____

Time purging began 1700Time purging complete 1800Purged dry YES ☒ NO ☐

Inches *	B
1.00	0.163
1.25	0.255
1.50	0.367
2.00	0.652
3.00	1.469
4.00	2.610

*Inside Well Diameter

Sampling Equipment: Roing / tubingDedicated Equipment: YES ☒ NO ☐

Bailer No.: _____

Sample Description (include color, odor, turbidity, etc.): Clear, No odor

Comments (include problems encountered/deviations from sampling plan) _____

Photo number(s): _____

Photo direction(s): _____

WELL CAP REPLACED AND LOCKED

YES NO

Photo number(s): _____

Photo direction(s): _____

WELL CAP REPLACED AND LOCKED

YES NO

MONITORING WELL SAMPLING

PAGE 3 OF 6

MONITORING WELL SAMPLING

PAGE 4 OF 6

Sample Number: W5-3Sampling Time: 1140Well Name: WMMW-3PID/FID Reading: —QC Sample: (YES) NO Duplicate

MSD Rinsate Trip Blank

Sample Number: —Sampling Time: —Well Name: —PID/FID Reading: —QC Sample: YES NO Duplicate

MSD Rinsate Trip Blank

Depth to Bottom: 12.35 (ft)Water Column Length (A): — (ft)Depth to Bottom: — (ft)Water Column Length (A): — (ft)Depth to Water: 10.84 (ft)Inside Well Diameter: — (in)Depth to Water: — (ft)Inside Well Diameter: — (in)Volume to be purged (AxB) 1045Time purging began —Time purging complete 1300Purged dry: YES NO

Inches *	B
1.00	0.163
1.25	0.255
1.50	0.367
2.00	0.652
3.00	1.469
4.00	2.610

*Inside Well Diameter

Sampling Equipment: Rough/TubingDedicated Equipment: (YES) NOBailer No.: —Sample Description (include color, odor, turbidity, etc.): NO odor,Slightly turbidComments (include problems encountered/deviations from sampling plan) ——Photo number(s): — Photo direction(s): —

WELL CAP REPLACED AND LOCKED YES NO

Volume to be purged (AxB) —Time purging began —Time purging complete —Purged dry: YES NO

Inches *	B
1.00	0.163
1.25	0.255
1.50	0.367
2.00	0.652
3.00	1.469
4.00	2.610

*Inside Well Diameter

Sampling Equipment: —Dedicated Equipment: YES NOBailer No.: —Sample Description (include color, odor, turbidity, etc.): ——Comments (include problems encountered/deviations from sampling plan) ——Photo number(s): — Photo direction(s): —

WELL CAP REPLACED AND LOCKED YES NO

**SOIL/SEDIMENT SAMPLING
FIELDBOOK**

**WDNR Brownfields Environmental
Assessment Program**

Site Name: Ironwood MGP Site Inspection Type: _____

Cerclis #: MIW00051055 Inspection Date: 10/19/10

Sampler: John Sage (print)

John Sage (sign)

Recorder: John Sage (print)

John Sage (sign)

CROSSED-OUT (X) PAGES INDICATE LEFT INTENTIONALLY BLANK BY RECORDER

SOIL/SEDIMENT SAMPLING

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SOIL/SEDIMENT SAMPLING

PAGE 2 OF 6

☒ SOIL/SEDIMENT (CIRCLE ONE)Sample Number: SS-4Sampling Time: 8:54 amQC Sample: YES ☒ NO Duplicate

MSD

Depth of Sample: 4'-6' bgsPID/FID Reading: 0.7☒ Grab / Composite (Circle One)

If composite, number of locations: _____

If composite, spacing btwn locations: _____

Sample Location (include distance to a permanent feature):

Greepole core from
location of HW-1

(Sketch)

Sampling Methods / Equipment: GreepoleDedicated Equipment ☒ YES NO

Sample Description (include color, texture, mottling/staining, odor, etc.):

