

**RELEASE NOTIFICATION & NOTIFICATION RETRACTION** 

**BWSC-103** 

Release Tracking Number

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FORM Pursuant to 310 CMR 40.0335 and 310 CMR 40.0371 (Subpart C)

If assigned by DEP

A. RELEASE OR THREAT OF RELE							
Street: <u>Jackson Road</u>				Location Aid: Building 2729			
City/Town: Devens		ZIP	Code: _	01433			
B. THIS FORM IS BEING USED TO:	(check one)				40		
Submit a Release Notification (com	aplete all sections of thi	is form).			T a		
Submit a Retraction of a Previously form). You MUST attach the supporting				of Release (comp	lete Sections A, B, E, F	and G of this	
C. INFORMATION DESCRIBING THE	RELEASE OR TH	REAT OF RELEAS	E (TC	PR):			
Date and time you obtained knowledge of the	Release or TOR. Date	6/11/96	Time:		Specify:	AM PM	
The date you obtained knowledge is alway	s required. The time	you obtained knowle	edge is	not required if r	eporting only 120 Day	Conditions.	
IF KNOWN, record date and time release or T	OR occurred. Date:		Time:		Specify:	AM PM	
Check here if you previously provided an	Oral Notification to DE	P (2 Hour and 72 Hour	Report	ting Conditions on	ly).		
Provide date and time of Oral Notification	n. Date:		Time:		Specify:	АМ 🗌 РМ	
Check all Notification Thresholds that apply to	the Release or Threat	of Release: (for m	ore info	ormation see 310	CMR 40.0310 - 40.0315		
2 HOUR REI DRTING CONDITIONS	72 HOUR REPORTI	NG CONDITIONS	120 (	DAY REPORTING	CONDITIONS		
Sudden Release		-Aqueous Phase	X		dous Material(s) to Soil o	r	
Threat of Sudden Release	1/2 Inch	Equal to or Greater than		Concentration(s)	eeding Reportable	0	
Oil Sheen on Surface Water	Underground St Release	torage Tank (UST)			Soil Exceeding Reportab and Affecting More than		
Poses Imminent Hazard	Threat of UST F	Palazea		Yards	-		
Could Pose Imminent Hazard		(Cicase		Release of Oil to Concentration(s)	Groundwater Exceeding	Reportable	
Release Detected in Private Well	Release to Grou Water Supply	ındwater near			Amuseus Dhees Lievid (	IADI)	
Release to Storm Drain	Release to Grou	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Equal to or Great	Aqueous Phase Liquid (I er than 1/8 Inch and Les		
Sanitary Sewer Release (Imminent Hazard Only)	School or Resid	ence		Inch			
List below the Oils or Hazardous Materials that If necessary, attach a list of additional Oil and	The control of the co		•	e Quantity by the	greatest amount.		
Name and Quantities of Oils (O) and Hazardon	us Materials (HM) Rela	ased.					
• 1				11=3-	Reportable Concer		
O or HM Released	O HM CAS (check one) (if kno		1999	Units	Exceeded, if App (RCS-1, RCS-2, RCGW		
Benzo(a)pyrene	★	>0.7		mg/kg	RCS-2		
Benzo(a)fluoranthene		>0.7		mg/kg	R C S - 2		
Benzo(a)anthracene		>0.7		mg/kg	RCS-2	2	
D. ADDITIONAL INVOLVED PARTIES	S:						
Check here if attaching names and addressubmitting this Release Notification (requ		perties affected by the I	Release	e or Threat of Rele	ase, other than an owne	r who is	
Check here if attaching Licensed Site Pro	ofessional (LSP) name	and address (optional)					
You may write in names and addresses on the bottom of the second page of this form.							



Release Tracking Number

If assigned by DEP

11210

### **RELEASE NOTIFICATION & NOTIFICATION RETRACTION**

FORM Pursuant to 310 CMR 40.0335 and 310 CMR 40.0371 (Subpart C)

E. PERSON REQUIRED TO NOTIFY:	
Name of Organization: Devens Commerce Center / Mas	ssachusetts Government Land Bank
Name of Contact: Mr. Ron J. Ostrowski	Title: Environmental Manager
Street: 43 Buena Vista Street, P-12	
City/Town: Devens	State: MA ZIP Code: 0 1 4 3 3
Telephone: (508) 772-6340 Ext.: 303	FAX: (optional) (508) 772-7577
F. RELATIONSHIP OF PERSON REQUIRED TO NOTIFY TO RELEAS	SE OR THREAT OF RELEASE: (check one)
RP or PRP Specify: Owner Operator Generator Tra	ansporter Other RP or PRP:
Fiduciary, Secured Lender or Municipality with Exempt Status (as defined by M.	G.L. c. 21E, s. 2)
Agency or Public Utility on a Right of Way (as defined by M.G.L. c. 21E, s. 5(j))	
Any Person Otherwise Required to Notify Specify Relationship:	
G. CERTIFICATION OF PERSON REQUIRED TO NOTIFY:	
$I_1$ Ron J. Ostrowski , attest under the pains an familiar with the information contained in this submittal, including any and all documer of those individuals immediately responsible for obtaining the information, the material knowledge and belief, true, accurate and complete, and (iii) that I am fully authorized this submittal. If the person or entity on whose behalf this submittal is made am/is away possible fines and imprisonment, for willfully submitting false, inaccurate, or incomplete.	nts accompanying this transmittal form, (ii) that, based on my inquiry I information contained in this submittal is, to the best of my to make this attestation on behalf of the entity legally responsible for are that there are significant penalties, including, but not limited to,
By: RJOstrowsh	Title: ENU SUS
For: (signature)  (print name of person or entity recorded in Section E)	Date: 10/15/96
Enter address of the person providing certification, if different from address recorded	in Section E:
Street:	
City/Town:	State: ZIP Code:
Telephone:Ext.:	FAX: (optional)
YOU MUST COMPLETE ALL RELEVANT SECTIONS OF THIS INCOMPLETE. IF YOU SUBMIT AN INCOMPLETE FOR	

A REQUIRED DEADLINE.



**BWSC-104** 

# RESPONSE ACTION OUTCOME (RAO) STATEMENT & DOWNGRADIENT PROPERTY STATUS TRANSMITTAL FORM

Pursuant to 310 CMR 40.0180 (Subpart B), 40.0580 (Subpart E) & 40.1056 (Subpart J)

Release		Tracking Numbe				
2	-[	11210				

A. SITE OR DOWNGRADIENT PROPERTY LOCATION:	•
Site Name: (optional)	
Street:Jackson Road .	Location Aid: Building 2/29
City/Town:Devens	ZIP Code: 0 1 4 3 3
Check here if this Site location is Tier Classified. If a Tier I Permit has been is	
Related Release Tracking Numbers that this Form Addresses:	# 8 4890
If submitting an RAO Statement, you must document the location of the Site Statement. If submitting an RAO Statement for a PORTION of a Disposal Si portion subject to this submittal and, to the extent defined, the entire Dispos you must provide a site plan of the property subject to the sub	te, you must document the location and boundaries for both the sal Site. If submitting a Downgradient Property Status Submittal,
B. THIS FORM IS BEING USED TO: (check all that apply)	
X Submit a Response Action Outcome (RAO) Statement (complete Sections	A, B, C, D, E, F, H, I, J and L).
Check here if this is a revised RAO Statement. Date of Prior Submittal:	
Check here if any Response Actions remain to be taken to address condi- Numbers are listed above. This RAO Statement will record only an RAO-	
Specify Affected Release Tracking Numbers:	
Submit an optional Phase I Completion Statement supporting an RAO State (complete Sections A, B, H, I, J, and L).	tement or Downgradient Property Status Submittal
Submit a Downgradient Property Status Submittal (complete Sections A, B	I, G, H, I, J and K).
Check here if this is a revised Downgradient Property Status Submittal.	Date of Prior Submittal:
Submit a Termination of a Downgradient Property Status Submittal (com	plete Sections A, B, I, J and L).
Submit a Periodic Review Opinion evaluating the status of a Temporary	Solution (complete Sections A, B, H, I, J and L).
Specify one: For a Class C RAO For a Waiver C	Completion Statement indicating a Temporary Solution
Provide Submittal Date of RAO Statement or Waiver Completion Statement: _	
You must attach all supporting documentation required for any Legal Notices and Notices to Public Offici	
C. DESCRIPTION OF RESPONSE ACTIONS: (check all that apply)	
Assessment and/or Monitoring Only	Deployment of Absorbant or Contaminent Materials
X Removal of Contaminated Soils	Temporary Covers or Caps
Re-use, Recycling or Treatment	Bioremediation
On Site C Off Site Est. Vol.; 60 cubic y	vards Soil Vapor Extraction
Describe:	Structure Venting System
Landfill Cover Disposal Est. Vol.: cubic y	yards Product or NAPL Recovery
X Removal of Drums, Tanks or Containers	Groundwater Treatment Systems
Describe: 2,000 gallon UST	Air Sparging
Removal of Other Contaminated Media	Temporary Water Supplies
Specify Type and Volume:	Temporary Evacuation or Relocation of Residents
Other Response Actions	Fencing and Sign Posting
Describe:	1.8
SECTION C IS CONTINUED ON	THE NEXT PAGE.



**BWSC-104** 

# RESPONSE ACTION OUTCOME (RAO) STATEMENT & DOWNGRADIENT PROPERTY STATUS TRANSMITTAL FORM

Pursuant to 310 CMR 40.0180 (Subpart B), 40.0580 (Subpart E) & 40.1056 (Subpart J)

2729 Release Tracking Number

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C. DESCRIPTION OF RESPONSE ACTIONS: (continued)
Check here if any Response Action(s) that serve as the basis for this RAO Statement involve the use of Innovative Technologies. (DEP is interested in using this information to create an Innovative Technologies Clearinghouse.)
Describe Technologies:
D. TRANSPORT OF REMEDIATION WASTE: (if Remediation Waste was sent to an off-site facility, answer the following questions)
Name of Facility: Laidlaw Waste Systems, Inc. (LWS) Plainville Landfill
Town and State: Plainville, MA
Quantity of Remediation Waste Transported to Date: 60 cubic yards
E. RESPONSE ACTION OUTCOME CLASS:
Specify the Class of Response Action Outcome that applies to the Site or Disposal Site. Select ONLY one Class:
Class A-1 RAO: Specify one of the following:
Contamination has been reduced to background levels. A Threat of Release has been eliminated.
X Class A-2 RAO: You MUST provide justification that reducing contamination to background levels is infeasible.
Class A-3 RAO: You MUST provide both an implemented Activity and Use Limitation (AUL) and justification that reducing contamination to background levels is infeasible.
If applicable, provide the earlier of the AUL expiration date or date the design life of the remedy will end:
Class B-1 RAO: Specify one of the following:
Contamination is consistent with background levels  Contamination is NOT consistent with background levels.
Class B-2 RAO: You MUST provide an implemented AUL.
If applicable, provide the AUL expiration date :
Class C RAO: Check here if you will conduct post-RAO Operation, Maintenance and Monitoring at the Site.
Specify One: Passive Operation and Maintenance Monitoring Only
Active Operation and Maintenance (defined at 310 CMR 40.0006)
F. RESPONSE ACTION OUTCOME INFORMATION:
If an RAO Compliance Fee is required, check here to certify that the fee has been submitted. You MUST attach a photocopy of the payment.
Check here if submitting one or more AULs. You must attach an AUL Transmittal Form (BWSC-113) and a copy of each Implemented AUL related to this RAO Statement. Specify the type of AUL(s) below: (required for all Class A-3 RAOs and Class B-2 RAOs)
Notice of Activity and Use Limitation Grant of Environmental Restriction Number of AULs attached:
Specify the Risk Characterization Method(s) used to achieve the RAO described above and all Soil and Groundwater Categories applicable to the Site.
More than one Soil Category and more than one Groundwater Category may apply at a Site.  Be sure to check off all APPLICABLE categories, even if more stringent soil and groundwater standards were met.
Risk Characterization Method(s) Used: X Method 1 Method 2 Method 3
Soil Category(ies) Applicable: X S-1 S-2 S-3
Groundwater Category(ies) Applicable: GW-1 GW-2 X GW-3
When submitting any Class A-1 RAO or a Class B-1 RAO where contamination is consistent with background levels, do NOT specify a Risk Characterization Method.
When submitting any Class A-? RAO or a Class B-1 RAO where contamination is NOT consistent with background levels, you cannot use an AUL to maintain a level of no significant risk. Therefore, you must meet S-1 Soil Standards, if using Risk Characterization Method 1.



**BWSC-104** 

2727 Release Tracking Number

# 2 - 11210

# RESPONSE ACTION OUTCOME (RAO) STATEMENT & DOWNGRADIENT PROPERTY STATUS TRANSMITTAL FORM

Pursuant to 310 CMR 40.0180 (Subpart B), 40.0580 (Subpart E) & 40.1056 (Subpart J)

Talibadin to the district (based (based to be an				
G. DOWNGRADIENT PROPERTY STATUS SUBMITTAL:				
If a Downgradient Property Status Submittal Compliance Fee is required, check here to certify that the fee has been submitted. You MUST attach a photocopy of the payment.				
Check here if a Release(s) of Oil or Hazardous Material(s), other than that which is the subject of this submittal, has occurred at this property.				
Release Tracking Number(s):				
Check here if the Releases identified above require further Response Actions pursuant to 310 CMR 40,0000.				
Required documentation for a Downgradient Property Status Submittal includes, but is not limited to, copies of notices provided to owners and operators of both upgradient and downgradient abutting properties and of any known or suspected source properties.				
H. LSP OPINION:				
I attest under the pains and penalties of perjury that I have personally examined and am familiar with this transmittal form, including any and all documents accompanying this submittal. In my professional opinion and judgment based upon application of (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and (iii) the provisions of 309 CMR 4.03(5), to the best of my knowledge, information and belief,				
> if Section B indicates that a Downgradient Property Status Submittal is being provided, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed and implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in 310 CMR 40.0183(2)(b), and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal;				
> if Section B indicates that either an RAO Statement, Phase I Completion Statement and/or Periodic Review Opinion is being provided, the response action(s) that is (are) the subject of this submittal (i) has (have) been developed and implemented in accordance with the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, (ii) is (are) appropriate and reasonable to accomplish the purposes of such response action(s) as set forth in the applicable provisions of M.G.L. c. 21E and 310 CMR 40.0000, and (iii) complies(y) with the identified provisions of all orders, permits, and approvals identified in this submittal.				
I am aware that significant penalties may result, including, but not limited to, possible fines and imprisonment, if I submit information which I know to be false, inaccurate or materially incomplete.				
Check here if the Response Action(s) on which this opinion is based, if any, are (were) subject to any order(s), permit(s) and/or approval(s) issued by DEP or EPA. If the box is checked, you MUST attach a statement identifying the applicable provisions thereof.				
LSP Name: William J. Mallio LSP#: 4966 Stamp: WINOF MASS				
Telephone: (617) 498-4635 Ext.: WILLIAM				
FAX: (optional) (617) 498-4623 MALLIO				
Signature: Mo. 4966				
Date:				
I. PERSON MAKING SUBMITTAL:				
Name of Organization: Devens Commerce Center/Massachusetts Land Bank				
Name of Contact: Ronald J. Ostrowski Title: Environmental Manager				
Street: 43 Buena Vista St., P-12				
City/Town: Devens State: MA ZIP Code: 0 14 3 3				
Telephone: (508) 772-6340 Ext.: 303 FAX: (optional) (508) 772-7577				
J. RELATIONSHIP TO SITE OF PERSON MAKING SUBMITTAL: (check one)				
RP or PRP Specify: Owner Operator Commer Other RP or PRP:				
Fiduciary, Secured Lender or Municipality with Exempt Status (as defined by M.G.L. c. 21E, s. 2)				
Agency or Public Utility on a Right of Way (as defined by M.G.L. c. 21E, s. 5(j))				
Any Other Person Submitting This Form Specify Relationship:				



**BWSC-104** 

2729

Release Tracking Number

# RESPONSE ACTION OUTCOME (RAO) STATEMENT & DOWNGRADIENT PROPERTY STATUS TRANSMITTAL FORM

Pursuant to 310 CMR 40.0180 (Subpart B), 40.0580 (Subpart E) & 40.1056 (Subpart J)

of the/those individual(s) immediately respinformation and belief, true, accurate and behalf this submittal is made satisfy(ies) thave provided notice in accordance with 3	consible for obtaining the information, the complete; (iii) that, to the best of my known the criteria in 310 CMR 40.0183(2); (iv) that I am formation. It is a considerable of the criteria in 310 CMR 40.0183(5); and (v) that I am formation. If the person(s) or entity(ies) on we considerable of the conside	e material information owledge, information a that I/the person(s) or ully authorized to mak hose behalf this subm	jury (i) that I have personally examined and am this transmittal form; (ii) that, based on my inquir contained herein is, to the best of my knowledge, and belief, I/the person(s) or entity(ies) on whose entity(ies) on whose behalf this submittal is made this attestation on behalf of the person(s) or nittal is made is/are aware that there are significant accurate, or incomplete information.
By:		Title:	
(signature)			
For:		Date:	
(print name of person or entity record	ded in Section I)		
Enter address of the person providing cer	tification, if different from address record	ded in Section I	
Street:	F		
		State:	ZIP Code:
		_	
Telephone:L. CERTIFICATION OF PERSON	Ext.:	FAX: (optional)	ed to complete this section of the form.
Telephone:  CERTIFICATION OF PERSON  If you are completing only a land to the completing on the completing of the completing of the completing on the completing of the completing only a land to the comple	Ext.:  MAKING SUBMITTAL:  Downgradient Property Status Submits in a submittal, including any and all docuble for obtaining the information, the mathematic complete, and (iii) that I am fully authorized to be half this submittal is made am/is	FAX: (optional)  sittal, you do not nee s and penalties of perj iments accompanying erial information conta ted to make this attest aware that there are s	
Telephone:  If you are completing only a life to the possible fines and imprisonment, for willful By:  ATOMICS AND TO STORY TO ST	Ext.:  MAKING SUBMITTAL:  Downgradient Property Status Submits in attest under the pains submittal, including any and all docuble for obtaining the information, the mathematic property and (iii) that I am fully authorize see behalf this submittal is made am/is lly submitting false, inaccurate, or incomplete.	FAX: (optional)  stittal, you do not need and penalties of perjuments accompanying erial information contacted to make this attest aware that there are supplete information.	ed to complete this section of the form.  ury (i) that I have personally examined and am this transmittal form, (ii) that, based on my inquin lined in this submittal is, to the best of my ation on behalf of the entity legally responsible for significant penalties, including, but not limited to,
If you are completing only a land in the completing and the completing on the completing on the control of those individuals immediately responsible knowledge and belief, true, accurate and control of the completing only a land of the completing only a	Ext.:  MAKING SUBMITTAL:  Downgradient Property Status Submits submittal, including any and all docuble for obtaining the information, the material complete, and (iii) that I am fully authorizes behalf this submittal is made am/is fly submitting false, inaccurate, or incomplete.	FAX: (optional)  stittal, you do not need and penalties of period information contained to make this attest aware that there are simplete information.	ed to complete this section of the form.  ury (i) that I have personally examined and am this transmittal form, (ii) that, based on my inquin tined in this submittal is, to the best of my ation on behalf of the entity legally responsible for
If you are completing only a land in the completing on the completing on the completing on the control of those individuals immediately responsible knowledge and belief, true, accurate and control of this submittal. If the person or entity on what possible fines and imprisonment, for will full the complete control of the control of th	Ext.:  MAKING SUBMITTAL:  Downgradient Property Status Submits submittal, including any and all docuble for obtaining the information, the matter of the submittal is made am/is life submitting false, inaccurate, or incomplete, and (iii) that I am fully authorizes behalf this submittal is made am/is life submitting false, inaccurate, or incomplete in Section I)	FAX: (optional)  sittal, you do not need and penalties of perjuments accompanying erial information contained to make this attest aware that there are simplete information.  Title: FN	ed to complete this section of the form.  ury (i) that I have personally examined and am this transmittal form, (ii) that, based on my inquinitied in this submittal is, to the best of my ation on behalf of the entity legally responsible for significant penalties, including, but not limited to,
If you are completing only a line.  If you are completing only a l	Ext.:  MAKING SUBMITTAL:  Downgradient Property Status Submits submittal, including any and all docuble for obtaining the information, the matter of the submittal is made am/is lity submitting false, inaccurate, or incomplete in Section I)  Iffication, if different from address record	FAX: (optional)  sittal, you do not need and penalties of perjuments accompanying erial information contained to make this attest aware that there are simplete information.  Title: FN	ed to complete this section of the form.  ury (i) that I have personally examined and am this transmittal form, (ii) that, based on my inquinitied in this submittal is, to the best of my ation on behalf of the entity legally responsible for significant penalties, including, but not limited to,
If you are completing only a land in the completing and the completing on the completing of the comple	MAKING SUBMITTAL:  Downgradient Property Status Submits submittal, including any and all docuble for obtaining the information, the mathomplete, and (iii) that I am fully authorize behalf this submittal is made am/is ally submitting false, inaccurate, or incompleted in Section I)  information, if different from address record	FAX: (optional)  sittal, you do not need and penalties of perjuments accompanying erial information contained to make this attest aware that there are supplete information.  Title: FN  Date: 10//	ed to complete this section of the form.  ury (i) that I have personally examined and am this transmittal form, (ii) that, based on my inquinitied in this submittal is, to the best of my ation on behalf of the entity legally responsible for significant penalties, including, but not limited to,

YOU MUST COMPLETE ALL RELEVANT SECTIONS OF THIS FORM OR DEP MAY RETURN THE DOCUMENT AS INCOMPLETE. IF YOU SUBMIT AN INCOMPLETE FORM, YOU MAY BE PENALIZED FOR MISSING A REQUIRED DEADLINE, AND YOU MAY INCUR ADDITIONAL COMPLIANCE FEES.



# THE COMMONWEALTH OF MASSACHUSETTS GOVERNMENT LAND BANK

Devens Commerce Center Devens, Massachusetts

**RELEASE TRACKING NO. 2-11210** 

Closur Report

UST NO. 2729

### **OCTOBER 1996**

### Attachment to:

RESPONSE ACTION OUTCOME (RAO) STATEMENT (BWSC-104)

Prepared by:
S E A CONSULTANTS INC.
Science/Engineering/Architecture
Cambridge, Massachusetts
Rocky Hill, Connecticut
Rochester, New York
Londonderry, New Hampshire

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S E A CONSULTANTS INC.

Underground Storage Tank Closure Report UST No. 2729

### 1.0 <u>INTRODUCTION</u>

This Release Action Outcome (RAO) Statement has been completed in accordance with 310 CMR 40.1000. The response action was conducted as a result of a historical release adjacent to a 2,000-gallon steel underground storage tank (UST) located at Building No. 2729, Jackson Road, Devens, Massachusetts (north/east [North American Datum, 1983] coordinates N622286/E3020960).

The UST closure was conducted in accordance with the <u>Commonwealth of Massachusetts</u> <u>Underground Storage Tank Closure Assessment Manual</u>, dated April 9, 1996, and the Devens Commerce Center's (DCC) "*Underground Storage Tank Closure Protocol*" (Addendum to a Department of Environmental Protection (DEP) approved Tier 1A permit), dated June 14, 1996.