Silty to sand, silty fine grained
with gravel with clay brown

Comments (include problems encountered/deviations from sampling plan):

Photo number(s): _____

Photo direction(s): _____

☒ SOIL/SEDIMENT (CIRCLE ONE)Sample Number: SS-5Sampling Time: 9:28 amQC Sample: YES ☒ NO Duplicate

MSD

Depth of Sample: 4'-6' bgsPID/FID Reading: 0.8☒ Grab / Composite (Circle One)

If composite, number of locations: _____

If composite, spacing btwn locations: _____

Sample Location (include distance to a permanent feature):

Greepole core from
location of HW-2

(Sketch)

Sampling Method / Equipment: GreepoleDedicated Equipment ☒ YES NO

Sample Description (include color, texture, mottling/staining, odor, etc.):

Silty fine to medium grained sand w/ gravel
brown

Comments (include problems encountered/deviations from sampling plan):

Photo number(s): _____

Photo direction(s): _____

SOIL/SEDIMENT (CIRCLE ONE)Sample Number: SS-3Sampling Time: 10:22amQC Sample: YES NO Duplicate

MSD

Depth of Sample: 6'-8' bssPID/FID Reading: 12.2Grab Composite (Circle One)

If composite, number of locations: _____

If composite, spacing btwn locations: _____

Sample Location (include distance to a permanent feature):

Creepable core from
location of MW-3

(Sketch)

Sampling Methods / Equipment: CreepableDedicated Equipment: YES NO

Sample Description (include color, texture, mottling/staining, odor, etc.): _____

brown silty clay w/ little gravel
little sand

Comments (include problems encountered/deviations from sampling plan): _____

Photo number(s): _____

Photo direction(s): _____

SOIL / SEDIMENT (CIRCLE ONE)

Sample Number: _____

Sampling Time: _____

QC Sample: YES NO Duplicate

MSD

Depth of Sample: _____

PID/FID Reading: _____

Grab / Composite (Circle One)

If composite, number of locations: _____

If composite, spacing btwn locations: _____

Sample Location (include distance to a permanent feature):

(Sketch)

Sampling Method / Equipment: _____

Dedicated Equipment: YES NO

Sample Description (include color, texture, mottling/staining, odor, etc.): _____

Comments (include problems encountered/deviations from sampling plan): _____

Photo number(s): _____

Photo direction(s): _____

**SOIL/SEDIMENT SAMPLING
FIELDBOOK**

**WDNR Brownfields Environmental
Assessment Program**

Site Name: Inglwood MGP Site Inspection Type: _____

Cerclis #: MIN00051055 Inspection Date: 10/19/10

Sampler: Phil Richard (print)

Phil E. Phil (sign)

Recorder: John Sager (print)

John Sager (sign)

CROSSED-OUT (X) PAGES INDICATE LEFT INTENTIONALLY BLANK BY RECORDER

☒ SOIL/SEDIMENT (CIRCLE ONE)Sample Number: SS-1Sampling Time: 1030

QC Sample: YES NO Duplicate

MSD

Depth of Sample: 1' bgsPID/FID Reading: 0.0☒ Grab Composite (Circle One)

If composite, number of locations: _____

If composite, spacing b/w locations: _____

Sample Location (include distance to a permanent feature):

1st and Auger at
riverbank SW side Silver
St.Cundquist C&S

(Sketch)

Sampling Methods / Equipment: 1st and AugerDedicated Equipment: ☒ YES ☐ NO

Sample Description (include color, texture, mottling/staining, odor, etc.):

brown fin to medium grained sand
little sand organic no staining
no odor

Comments (include problems encountered/deviations from sampling plan):

none

Photo number(s): _____

Photo direction(s): _____

☒ SOIL/SEDIMENT (CIRCLE ONE)Sample Number: SS-2Sampling Time: 11:10QC Sample: YES ☒ NO Duplicate