The 2,000-gallon steel UST, storing No. 2 heating oil, was removed on May 29, 1996. Impacted soil above RCS-2 Reportable Concentrations was identified during tank closure through laboratory analysis of soil samples. Per 310 CMR 40.0361(1)(b), the RCS-2 reporting category applies to this site because it is outside the geographic boundaries of an area categorized as RCS-1. The release at the site is, therefore, subject to the DEP's 120-day notification requirements, as per 310 CMR 40.0300.

Because the DCC was conducting a large number of these UST removals, the DEP had issued the DCC a Presumptive Letter of Approval on March 19, 1996 to conduct an Immediate Response Action (IRA) at the UST excavation if impacted soil was detected above Reportable Concentrations outlined in the Massachusetts Contingency Plan (MCP) [310 CMR 40.1600].

UST No. 2729

As part of the IRA, approximately eighty-one (81) cubic yards of impacted soil have been removed and disposed of by the DCC. Following laboratory tests which confirmed that criteria were met for closure of the excavation, the excavation was backfilled and compacted with off-site fill.

### 2.0 BACKGROUND

The UST at Building 2729 was originally installed in 1965 by the U.S. Army to store No. 2 fuel oil for heating Building 2729. Upon the closure of Fort Devens, the UST's ownership was transferred from the U.S. Army to the DCC. As part of the DCC's goal to develop Fort Devens, a number of USTs, including this UST at Building 2729, were removed. This steel UST had a diameter of five (5) feet and four (4) inches, and a length of twelve (12) feet and three (3) inches. The associated piping was copper tubing.

### 3.0 <u>UST REMOVAL</u>

On May 29, 1996, D&C Construction Co., Inc. of Rockland, Massachusetts, as part of its UST removal contract with the DCC, removed product from the UST with a vacuum truck. Later, soil above the UST and its associated piping was removed with an excavator and by hand shovel. The UST was then tilted by the excavator to allow the remaining product to pool at the UST's bottom corner. A two-foot by two-foot access hole was cut in the UST after it had been tested for combustible gases and oxygen. A laborer made entry into the tank, and using squeegee wipers, rags and a vacuum hose, cleaned out the remaining product from the tank. All product was transported off-site as hazardous waste. The manifests are included as Appendix A. On May 29, 1996, the UST was removed and transported off-site. Copies of transfer documentation (Forms FP290R and 291) are included as Appendix B. A total of sixty (60) cubic yards of soil was excavated in the process of removing the UST. Contaminant levels within the stockpile were later found to be above applicable MCP thresholds.

### 4.0 FIELD OBSERVATIONS, EXCAVATION, AND ASSESSMENT

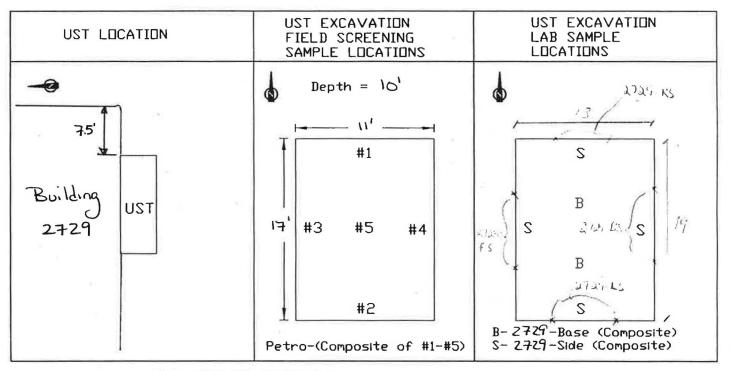
Upon removal of the UST, it was observed to be intact with no sign that the integrity of the tank skin had been compromised. There was some visual evidence of impacted soil next to the UST, which may have been due to the asphalt coating of the UST. Groundwater was not observed in the excavation during tank removal.

Soil samples were screened by the Jar Headspace method using a Photoionization Detector (PID). PID readings ranged from **0.1** to **2.4** parts per million by volume (ppmv) as benzene. A composite sample collected from the sidewalls and base of the excavation was screened using the Petroflag Hydrocarbon Analyzer system. The sample measured **235** ppm of Total Petroleum Hydrocarbons (TPH). Results and sampling locations are shown in Figure 1.

Due to the low levels of these field screening values, no further excavation was conducted and closure samples were collected from the excavation. A sample was also collected from the soil stockpile for characterization and disposal. The following laboratory analyses were conducted:

LOCATION DESCRIPTION	LABORATORY ANALYSES METHOD
Base of the Excavation	TPH (EPA Method 418.1)
Sidewalls of the Excavation and Stockpile	TPH (EPA Method 418.1) Polynuclear Aromatic Hydrocarbons (EPA Method 8270) Volatile Organic Compounds (EPA Method 8260)

Laboratory results indicated PAH levels within the stockpile and sidewalls were above RCS-2 Reportable Concentrations (benzo(a)anthracene > 0.7 ppm; benzo(b)fluoranthene > 1.0 ppm; benzo(a)pyrene > 0.7 ppm), but within the acceptable range for recycling. Samples collected from the base of the excavation were reanalyzed for PAHs, and were below RCS-2 Reportable Concentrations. As a result of the elevated PAH levels on the sidewalls, an additional twenty-one (21) cubic yards were excavated from the sidewalls. Closure samples



	FIE	LD SO	CREEN	NING
SAMPLE #	DEPTH	TPH SCREEN	HEAD SPACE	LAB ANAL METHOD
#1			2.4	
#2			1.8	
#3			0.1	
#4			1.4	
#5			0.8	
PETRO		235		
2729-BASE				352
Z729-SIDE				292

### Figure 1 UST and Sample Locations

Massachusetts Land Bank Devens, Massachusetts



were collected from each sidewall of the excavation. Laboratory results indicated PAH levels of the sidewalls were below Reportable Concentrations. Results and sampling locations are shown in Table 1 and Figure 1, respectively. The laboratory analytical data package is contained in Appendix C.

After receipt of the laboratory data, the stockpiled soil was transported off-site under an LSP-approved Bill of Lading (Appendix E). Off-site clean fill was later backfilled into the excavation and compacted in accordance with the contract documents to bring the excavation back to grade. Compaction documentation is contained in Appendix D.

### 5.0 METHOD 1 RISK CHARACTERIZATION

Analytical results from the environmental sampling were compared to MCP "Reportable Concentrations" and "Applicable Cleanup Standards" to assess site constraints. The soil and groundwater cleanup standards for the subject site were selected as per 310 CMR 40.0970 for both current and foreseeable site uses. A Method 1 Risk Characterization was conducted in order to select the applicable cleanup standards for soil and groundwater on-site. The basis for the selected cleanup standards for current and foreseeable uses is presented below.

### Current Use:

The site was formerly the U.S. Army's Fort Devens. Currently, the tank location is part of the DCC's Innovation and Technology Use Development. The site is unpaved and there are no residences on the site.

TABLE 1
SUMMARY OF LABORATORY ANALYTICAL RESULTS

SAMPLE I.D. NUMBER	Analyte	LABORATORY RESULT (PPM)	S-1/GW-1/GW-2/GW-3* (PPM)
2729-Base	ТРН	352	500
2729-Side	ТРН	292	500
2729-Stock	ТРН	149	500
2729-Stock 2729-Side/Base 2729-FS/BS/RS/LS**	Fluorene	ND ND/ND ND/ND/ND/ND	400
2729-Stock 2729-Side/Base 2729-FS/BS/RS/LS**	Phenanthrene	0.818 4.87/0.685 ND/ND/ND/ND	100
2729-Stock 2729-Side/Base 2729-FS/BS/RS/LS**	Anthracene	ND ND/ND ND/ND/ND/ND	1,000
2729-Stock 2729-Side/Base 2729-FS/BS/RS/LS**	Fluoranthene	1.18 10.9/1.15 ND/.28/ND/ND	600
2729-Stock 2729-Side/Base 2729-FS/BS/RS/LS**	Ругепе	1.63 3.47/1.01 ND/ND/ND/ND	500
2729-Stock 2729-Side/Base 2729-FS/BS/RS/LS**	Benzo(a)anthracene	0.803 2.36/0.602 ND/ND/ND/ND	0.7
2729-Stock 2729-Side/Base 2729-FS/BS/RS/LS**	Chrysene	0.663 2.53/0.457 ND/ND/ND/ND	7
2729-Stock 2729-Side/Base 2729-FS/BS/RS/LS**	Benzo(b)fluoranthene	0.527 <b>2.07</b> /0.445 ND/ND/ND/ND	0.7
2729-Stock 2729-Side/Base 2729-FS/BS/RS/LS**	Benzo(k)fluoranthene	1.5 ND/0.445 ND/ND/ND/ND	7

UST No. 2729

# TABLE 1 (CONTINUED) SUMMARY OF LABORATORY ANALYTICAL RESULTS

SAMPLE I.D. Number	ANALYTE	LABORATORY RESULT (PPM)	S-1/GW-1/GW-2/GW-3* (PPM)
2729-Stock 2729-Side/Base 2729-FS/BS/RS/LS**	Benzo(a)pyrene	0.668 <b>2.39</b> /0.44 ND/ND/ND/ND	0.7
2729-Stock 2729-Side/Base 2729-FS/BS/RS/LS**	Indeno(1,2,3-cd)pyrene	ND ND/0.552 ND/ND/ND/ND	0.7
2729-Stock 2729-Side	Toluene	ND ND	500
2729-Stock 2729-Side	Ethyl Benzene	ND ND	90
2729-Stock 2729-Side	Xylenes	ND ND	500

<sup>\*</sup>Soil/Groundwater Category S-1/GW-1/GW-2/GW-3 [310 CMR 40.0975(6)(a)].

ND = Not detected above laboratory detection limits.

<sup>\*\*</sup> Final sidewall closure samples

### Applicable Groundwater Standards:

The applicable "Groundwater Category" for the subject site, as defined under the MCP (310 CMR 40.0932), was identified based on the following considerations:

- Groundwater Category "GW-1" Standards: GW-1 groundwater standards are applicable to groundwater that is or could be used as drinking water (e.g., within "Zone II" aquifer protection area, interim wellhead protection areas, "Potentially Productive" aquifers, and Zone A/Class A surface water bodies). Currently, the site is not within a Zone II delineated area, and, therefore, this GW-1 groundwater category does not apply. The Zone II delineation at Devens is based on a 3-layer model drafted by ETA, Inc. on August 15, 1995. The DEP is currently using this delineation on an interim basis (phone conversation Ron Ostrowski (DCC)/Lynne Welsh (DEP), July 24, 1996).
- 2. Groundwater Category "GW-2" Standards: GW-2 groundwater standards are applicable to groundwater located within thirty (30) feet of an existing occupied structure when depth to groundwater is fifteen (15) feet or less. GW-2 standards account for potential exposure to vapors resulting from compounds in groundwater. The average depth to groundwater in the area is less than fifteen (15) feet, and, therefore, this classification does not apply.
- 3. Groundwater Category "GW-3" Standards: Due to ecological exposure considerations, all groundwater in Massachusetts is classified as Category GW-3 (per 310 CMR 40.0932 [3]), including groundwater classified as Groundwater Category GW-1 or GW-2. This means that for those compounds for which GW-3 standards are more stringent than GW-1 or GW-2 standards, the GW-3 standards apply.

### Applicable Soil Standards:

Soil Standards are determined based on potential exposure scenarios. Pertinent aspects of the exposure scenario developed for the site, using current site conditions, are summarized as follows:

- Potential receptors include adult contract workers engaged in demolition or construction activities;
- Potential frequency of use is "high" (since the site contractors are walking over the site daily);
- Potential intensity of use is "high" (since there is routine disturbance of surface and subsurface soils); and
- The soil is considered "accessible" (impacted soil is present less than three (3) feet below grade and the area is unpaved).

Based on the potential exposure scenario, and the provisions outlined under 310 CMR 40.0933, Soil Category "S-1", standards have been identified as applicable for characterization of risk of soil exposure on the site.

In addition to considerations of direct exposure to soil, indirect exposures could result from leaching of contaminants from soil into groundwater. As such, cleanup standards are also based in part on the category of groundwater, as defined under 310 CMR 40.0932, at or near potentially accessible soil.

Therefore, based upon the potential exposure scenario and the above groundwater classification, Soil Category S-1/GW-2/GW-3 has been identified as applicable for the site's current uses.

### Future or Foreseeable Use:

The foreseeable future use for the site is to be as part of the DCC's Rail, Industrial, and Trade-related development.

### Applicable Groundwater Standards:

As the groundwater category and elevation are not expected to change (assuming a building within fifteen (15) feet of the site), GW-2/GW-3 standards will still apply to the site.

### Applicable Soil Standards:

Soil Standards applicable for risk characterization using Method 1 (per 310 CMR 40.0970) are determined based on potential exposure scenarios. Pertinent aspects of the exposure scenario developed for the site, assuming future site conditions, are summarized as follows:

- Receptors include employees and possibly children;
- Potential frequency of use is "high" for adults (since it is a workplace and large numbers of adults may be present at any given time, regardless of any one person's frequency of use) and "low" for children (infrequent visitors);
- Potential intensity of use is "high" (since activity will likely result in the inhalation of soil-derived dust); and

The contaminated soil is "accessible" (less than three (3) feet below grade on an unpaved area).

Based on the potential exposure scenario, and the provisions outlined under 310 CMR 40.0933, soil standards have been identified as applicable for characterization of risk of soil on-site. Soil Category "S-1" would apply to the site.

Therefore, based upon the potential exposure scenario and the above groundwater classification, Soil Category S-1/GW-2/GW-3 has been identified as applicable for the site's foreseeable future uses.

In order to make future use of the site unrestricted, and due to the possibility that in future years the site may be classified as being within a Zone II aquifer, the DCC preferred the remediation of impacted soil to continue until soil contaminant levels were below more restrictive soil-groundwater limits (S-1/GW-1/GW-2/GW-3). Therefore, soil/groundwater category S-1/GW-1/GW-2/GW-3 has been selected as a goal by the owners as a standard that will allow unrestricted use in the future.

Impacted soil was excavated until the post-excavation samples taken were below the soil/groundwater concentrations applicable to category S-1/GW-1/GW-3.

### Discussion of Results:

As presented in Table 1, final soil samples collected from the excavation sidewalls and base have TPH and PAH concentrations below the S-1/GW-1/GW-2/GW-3 Method 1 Risk standard. Therefore, the soil within the tank grave does not present a "significant risk" to human health or the environment.

ΪÏ

### 6.0 FEASIBILITY OF RESTORATION TO BACKGROUND

As per 310 CMR 40.0860, the feasibility of implementing a Permanent Solution of reducing the level of oil and hazardous material (OHM) to background is required for a Class A-2 RAO, which is applicable to the subject site.

A Technological Feasibility Assessment (310 CMR 40.0860 [5]) and Benefit-Cost Analysis (310 CMR 40.0860 [6]) have been conducted for the subject site, as follows.

### Technological Feasibility (310 CMR 40.0860 [5])

- a.) The excavation of impacted soil is technologically feasible using an excavator.
- b.) This remedial action alternative (excavation) has been sufficiently proven reliable at other sites.
- c.) The remedial action alternative (excavation) can comply with applicable regulations and requirements.

### Benefit-Cost Analysis (310 CMR 40.0860 [6])

- a.) The cost of conducting additional excavation of impacted soil is disproportionate to the incremental benefits achieved through additional reduction of potential risk.
- b.) The implementation of additional excavation does not appear to present risk of harm to health, safety, and public welfare or the environment. Note that there may be a safety hazard associated with open excavation.

- c.) No wetlands are located within the impacted area.
- c-1.) Other feasible Temporary or Permanent Solutions exist.
- c-2.) PAHs are not likely to bioaccumulate or migrate (based on its elevation above groundwater).
- c-3.) Excavation of impacted soil would not result in permanent or irreparable damage to resources.

Therefore, the incremental costs of conducting the remedial action alternative (increased excavation) is substantial and disproportionate to the incremental benefits of risk reduction, environmental restoration, and monetary and non-pecuniary values.

### 7.0 FINDINGS AND CONCLUSIONS

Based upon subsurface investigations indicating the presence of impacted soil, D&C excavated approximately eighty-one (81) cubic yards of the impacted soil.

Closure samples were collected from the sidewalls and base of the initial excavation, as determined by visual observation, jar headspace readings, and the Petroflag Hydrocarbon Analyzer system. Benzo(a)anthracene, Benzo(a)pyrene, and Benzo(b)fluoranthene were detected at concentrations above RCS-2 concentrations within the excavation. Soil was excavated until closure samples collected from the tank grave indicated clean closure. The associated stockpile was transported off-site under an LSP-approved Bill of Lading. Laboratory analysis of closure samples confirmed that the sidewalls and base of the excavation were below S-1/GW-1/GW-2/GW-3 soil cleanup standards. Therefore, the soil within the tank grave does not present a significant risk to human health or the environment.

As per 310 CMR 40.0860, S E A evaluated the feasibility of achieving or approaching background levels of OHM at the subject site. It is technologically feasible to excavate impacted soil at the subject site, however, the costs of conducting the remedial action outweigh the incremental benefits. Therefore, "No Further Action" is necessary at the subject site.

Based on these findings, it is concluded that a Class A-2 RAO is applicable to this site, as (1) a Permanent Solution has been achieved; (2) the level of oil and hazardous material in the environment has not been reduced to background; and (3) one or more AULs are not required to maintain a level of No Significant Risk.

### APPENDIX A

### UNIFORM HAZARDOUS WASTE MANIFESTS

# FACILITY MAILS TO GENERATOR



### CUMINIONWEALTH OF MASSACHUSETTS DEPARTMENT OF ENVIRONMENTAL PROTECTION DIVISION OF HAZARDOUS MATERIALS

One Winter Street

Boston, Massachusetts 02108

ease print or type. (Form designed for use on elite (12-pitch) typewriter.)					
UNIFORM HAZARDOUS  WASTE MANIFEST  1. Generator US EPA ID No.	lanifest ument No.	2. Page L of		n in the shade red by Federa	
3. Generator's Name and Mailing Address DEVENS COMMERCE CENTER			Manifest Docum		
43 BUENA VISTA ST. P-12			1148181		
FORT DEVENS, MA 01433	3	B. State	Gen. ID / SAM	<b>S</b>	9.33
4. Generator's Phone ( 508 772-6340   5. Transporter '1 Company Name   6. US EPA ID Number		C State	Trans. ID	CALL TOTAL	
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7. Transporter 2 Company Name 8. US EPA ID Number	119	D. Trans	porter's Phone (	215	471 050°
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9. Designated Facility Name and Site Address 10. US EPA ID Number		写像情	行到要情報		可可能逐
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590 SOUTH STREET EAST			Facility's ID		quired 🔆 🖔
RAYNHAM, MA 02767 M A D 0 5 9 7 3	444	9	ty's Phone (	508 82	9=1151
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Cont	iners	13. Total	Unit	Waste No.
	No.	Туре	Quantity	Wt/Vol	海野 神
* FUEL OIL MIXTURE, COMBUSTIBLE LIQUID, NA1993,					
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		h 3		<b>建</b>	
15. Special Handling Instructions and Additional Information			DURIN	10 Z	N
Job #: E0653 PO #:	ij.,		BURN	(1)	1
Emergency #:(315)471-0503	ERG A.	27	ZNE	nul	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately desc proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for	ribed above by	nhway	*	11	
according to applicable international and national government regulations.	tratisport by th				
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste	generated to th	e degree I ha	eve determined to b	e economically	practicable
and that I have selected the practicable method of treatment, storage, or disposal currently available to me which ment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and se	inimizes the pr elect the best w	esent and fu aste manag	ement method that	in health and th t is available to	e environ- ne and that!
can afford.			*		Date
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17. Transporter 1 Acknowledgement of Receipt of Materials					Date
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m Approved OMB No 2050-0039. Expires 9 30-96 A Form 8700-22/(Ray 9-94) - Taylous editions are obsolete			**		

COPY>3:

FACILITY MAILS TO GENERATOR

### APPENDIX B

### TANK MANIFESTS AND RECEIPTS

The Commonwer

Department of Public Saf

Department of Public Safety-Division of Fire	Prevention
--	------------

APPLICATION FOR PERMIT FOR REMOVAL AND TRANSPORTATION TO APPROVED TANK YARD

Grant

		1-275	29 1094
	8 8	1-25	
# more	To: HEAD OF FIRE DEPARTMENT	6-1000	DIG SAFE NUMBER
70	96 To: HEAD OF FIRE DEPARTMENT	8 -10	961907225
#0055\$	96	7 - 7	Stort Date May 96
			10
	In accordance with the provisi Section 38A Application is her	eby made by	
9	TOTAL 2687, 2688, 2637,	2979 (Name of Person	Firm or Corporation)
51	1431, 1437, 1468, 160	2,3596 248 RIVER	ST. NORWELL, MA 02061
	(BLDG#3)	Address	7 02001
	For permission to remove and	transport underground ste	el storage tank(s) from tr
		DEVENS com	MERCE CENTER CITY OF TOWN DEVENS, MA 01433
			city or town) ET. DEVENS, MH 01433
	FDID# 17919 to approve	Tank Yardli 008	
	State clearly type of	CO	ů.
	inert gas used in steel storage tank	Type of Inert g	as used
10-38-10	Name of Person, Firm, Corpora	tion disposing tank Jan	FRANT, READING, MA.
	Date Issued - rejected	19 By:	G. Mai
1	Date of expiration	19 paid/due Signati	ire of Applicant
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	DEPARTMENT OF P	JELIC SAFETY DIVISION	OF FIRE PREVENTION
		PERMIT	125 (18:5-10
N. S. C.	•	NSPORTATION TO APPROVED TA	I DIA BARE WILLIAGO I
	In accordance with the provision Section 38A this permit is grant	s of Chapter 148, G.L. as pi	ovided in
	Name:	n, firm or Corporation	End Dela English
	10 transport undergrou	nd steel storage tank(s)	
	State clearly type of	o Approved tank yard#	
	inert gas used in		
		el tank:	·
	FDID# 17919 Nam	and address of contractor	
	_ UI3	posing tank ation to which tank will	· · · · · · · · · · · · · · · · · · ·
8.	be :	transported	
	This permit will expire	Approved tank va	CAPT. GROWP 3
	The company	IT Contraction Comments	

gnature of official granting permit(TITLE) (Head of Fire Dept.)