MSD

Depth of Sample: 1.5' bgsPID/FID Reading: 0.1☒ Grab Composite (Circle One)

If composite, number of locations: _____

If composite, spacing b/w locations: _____

Sample Location (include distance to a permanent feature):

River Bank at cash
end of 1st St.Cundquist C&S

(Sketch)

Sampling Method / Equipment: 1st and AugerDedicated Equipment: ☒ YES ☐ NO

Sample Description (include color, texture, mottling/staining, odor, etc.):

brown fine to medium grained sand
little organic matter no staining
no odor

Comments (include problems encountered/deviations from sampling plan):

none

Photo number(s): _____

Photo direction(s): _____

SOIL/SEDIMENT SAMPLING

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SOIL/SEDIMENT (CIRCLE ONE)

Sample Number: 55-6Sampling Time: 12:00QC Sample: ☒ YES ☐ NO Duplicate☒ MSDDepth of Sample: 1.0'PID/FID Reading: 5.0☒ Grab Composite (Circle One)

If composite, number of locations: _____

If composite, spacing bwn locations: _____

Sample Location (include distance to a permanent feature):

Island Auger atBlackbank end of OakSt.Cundquist GRS

(Sketch)

Sampling Methods / Equipment: Island AugerDedicated Equipment: ☒ YES ☐ NO

Sample Description (include color, texture, mottling/staining, odor, etc.):

Dark brown fine to medium grained
sand little organics

Comments (include problems encountered/deviations from sampling plan):

None

Photo number(s): _____

Photo direction(s): _____

SOIL/SEDIMENT SAMPLING

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SOIL/SEDIMENT (CIRCLE ONE)

Sample Number: 55-7Sampling Time: 12:35QC Sample: YES ☒ NO ☐ Duplicate

MSD

Depth of Sample: 1.0 bgsPID/FID Reading: 0.6☒ Grab Composite (Circle One)

If composite, number of locations: _____

If composite, spacing bwn locations: _____

Sample Location (include distance to a permanent feature):

Riverbank north end
of Riverbank DriveCundquist GRS

(Sketch)

Sampling Method / Equipment: Island AugerDedicated Equipment: ☒ YES ☐ NO

Sample Description (include color, texture, mottling/staining, odor, etc.):

Dark brown silty sand w/ little clay
some organics tree roots etc.

Comments (include problems encountered/deviations from sampling plan):

Photo number(s): _____

Photo direction(s): _____

SOIL/SEDIMENT SAMPLING

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SOIL / SEDIMENT (CIRCLE ONE)

Sample Number: 55-8

Sampling Time: 12:45

QC Sample: YES NO Duplicate

MSD DDP of 55-7

Depth of Sample: _____

PID/FID Reading: _____

Grab / Composite (Circle One)

If composite, number of locations: _____

If composite, spacing btwn locations: _____

Sample Location (include distance to a permanent feature):

(Sketch)

Sampling Methods / Equipment: _____

Dedicated Equipment: YES NO

Sample Description (include color, texture, mottling/staining, odor, etc.): _____

Comments (include problems encountered/deviations from sampling plan): _____

Photo number(s): _____ Photo direction(s): _____

SOIL/SEDIMENT SAMPLING

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SOIL / SEDIMENT (CIRCLE ONE)

Sample Number: _____

Sampling Time: _____

QC Sample: YES NO Duplicate

MSD _____

Depth of Sample: _____

PID/FID Reading: _____

Grab / Composite (Circle One)

If composite, number of locations: _____

If composite, spacing btwn locations: _____

Sample Location (include distance to a permanent feature):

(Sketch)

Sampling Method / Equipment: _____

Dedicated Equipment: YES NO

Sample Description (include color, texture, mottling/staining, odor, etc.): _____

Comments (include problems encountered/deviations from sampling plan): _____

Photo number(s): _____ Photo direction(s): _____