71

ECEIPT OF DISPOSAL OF UNDERGROUND STEEL STORAGE TANK  OF R. 28 WOLCOLS
PPROVED TANK YARD READVILLE MA COL
PPROVED TANK YARD NO
ank Yard Ledger 502 CMR 3.03(4) Number: 9 4 2 2 3 7 1
certify under penalty of law I have personally examined the underground steel storage tank elivered to this "approved tank yard" by firm, corporation or partnership i'm Monnis—D+ e and accepted same in conformance with Massachusetts Fire Prevention
egulation 502 CMR 3.00 Provisions for Approving Underground Steel Storage Tank dismantling yards. valid permit was issued by LOCAL Head of Fire Department FDID# / 9 / 9 to transport his tank to this yard.
same and official title of approved tank yard owner or owners authorized representative:    S-29-96   DATE SIGNED
this signed receipt of disposal <u>must be returned</u> to the local head of the fire department DIDN <u>L 7 9 L 9 pursuant to 502 CMR 3:00. (EACH TANK MUST HAVE A RECEIPT OF DISPOSAL)</u>

MASSACHUSETTS STATE FIRE MARSHAL'S OFFICE

(OVER)

FORM F.P. 291 (rev. 11/95)

## APPENDIX C

### LABORATORY ANALYTICAL RESULTS

Page 1 TO	DXIKON CORP. REPORT	Work Order # 96-05-570
Received: 05/30/96	06/10/96 12:39:20	
REPORT D & C CONSTRUCTION CO.  TO 415 VFW DRIVE  ROCKLAND, MA. 02370  617-871-8200 FAX: 871-88	PREPARED TOXIKON CORPORATION BY 15 WIGGINS AVE BEDFORD, MA 01730	CERTIFIED BY
ATTEN WHITEY MORRIS	ATTEN PAUL LEZBERG	
	PHONE (617)275-3330	CONTACT JOHNM
CLIENT D C CONSTRUC SAMPI		A DESCRIPTION OF THE PROPERTY
COMPANY D & C CONSTRUCTION CO.		
FACILITY 415 VFW DRIVE		DH, THMS, VOC, PEST., NUTRIENTS.
ROCKLAND, MA. 02370	DEMAND. O&G, PHENOLICS, PCBs	
HOOK IN DEVENS	FL HKS E07143, NJ DEP 39338, 1	NC DNR286, SC 88002, NH 204091-C.
WORK ID <u>DEVENS</u> TAKEN 5/29/96 AND 5/30/96	VERIFIED BY: & Joseph	Shoeles
TRANS	The state of the s	7)
TYPE SOIL	CENT WITHOUT	
P.O. #		
INVOICE under separate cover		
SAMPLE IDENTIFICATION	TEST CODES and NAME	S used on this workorder
01 1603-BASE	8260 PURGEABLE ORGANICS VOA	
02 1603-SIDE	827PAH 8270 PAH ONLY	
. 03 1604-STOCK	TPH IR TPH BY IR	
04 1604-SIDE		
05 1604-BASE		(v
06 1607-STOCK		
07 1607-BASE		
08 1607-SIDE		
09 1608-STOCK		
10 1608-BASE		
11 1608-SIDE	5200	CHISTRUCTION CO. INC.
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14 1609-SIDE	1*	
15 1610-STOCK		
16 1610-BASE	↑ n G E	GEIVEL
17 1610-SIDE		
18 1611-STOCK		
19 1611-BASE		
20 1611-SIDE		
21 1652-STOCK	*	
22 1652-BASE		
23 1652-SIDE		
24 1653-STOCK		
25 1653-BASE		
26 1653-SIDE		

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Received: 05/30/96

TOXIKON CORP.

REPORT

Work Order # 96-05-570

06/10/96 12:39:20

### SAMPLE IDENTIFICATION

27 1676-STOCK	
28 1676-BASE	•
29 1676-SIDE	
30 3596-STOCK	
31 3596-BASE	
32 3596-SIDE	
33 1468-BASE	
34 1468-SIDE	
35 2729-BASE	

TOXIKON CORP.

REPORT

Work Order # 96-05-570

Received: 05/30/96

Results by Sample

SAMPLE ID 3596-BASE	SAMPLE # 31 FRACTIONS: A
	Date & Time Collected <u>05/30/96 13:17:00</u> Category <u>SOIL</u>
гРН_IR64.2	
mg/kg DL=40.0	
SAMPLE ID 3596-SIDE	SAMPLE # 32 FRACTIONS: A
57.11 EE 27 27.75 CEPE	Date & Time Collected 05/30/96 13:17:00 Category SOIL
TPH_IR176	
mg/kg DL=40.0	*
SAMPLE ID 1468-BASE	SAMPLE # 33 FRACTIONS: A
	Date & Time Collected 05/30/96 13:25:00 Category SOIL
TPH IR 181	
mg/kg DL=40.0	
SAMPLE ID 1468-SIDE	SAMPLE # 34 FRACTIONS: A
	Date & Time Collected 05/30/96 13:25:00 Category SOIL
TPH_IR461	
mg/kg DL=40.0	
CAMBLE IN 2720 BACK	CAMBLE # 75 EDACTIONS. A
SAMPLE ID <u>2729-BASE</u>	SAMPLE # 35 FRACTIONS: A  Date & Time Collected 05/30/96 13:00:00 Category SOIL
23.	vale a time corrected 07/30/76 13.00.00 category SOIL
TPH_IR352	
mg/kg DL=40.0	

TOXIKON CORP.

REPORT

Work Order # 96-05-570

Received: 05/30/96

Test Methodology

TEST CODE 8260 NAME PURGEABLE ORGANICS VOA

EPA METHOD: 8260: Gas Chromatography/Mass Spectrometry for Volatile Organics.

Reference: Test Methods for Evaluating Solid Wastes: Physical/Chemical Methods.

EPA SW-846 (Third Edition) 1986. Office of Solid Waste, USEPA.

RESULTS ARE REPORTED ON A DRY WEIGHT BASIS.

TEST CODE 827PAH NAME 8270 PAH ONLY

EPA METHOD: 8270 GAS CHROMATOGRAPHY / MASS SPECTROMETRY FOR SEMIVOLATILE ORGAINCS; CAPILLARY COLUM TECHNIQUE. BASE NEUTRAL ONLY.

REFERENCE: TEST METHODS FOR EVALUATING SOLID WASTES: PHYSICAL/CHEMICAL METHODS.

EPA SW-846 (THIRD EDITION) 1986. OFFICE OF SOLID WASTE, USEPA.

RESULTS ARE REPORTED ON A DRY WEIGHT BASIS.

TEST CODE TPH IR NAME TPH BY IR

EPA METHOD: 418.1 for water sample.

Reference: Methods for Chemical Analysis of Water and Wastes.

EPA 600/4-79-020 (Revised, March 1983). EPA/EMSL, Cincinnati, OH.

EPA METHOD: 9071/9073

Reference: Test Methods for Evaluating Solid Waste: Physical/Chemical Methods.

EPA SW-846 (Third Edition) 1986. Office of Solid Waste, USEPA.

Telephone: (617) 275-3330 Fax: (617) 271-1136

# CHAIN OF CUSTODY RECORD

WORK ORDER #: 46 -05 -570

**DUE DATE** 

**ANALYSES** 

DMPANY:					SAMPLE TYPE CONTAINER TYPE ANALYSES																	
ODR	DDRESS: 415 UFW DIE					1. WASTEWATER P - PLASTIC																
	Reckler	· ( )	117	03	7.70			2. SOIL 3. SLUDG	·c	G - 0	GLASS				/							
NOF	E#: (617) 5	71-6232	FAX	#:(6	17)_	871-10	29	4, OIL	ic.		OA		/,	(f. K	/	/						
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SOJE	ECT ID/LOCATI	ои: <u></u> r	)FAE	NS				7. OTHER	(SPECIF	Υ /	PHU	13	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	A M	/	/ /	/ /	/ /	/ /	/ ./	/- /	/ /
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100	OF OURDIAENT	TIME:	٠		•			MPERATU	וחר	TIN	ΛE;	•		-			minant	s in th	ese sa	amples		
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TOXIKON CORP.

REPORT

Work Order # 96-05-571

Received: 05/30/96

06/10/96 12:41:30

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	415 VFW DRIVE		GGINS AVE		
10	ROCKLAND, MA. 02370		ORD, MA 01730		. VYa. Vi.
	617-871-8200 FAX: 871-8871	0251	MO, 11A 01130	CERTIE	ED BY
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	D & C CONSTRUCTION CO.	MA CERT # M-MA	064: TRACE MET	ALS, SULFATE, CYANII	NE DES EDEE
	415 VFW DRIVE			S, pH, THMs, VOC, F	
	ROCKLAND, MA. 02370			. CT DHS #PH-0563	
				NC DNR286, SC 8800	
WORK ID	DEVENS			1-10	
	5/29/96 AND 5/30/96	VERIFIED BY:	Dougl	in Sheely	
		CERT # M-MAO64	: /		
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02 208-3	ASE 827P	AH 8270 PAH ONL	Y		
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05 209-3					
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23 2688-					
24 2688					

TOXIKON CORP.

REPORT

Work Order # 96-05-571

Received: 05/30/96

Results by Sample

TOXIKON CORP.

REPORT

Work Order # 96-05-571

Received: 05/30/96

Results by Sample

SAMPLE ID 2729-SIDE

FRACTION 14A TEST CODE 827PAH NAME 8270 PAH ONLY Category SOIL

Date & Time Collected 05/30/96 13:00:00

BASE NEUTRAL EXTRACTABLES

	RESULT	LIMIT
Naphthalene	ND	1800
Acenaphthylene	ND	1800
Acenaphthene	ND	1800
Fluorene	ND	1800
Phenanthrene	4870	1800
Anthracene	ND	1800
Fluoranthene	10900	1800
Pyrene	3470	1800
Benzo (a) anthracene	2360	1800
Chrysene	2530	1800
Benzo(b)fluoranthene	1 - 2070	1800
Benzo(k)fluoranthene	ND	1800
Benzo(a)pyrene	.72390	1800
Indeno(1,2,3-cd)pyrene	ND	1800
Dibenz(a,h)anthracene	ND	1800
Benzo(g,h,i)perylene	ND	1800
2-Methylnaphthalene	ND	1800

Notes and Definitions for this Report:

UNITS:

ug/Kg

EXTRACTED:

07/10/96

DATE RUN:

07/11/96

ANALYST:

PAC

INSTRUMENT:

DIL. FACTOR:

ND = not detected at detection limit

Page 18

TOXIKON CORP.

REPORT

Work Order # 96-05-571

Received: 05/30/96

Results by Sample

SAMPLE ID 2729-STOCK

p-Isopropyltoluene

FRACTION 15A TEST CODE 8260 NAME PURGEABLE ORGANICS VOA

Date & Time Collected 05/30/96 13:00:00 Category SOIL

#### EPA 8260 PURGEABLE ORGANICS

*	RESULT LIMIT		RESULT LIMIT
Chloromethane	ND10	o-Xylene	ND 5.0
Bromomethane	ND10	m-Xylene	ND 5.0
Vinyl Chloride	ND 2.0	p-Xylene	ND 5.0
Chloroethane	<u>ND</u> 10	1,2-Dichlorobenzene	ND 5.0
Methylene Chloride	<u>ND</u> 10	1,3-Dichlorobenzene	ND _5.0
1,1-Dichloroethene	<u>ND</u> 5.0	1,4-Dichlorobenzene	<u>ND</u> 5.0
Trichlorofluoromethane	<u>ND</u> 10	Naphthalene	ND10
1,1-Dichloroethane	ND 5.0	n-Propylbenzene	ND 10
Trans-1,2-Dichloroethene	ND 5.0	Bromobenzene	ND 5.0
Chloroform	<u>ND</u> 5.0	Bromchloromethane	<u>ND</u> 5.0
1,2-Dichloroethane	ND 5.0	n-Butylbenzene	<u>ND</u> 10
1,1,1-Trichloroethane	ND 5.0	sec-Butylbenzene	<u>ND</u> 10
Carbon Tetrachloride	ND 5.0	tert-Butylbenzene	ND 10
Bromodichloromethane	ND 5.0	2-Chlorotoluene	ND 5.0
1,2-DichLoropropane	ND 5.0	4-Chlorotoluene	ND 5.0
Trichloroethene	ND 5.0	1,2-Dibromo-3-chloropropane	ND 5.0
Dibromochloromethane	ND _ 5.0	1,2-Dibromomethane	<u>ND</u> 5.0
1,1,2-Trichloroethane	ND 5.0	Dibromomethane	ND5.0
Benzene	<u>ND</u> 5.0	Dichlorodifluoromethane	ND10
1,1-Dichloropropene	ND 5.0	cis-1,2-Dichloroethene	ND 5.0
2-2-01chlorpropane	ND 5.0	1,3-Dichloropropane	ND 5.0
Bromoform	<u>ND</u> 5.0	1,1,1,2-Tetrachloroethane	ND 5.0
Hexachlorobutadiene	<u>ND</u> 10	1,2,3-Trichlorobenzene	ND 5.0
Isopropylbenzene	ND10	1,1,2,2-Tetrachloroethane	ND 5.0
Tetrachloroethene	ND 5.0	1,2,4-Trichlorobenzene	ND 5.0
Methyl tertiary butyl ether	ND 5.0	1,2,3-Trichloropropane	ND 5.0
Taluene	ND 5.0	1,2,4-Trimethylbenzene	<u>ND</u> 10
Chlorobenzene	ND 5.0	1,3,5-Trimethylbenzene	<u>ND 10</u>
Ethyl Benzene	<u>ND 5.0</u>		

DATE RUN	06/08/96
ANALYST	CMD
INSTRUMENT	G
DIL. FACTOR	
UNITS	ug/Kg
COMMENTS	

ND \_\_\_10

Page 19

TOXIKON CORP.

REPORT

Work Order # 96-05-571

Received: 05/30/96

Results by Sample

SAMPLE ID 2729-STOCK

FRACTION 15A TEST CODE 827PAH NAME 8270 PAH ONLY Date & Time Collected 05/30/96 13:00:00 Category SOIL

BASE	NEUTRAL	EXTRACTABLES

	RESULT	LIMIT
Naphthalene	ND	370
Acenaphthylene	ND	370
Acenaphthene	- <u>ND</u>	370
Fluorene	ND	370
Phenanthrene	818	370
Anthracene	ND	370
Fluoranthene	1180	370
Pyrene	1630	370
Benzo (a) anthracene	803	370
Chrysene	663	_ 370
Benzo(b)fluoranthene	527	370
Benzo(k)fluoranthene	1500	370
Benzo(a)pyrene	668	_370
Indeno(1,2,3-cd)pyrene	ND	370
Dibenz(a,h)anthracene	ND	370
Benzo(g,h,i)perylene	ND	_ 370
2-Methylnaphthalene	ND	370

Notes and Definitions for this Report:

UNITS:

ug/Kg

EXTRACTED:

06/06/96

DATE RUN:

06/06/96

ANALYST:

INSTRUMENT:

DIL. FACTOR:

1

ND = not detected at detection limit

FROM: TOXIKON

PHONE NO. : 6172757478

Jun. 10 1996 02:38PM P49

Page 30

TOXIKON COMP.

REPORT

Work Order # 96-05-571

Received: 05/30/96

Yest Methodology

TEST CODE ROSO NAME PURGEABLE ORGANICS VOA

EPA METHOD: 8260: Gas Chromatography/Mass Spectrometry for Volatile Organics.

Reference: Test Methods for Evaluating Solid Wastes: Physical/Chemical Methods.

EPA SW-846 (Third Edition) 1986. Office of Solid Waste, USEPA.

RESULTS ARE REPORTED ON A DRY WEIGHT BASIS.

TEST CODE 827PAH NAME 8270 PAH CMLY

EPA NETHOD: 8270 GAS CHRONATOGRAPHY / MASS SPECTRONETRY FOR SEMIVOLATILE

ORGAINCS; CAPILLARY COLUN TECHNIQUE. BASE NEUTRAL ONLY.

REFERENCE: TEST METHODS FOR EVALUATING SOLID WASTES: PHYSICAL/CHENICAL METHODS.

EPA SW-846 (THIRD EDITION) 1986. OFFICE OF SOLID WASTE, USEPA.

REBULTS ARE REPORTED ON A DRY WEIGHT BASIS.

TEST CODE THE LR HAME THE BY IR

EPA METHOD: 418.1 for water sample.

Reference: Methods for Chemical Analysis of Water and Wastes.

EPA 600/4-79-020 (Revised, March 1983). EPA/EMSL, Cincinnati, OK.

EPA METHOD: 9071/9073

Reference: Test Methods for Evaluating Solid Waste: Physical/Chemical Methods.

EPA SW-846 (Third Edition) 1986. Office of Solid Waste, USEPA.

### TUXKON

15 Wiggins Ave., Bedford, MA 01730 Telephone: (617) 275-3330

# CHAIN OF CUSTODY RECORD

WORK ORDER #: 10 -01 -571

DILE	DATE
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	Reckle								2. SOIL 3. SLUDGI	E	G - (	BEALS OA	/	/		/	1		/		/		//	/ /
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PRO	JECT ID/LOCAT	TION	: 1	EVI	EN.	5.			7. OTHER	NAME OF BUILDING	,	1	7 i		7						/ .	/	/ /	
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1.551140			AE:	-		•			-	1	TIN				-		Are th	nere an	y othe	I KNOW	wn or s amples	suspec	ted	
METHOD	OF SHIPMENT						COO	LER TEM	PERATU	RE				er.				listed N			s, 1st h	 Known		

## GeoLabs, Inc.

Environmental Laboratories
Phone: (617) 878-1346 Fax: (617) 871-7069

#### FINAL REPORT

PREPARED FOR:

Hydro-Science Associates

415 VFW Drive P.O. Box 552

Rockland, MA 02370

Att: Whitey Morris

PROJECT ID:

Devens

GEOLABS CLIENT #:

1317-95

SAMPLE NUMBER:

45706-45710

DATE PREPARED:

August 27, 1996

PREPARED BY:

Suzanne Pidgeon

APPROVED BY:

Jan Chen

Laboratory Director

Location: 400 Hingham Street

Rockland, MA 02370

Mailing Address:

96%

PO Box 254 Accept, MA 02018

GEOLABS, DIC. P.O. BOX 254 ACCORD, MA 02018 (617) 678-1346

CLIENT NAME:

RYDRO-SCIENCE

SAMPLE TYPE: COLLECTION DATE: SOIL 08/23/96

REC'D BY LAB: COLLECTED BY:

08/23/96 CLIENT

PROJECT ID:

REPORT DATE:

FORT DEVENS 08/27/96 NER 08/26/96

ANALYZED BY: EXTRACTION DATE:

08/26/96

DIGESTION DATE:

N/A

#### POLYMUCIEER ARCHATIC HYDROCARBONS EPA METROD 8270

SAMPLE	NUMBER:
SAMPLE	LOCATION:

45706 2729-BS

45707 2729~FS DETECTION LIMIT (µg/kg)

#### PARAMETER

#### RESULTS (µg/kg)

Acenaphthene	ND	ND	270
Acenaphthylene	ND	ND	230
Anthracene	ND	MD	270
Benzo (a) Anthracene	ND	ND	300
Benzo (b) Fluoranthene	ND	ND	230
Benzo (k) Fluoranthene	ND	ND	300
Benzo (g, h, i) Perylene	ND	ND	130
Benzo (a) Pyrene	ND	ND	200
Chrysene	ND	ND	270
Dibenso (a, h) Anthracene	ND	ND	130
Fluoranthene	280	NTD	170
Fluorene	ND	ND	200
Indeno(1,2,3-CD)Pyrene	ND	ND	170
2-Methylnaphthalene	ND	ND	170
Naphthalene	ND	ND	230
Phenanthrene	ND	ND	230
Pyrene	ND	MD	230

#### ND - NOT DETECTED

#### Mathod Reference:

Polynuclear Aromatic Hydrocarbons 8270 (1)

<sup>1)</sup> US EPA Test Methods for Evaluating Solid Waste, Physical/Chemical Methods, SW-846.

GEOLARS, INC. P.O. BOX 254 ACCORD, MA 02018 (617) 878-1346

CLIENT NAME:

BYDRO-SCIENCE

SAMPLE TYPE: COLLECTION DATE:

SOIL 08/23/96

REC'D BY LAB: COLLECTED BY:

08/23/96 CLIENT

PROJECT ID:

REPORT DATE:

ANALYZED BY:

FORT DEVENS 08/27/96 NER 08/26/96

08/26/96

EXTRACTION DATE: DIGESTION DATE: N/A

#### POLINUCLEAR AROMATIC HYDROCARBONS EPA METROD 8270

SAMPLE NUMBER: SAMPLE LOCATION:	45708 2729-RS	45709 2729-LS	DETECTION LIMIT (µg/kg)
PARAMETER			
	resu:		
	(h <b>a</b> /)	tg)	
icenaphthene	ND	ND	270
cenaphthylene	ND	ND	230
nthracens	ND	ND	270
lenso (a) Anthracene	ND	ND	300
Senzo (b) Fluoranthene	ND	ND	230
lenzo (k) Fluoranthene	ND	ND	300
Senzo (g, h, i) Perylene	ND	ND	130
enzo (a) Pyrene	ND	ND	200
hrysene	ND	ND	270
ibenzo (a, h) Anthracene	ND	ND	130
luoranthene	ND	ND	170
luorene	ND	ND	200
Indeno (1,2,3-CD) Pyrene	ND	ND	170
-Methylnaphthalene	ND	ND	170
aphthalene	ND	ND	230
henanthrene	ND	ND	230
yrana	3470	ND	230

#### ND - NOT DETECTED

#### Method Reference:

Polynuclear Aromatic Hydrocarbons 8270 (1)

1) US EPA Test Methods for Evaluating Solid Waste, Physical/Chemical Methods, SW-846.

GEOLABS, INC. P.O. BOX 254 ACCORD, MA 02018 (617) 878-1346

#### POLYNUCLEAR AROMATIC HYDROCARBONS EPA METHOD 8270

CLIENT NAME:

HYDRO-SCIENCE

SOIL.

SAMPLE TYPE: COLLECTION DATE:

08/09/96

REC'D BY LAB: COLLECTED BY:

08/13/96 CLIENT

PROJECT ID:

REPORT DATE:

ANALYZED BY:

08/15/96 NER 08/14/96

EXTRACTION DATE: 08/14/96

**DEVENS** 

DIGESTION DATE:

N/A

SAMPLE NUMBER:

SAMPLE LOCATION:

45316 2729-BASE

PARAMETER	RESULT	DETECTION LIMIT	
ă .	(µg/kg)	(µg/kg)	
Acenaphthene	ND	270	
Acenaphthylene	ND	230	
Anthracene	ND	270	
Benzo (a) Anthracene	602	300	
Benzo (b) Fluoranthene	445	230	
Benzo (k) Fluoranthene	434	300	
Benzo (g, h, i) Perylene	545	130	
Banzo (a) Pyrene	440	200	
Chrysene	457	270	
Dibenzo(a, h) Anthracene	322	130	
Fluoranthene	1150	170	
Fluorene	ND	200	
Indeno(1,2,3-CD)Pyrene	552	170	
2-Methylnaphthalene	ND	170	
Naphthalene	ND	230	
Phenanthrene	685	230	
Pyrene	1010	230	1

ND = NOT DETECTED

Method Reference:

Polynuclear Aromatic Hydrocarbons 8270 (1)

1) US EPA Test Methods for Evaluating Solid Waste, Physical/Chemical Methods, SW-846.

GEOLABS, INC. P.O. BOX 254 ACCORD, MA 02018

#### LIMITATIONS & EXCLUSIONS

All the professional opinions presented in this report are based solely on the scope of work conducted and sources referred to in our report. The data presented by GeoLabs in this report was collected and analyzed using generally accepted industry methods and practices at the time the report was generated. This report represents the conditions, locations and materials that were observed at the time the work was conducted. No inferences regarding other conditions, locations or materials, at a later or earlier time may be made based on the contents of the report. No other warranty, express or implied is made.

This report was prepared for the sole use of our client. Portions of the report may not be used independent of the entire report.

All analyses were performed within required holding times, in accordance with EPA protocols and using accepted QA/QC procedures. The information contained in this report is, to the best of my knowledge, accurate and complete.

OMPREY MERCE:	Hydro Seiere	Project Number		12 (12)	н		1			EN S		la i	Date Received in Lab:	Date Date:	
onpany Address:	The second section is a second section of the second section of the second section is a second section of the second section of the second section sec	• • • • • • • • • • • • • • • • • • •	Phone b	, n= - (en		n <del>e</del> ne ber			ect Mas	H	y morr	IS.	Alpha Job Rusher: (1	ub me only).	n Ti
ALPHA Lab#- (Latus Only)	Sample I.D.	Orbane Codes: P= Plante V= W C= Cube G= G A = Arrian Class B= Beside Cone Container (number/ty)	Ilrix / Source	T	Nitric Post	opala U	inere	FF	San	npling Time	WW = Horstoring L = Lake/Pond R = Stare Stare	(Choesen J≐n m S≡G	smoff O = Quidati \ Swort E = Effuera D	W= Well LF=L V= Denking White B= Bonness Gedin	•
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TOTAL P.07 P.07

Form No. QOP/06-03

# APPENDIX D COMPACTION TESTS



Briggs Associates 400 Hingham Street Rockland, MA 02370

A Tundra Corporation Company

SOILS INSPECTION"

PROJECT Fort Devens, By in

PROJECT #: 60904

DATE: 7-25-96

INSPECTOR: Jour 1000

			V
EMP.#: 236	REPORT #:	CODE:	# of PAGES:
ARR. TIME: 800	JOB HOURS:	T.T.:	MILEAGE:
TEMP.: 16 L	WIND: H D	HUMID.: 6 L	SUNDY CLOUDY

Briggs Associates field engineer took in place density tests. In place density was determined in accordance with ASTM D-2922 and D-3017 for comparison to the laboratory determined maximum density at optimum moisture in accordance with ASTM D-1557, Method C.

LOCATION: Buellings 1411, 1437 and 1655 and 2729

REMARKS: All tests taken to ASTM Specs

FREQUENCY OF COMPACTION TESTS: 1 every 2 1, 4+5

TECHNICIAN:

HOBERT A. BONICA,



# Briggs Associates 400 Hingham Street Rockland, MA 02370

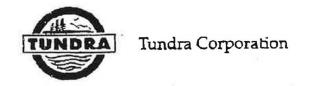
### SOILS COMPACTION REPORT

PROJECT: Fort Deven, Ayer

PROJECT #: 60964

DATE: 9-25-96

	A lun	шта Согро	ration Compa	ny	INSPI	ECTOR:	Tolan	1/2	21	
EMP.#: 236 REPORT #:			CODE:		T	LAB#:				
ARR TIME	800	JOB HC	URS:		T.T.:		M	MILEAGE:		
TEMP	:: H) L	N	IND: H (	D F	TUMIC	).(H > L			SUNINY	CLOUDY
MAXIMI	JN DRY DEN	SITY: /3	0-8 11 11	8.3						
OPTIMU	M MOISTUR	E CON	TENT: 8.3	119 =						
METHOI	OF TESTIN	G (CHE	CK ONE): S	SAND C	ONE:	U NU	CLEA	RI	ENSOME	TER:
Test			Estimated		1_	Test	Min		Moist.	Optimum
No:	Location		Area Tested	Elevation Death		sults %	Con		Content %	Moisture %
Bu	1deg 1411		11.57	6++	95.0	7.	95.		10.4	8.3
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Tests no	t meeting re	quirem	ents: was	£	V	Vho not	ified:	Bol	(Di ( (c	sust)
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		14	1			THE CAN	D 17.04		[\]/{//}	
			100		•	TECH	OVE	D:R	OBERTA	BONICA,



D & C Construction / Ft. Devens Briggs # 60904 Tested: 6-5-96

1.	Sample No. Kectin Derevel	Description	Source
	Sample No. Keating Grave 1 M-956 Srzitchwig.	Gravelly Sand with silt	Site

2. Sieve Analysis (ASTM C 136, and ASTM C 117)

Sieve Size	Results	Specs.
	(% Passing by WL)	
4"	100	
3"	100	
2-1/2"	100	
2"	100	
1-1/2"	86	
T"	86	*:
3/4"	75	
1/2"	71	
3/8"	67	
#4	55	
#10	45	
#20	36	
#40	30	
#80	23	
#100	20	
#200	17.8	

- 3. No specifications provided.
- 4. Proctor Density (four point procedure ASTM D 1557 Method C, and ASTM D 4718).

	Results
Maximum Dry Unit Weight (pcf)	130.8
Optimum Moisture Content (%)	8.3



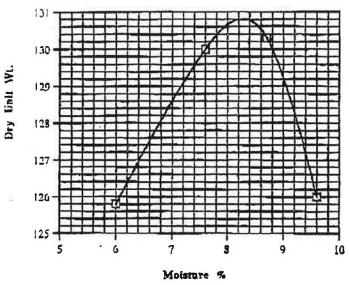
Project: D & C Construction / Ft. Devens

Sample no.

M-956

Date: 6/5/96

### Proctor



Max. Dry Density 130.8 pcf

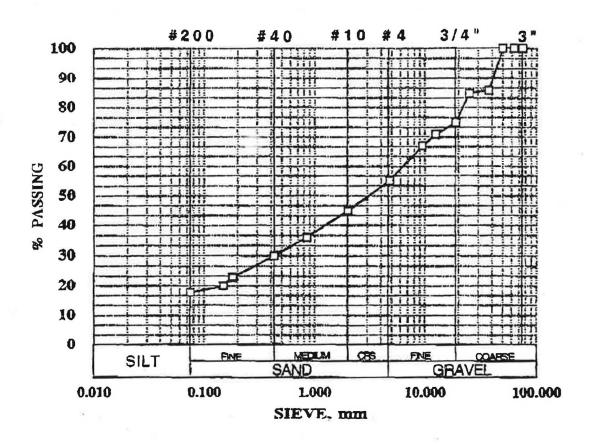
> Optimum Moisture 8.3 %



Project: D & C Construction / Ft. Devens

Sample No. M-956 Date: 6/3/96

### SIEVE





D & C Construction / Ft. Devens

Briggs # 60904 Tested: 6-5-96

1. Sample No. M-957

Description
Gravelly Sand

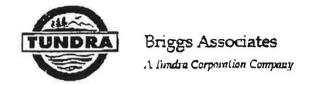
Source

2. Sieve Analysis {ASTM C 136, and ASTM C 117}

Sicve Size	Results	Specs
	(% Passing by Wt.)	
4"	100	
3"	100	
2-1/2"	100	
2"	100	
1-1/2"	001	
1"	100	
3/4"	98	
1/2"	96	
3/8"	95	
#4	90	
#10	85	
#20	70	
#40	38	
#80	11	
#100	9	
#200	5,4	

- 3. No specifications provided.
- 4. Proctor Density {four point procedure ASTM D 1557 Method C, and ASTM D 4718}.

	Result
Maximum Dry Unit Weight (pcf)	118.3
Optimum Moisture Content (%)	9.5



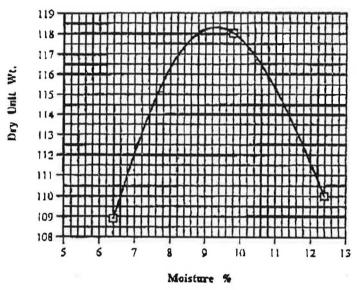
Project: D & C Construction / Ft. Devens

Sample no.

M-957

Date: 6/5/96

#### **Proctor**



Max. Dry Density 118.3 pcf

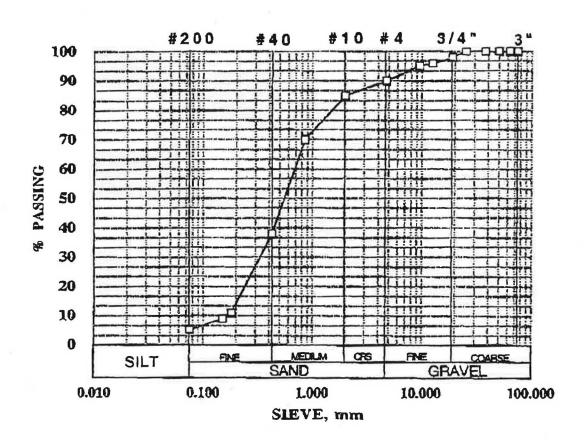
Optimum Moisture 9.5 %



Project: D & C Construction / Ft. Devens

Sample No. M-957 Date: 6/3/96

### SIEVE



### APPENDIX E BILL OF LADING



# Massachusetts Department of Environmental Protection Bureau of Waste Site Cleanup

BWSC-012A

Release Tracking Number

	7 -		_
2	1-1	11210	
	1.1		

BILL OF LADING (pursuant to 310 CMR 40.0030)

A. LOCATION OF SITE OR DISPOSAL SITE WHERE REMEDIATIO Release Name (optional):	N WASTE WAS GENERATED:
Street:	togation Aid Bldgs. in 200, 1400, 1600
City/Town: Devens	Zip Code: 01433 - 2600, 2700
Date/Period of Generation: $\frac{5}{20}$ / $\frac{20}{96}$ to $\frac{7}{12}$ / $\frac{96}{96}$	and 3500-blocks
Additional Release Tracking Numbers Associated with this Bill of Lading:	
"Note: If this Bill of Lading is the result of a Limited Removal Acti Number is not ne	
B. PERSON CONDUCTING RESPONSE ACTION ASSOCIATED WIT	to a Control of the c
Name of Organization: Devens Commerce Center	
Name of Contact: Ronald J. Ostrowski	Title: Env. Mgr.
Street: 43 Buena Vista St., P-12	
City/Town: Devens State: M	.A Zip Code: 0 1 4 3 3
Telephone: <u>508 - 772 - 6340</u> Ext. <u>303</u>	
C. RELATIONSHIP TO RELEASE OR THREAT OF RELEASE OF PASSOCIATED WITH BILL OF LADING: (check one/specify)  RP Specify (circle one): Owner Operator Generator Transpo	PERSON CONDUCTING RESPONSE ACTION  refer Other RP:
	orter Other PRP:
Fiduciary/Secured Lender	
Agency/Public Utility on a Right of Way	
Other Person:	
If an owner and/or operator is not conducting the response action associated wi	th the Bill of Lading provide on an attachment the name contact
person, address and telephone number, including any area code and extension	
D. TO ANGO OTTO COMMON CARDIED INFORMATION.	
D. TRANSPORTER/COMMON CARRIER INFORMATION:  Transporter/Common Carrier Name: Carney Brothers Truc!	eina
Contact Person: Jimmy Casey	
Street: 1958 Broadway	Title: General Manager
City/Town: Raynham State: M	^ 7:- 0-4 0 2 7 6 7
Telephone: 508 -824 - 4071 Ext.	A Zip Code: 02/0/ -
Telephone: 300 024 407:1 Ext.	
E. RECEIVING FACILITY/TEMPORARY STORAGE LOCATION:	
Operator/Facility Name: Laidlaw Waste Systems	
Contact Person: Angelique Cosgrove	Tite: Sales Coord.
Street: 14 Belcher St.	
City/Town: Plainville State: M	A ZIp Code: 02762 -
Telephone: 508 -699 - 2267 Ext.	
Type of Facility: Asphalt Batch/Cold Mix X Landfill/Disposa	I Incinerator
(check one) Asphalt Batch/Hot Mix X Landfill/Daily Co	
Thermal Processing Landfill/Structur	
E 6	Other:
Division of Hazardous  Waste/Class A Permit #: 15095  Division of Solid Waste Management Permit #: 1	
Actual/Anticipated Period of Temporary Storage (specify dates if applicable):	/ / to / /
Reason for Temporary Storage (if applicable): N / A	



### Massachusetts Department of Environmental Protection Bureau of Waste Site Cleanup

BWSC-012A

	Release Tracking Number
2 -	11210

BILL OF LADING (pursuant to 310 CMR 40.0030)

E. RECEIVING FACILITY/TEMPORARY STORAGE LOCATION (continue	ed):
Temporary Storage Address:	
Street: N/A	
City/Town: State:	Zip Code: =
F. DESCRIPTION OF REMEDIATION WASTE:	
(check all that apply)	
Contaminated Media (circle all that apply): (Soil) Groundwater Surface	Water Other:
Contaminated Debris (circle all that apply): Demolition/Construction Waste	Vegetation/Organic Materials
Inorganic Absorbant Materials Other:	
Non-hazardous Uncontainerized Waste (circle all that apply): Non-aqueous Ph	hase Liquid Other:
Non-hazardous Containerized Waste (circle all that apply): Tank Bottoms/Slude	ges Containers Drums
Engineered Impoundments Other:	
	2 Oil #4 Oil Waste Oil
Kerosene Jet Fuel Other:	Other:
Contaminant Source (check one/specify): Transportation Accident	
Response Action Associated with Bill of Lading (circle one): Immediate Response Action (Associated Abatement Measure Immediate Response Action Associated Abatement Measure Immediate Response Action Associated Abatement Measure Immediate Response Action (Associated Abatement Measure Immediate Response Action Associated Abatement Measure Immediate Response Action (Associated Abatement Measure Immediate Response	
SERVICE STATE OF THE SERVICE STATE STAT	
Other (specify):	
☐ Site History Information ☐ Sampling and Analytical Methods and Procedures	s 🔀 Laboratory Data 🔲 Field Screening Data
If supporting documentation is not appended, provide an attachment stating the date a was previously submitted to DEP.	
G. LICENSED SITE PROFESSIONAL (LSP) OPINION:	
Name of Organization: S E A Consultants, Inc.	
LSP Name:William J. Mallio	
Telephone: 617 -498 - 4635 Ext.	Tillo.
I attest that I have personally examined and am familiar with the information contained and all documents accompanying this submittal, and in my professional opinion and judy (i) the standard of care in 309 CMR 4.02(1), (ii) the applicable provisions of 309 CMR 4.02(2) and (3), and (iii) the provisions of 309 CMR 4.03(5), to the best of my knowledge, information and belief, the assessment actions undertake Waste which is (are) the subject of this submittal for acceptance at the facility identified applicable provisions of 310 CMR 40.0000, and such facility is permitted to accept Ren characteristics described in this submittal. I am aware that significant penalties may repossible fines and imprisonment, if I submit information which I know to be false, inaccinate and imprisonment.	dgment based upon application of en to characterize the Remediation d in this submittal comply with the mediation Waste having the esult, including, but not limited to,
Signature: William Mallio  Date: 7/25/96  License Number: 4966	Seal: WILLIAM MALLIO No. 4968
	STEEN STEEN



#### Massachusetts Department of Environmental Protection Bureau of Waste Site Cleanup

BWSC-012A

Release Tracking Number:

2 -	11210	

BILL OF LADING (pursuant to 310 CMR 40.0030)

CERTIFICATION OF PERSON CONDUCTING RESPONS	E ACTION ASSOCIATED WITH THIS BILL OF LADING:
--	---

I certify under penalties of law that I have personally examined and am familiar with the information contained in this submittal, including any and all documents accompanying this certification, and that, based on my inquiry of those individuals immediately responsible for obtaining the information, the material information contained herein is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties, including, but not limited to, possible fines and imprisonment, for wilfully submitting false, inaccurate, or incomplete information.

Signature: Ronald & Ostronsh Date: 7/25/96

Name of Person (print): Ronald J. Ostrowski

# Enclosure to Bill of Lading (BWSC -12A) SUMMARY OF LABORATORY ANALYTICAL RESULTS Release Tracking No. 2-11210

Analyte	Range/Peak of Lab Results
ТРН	2430 ppm
PCB's	Not Detected
Total Arsenic	12.1
Total Cadmium	0.55
Total Chromium	7.66
Total Lead	23.4
Total Mercury	0.066
Total PAH's	< 100 ppm
Listed/Characteristic Hazardous Waste (TCLP)	None
Total VOC's	< 10 ppm

Note: ppm = parts per million

Massachusetts Department of Environm	nental Protection	BWSC-012B
Bureau of Waste Site Cleanup Fact Dev.	120313	Release Tracking Number:
BILL OF LADING (pursuant to 310 CMR 40.0030)	DIC DI	
LOG SHEET _ OF _3	9-11	2 10
I. LOAD INFORMATION:  LOAD 1: Signature of Transporter Representative:  108518	Receiving Facility Composary	Storage Representative:
Date of Shipment:    1	Pate of Receipt: 96	Time of Receipt:
Truck/Tractor Registration:  Trailer Registration (if any);	Load Size (cu. yas tons):	(circle one)(am/cm
LOAD 2 Signature of Transporter Representatives 108514	Receiving Facility/Temporary	Storage Representative:
date of Shipment: Shipment Shipment (circle one) amom	Date it Receipt 96	Time of Receipt:
Truck/Tractor Registration: Trailer Registration (if any):  22520/	Load Size (cu. yds Anns)	(circle one)ambm
LOAD 3: Signature of Transporter Representative: 108 515	Receipting Facility Temporary S	Storage Representative:
Date of Shipment: Time of Shipment: (circle one) arm/pm	Date of Receipt:	Time of Receipt:
Truck/Tractor Registration: Trailer Registration (if any):	Load Size (pu. yds./togs):	(circle one (am)om
LOAD 4: Signature of Transporter Representative: 18512	Receiving Facility/Temberary S	
Date of Shipment: Time of Shipment: (circle one) arrivom	Date of Receipt:	Time of Receipt:
Truck/Tractor Registration: Trailer Registration (if any):	Load Size (cu. yds./jons)	(circle one) amom
LOAD 5: Signature of Transporter Representative: 108521	Received Facility/Tempolary S	torage Representative:
Date of Shipment:    Circle one   Import	SILY 196	Time of Receipt:
Truck/Tractor Registration: Trailer Registration (if any):	Load Size (cy. yds. pops):	(circle one) amcm
LOAD S. Signature of Transporter Representative: 108620	Receiving acility/Temporary St	orage Representative:
Date of Shipment: Time of Shipment: OC (circle one arrigin	Date of Mecenor	Time of Peceuso 3
Truck/Tractor Registration: Trailer Registration (if any):	Load Size (du. yds. fons)	(circle one an iom
LOAD 7: 13 ignature of Transporter Representative: 108(25	Receiving Facility/empotary St	orage Representative:
Date of Shipment: Time of Shipment: (circle one)(and one)	Dank of Flecount:	Time of Receipt:
Truck/Tractor Registration: Trailer Registration (if any):	Load Size (cu. yds (tons):	(circle one) any org
J. LOG SHEET VOLUME INFORMATION:  Total Volume	e This Page (cu.yds./(ons):	226.42
Total Carri	ed Forward (cu.yds./ons):	22/1/2
Total Carried Forward and	d This Page(cu.yds./fons):	226.42
Revised 10/1/93 This form is printed on recycled paper.		Page 1 of 1

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Massachusetts Department of Environm Bureau of Waste Site Cleanup	ental Protection	BWSC-0129
BILL OF LADING (pursuant to 310 CMR 40.0030) LOG SHEET OF 3	, 2-11	Resease Fracting Number
L LOAD INFORMATION:  LOAD 1: Signature of Transporter Representative:  108639	Receiving Facility/Teropoyary	Slorage Representativ
Date of Shipment: Time of Shipment: (circle one) approximation:  Trailer Registration: Trailer Registration (if any):	Date of Receipt:	(curcia one carpicim
LOAD 2: Signature of Transporter Représentative: 108647	Load Size (cuyyds(tons))     Receiving Facility Tegoporary	Storage Representativ
Truck/Tractor Registration:  Truck/Tractor Registration:  Truck/Tractor Registration:  Truck/Tractor Registration:	Date of Recourse Gl	Time of Receipt:
DOAD 3: Scharting of Transforter Pergresentative: 18657	Load Size (cy. yde./tons):	35.95
Date of Shipment: Time of Shipment: 2/ (circle one) arotem	Date of Receipt	Time of Receipt:
Trucker factor Registration: Trailer Registration (if any): 27794 MA  LOAD 4: Signature of Transporter Representative:  1)8719	Load Size (cy. yds,/tons):	(circle one) am/pm
Plate of Shipment: Time of Shipment: (circle one) and one	Date of Receipt 96	Time of Receipts
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Date of Shipment:    Solution   Coircle one   any pm	Dayle of Receipt:	Time of Receipt:
Truck/Tractor Registration:  Trailer Registration (if any):  LOAD 6: Signess of Transporter/Representative:	Load Size (cu. yds. fons):	(circle one) amon
Date of Shipment: Time of Shipment:  Solution (circle one) and pro	Date of Recept:	Time of Receipt:
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	e This Page (cu.yds./tons):	236.94
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# Massachusetts Department of Environmental Protection Bureau of Waste Site Cleanup

BILL OF LADING (pursuant to 310 CMR 40.0030) LOG SHEET 3 OF 3

_	Helease Fracting Number:
2 -	11210

I. LOAD INFORMATION:  LOAD 1: Signature of Transporter Representative:  Part of Shipment: Time of Shipment:  (circle one) am/pm	Receiving Facility/Temporary Storage Representative  Date of Receipt:  Time of Receipt:
Truck/Tractor Registration:  Trailer Registration (if any):  196.535 mA  7794 mA	(gircle one) amom) Load Size (cu. yds fions):
LOAD 2: Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative
Date of Shipment: Time of Shipment: (circle one) am/pm Truck/Tractor Registration: Trailer Registration (if any):	Date of Receipt:  Time of Receipt:  (circle one) am/pm  Load Size (cu. yds./tons):
LOAD 3: Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
Date of Shipment:  Time of Shipment:  (circle one) am/pm  Truck/Tractor Registration:  Trailer Registration (if any):	Date of Receipt:  Time of Receipt:  (circle one) am/pm  Load Size (cu. yds_/tons):
LOAD 4: Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
Date of Shipment: Time of Shipment: (circle one) am/pm Truck/Tractor Registration: Trailer Registration (if any):	Date of Receipt:  Time of Receipt:  (circle one) arm/pm  Load Size (cu. yds_ftons):
LOAD 5: Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
Tate of Shipment: Time of Shipment: (circle one) am/pm Truck/Tractor Registration: Trailer Registration (if any):	Date of Receipt: Time of Receipt:  (circle one) am/pm  Load Size (cu. yds./tons):
LOAD 6: Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
Date of Shipment: Time of Shipment: (circle one) am/pm Truck/Tractor Registration: Trailer Registration (if any):	Date of Receipt:  Time of Receipt:  (circle one) am/pm  Load Size (cu. yds./tons):
LOAD 7: Signature of Transporter Representative:	Receiving Facility/Temporary Storage Representative:
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## Massachusetts Department of Environmental Protection BWSC-0128

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Release Tracking Number:

Bureau of Waste Site Cleanup	Fort Der.
BILL OF LADING (pursuant to 310 LOG SHEET OF	
LOG SHEETOF	Ø.

2-11210

	<u> </u>		
I. LOAD INFORMATIONA LOAD Signature of Transporter Representative:	14	Receiving Facility of africorary	Storage Representative:
Date of Shipment:  S/15/96  Time of Shipment:  (circle one am/pm		Date of Receipt:	Time of Receipt
Truck/Tractor Registration: Trailer Registration (if any):		Load Size (cu/yas./ons)	(circle one) amom
LOAD 2: Signature of Transporter Representative: 1087	1841	Receiving Pacility/Tempolary	Storage Representative:
Date of Shipment:  S / 15 / 76  Time of Shipment:  (circle one) am/pm	1	Dare of Receipt:	Time of Receipt:
Truck/Tractor Registration:  Trailer Registration (if any):		Load Size (cu. yds./tons):	(circle one (amrom
LOAD 3: Signature of ransporter Representative: /08 8	898	Receiving Facility/Tendorary	Storage Representative:
Date of Shipment: Time of Shipment: (circle one) ampro		Days of Receipt:	Time of Receipt:
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Truck/Tractor Registration: Trailer Registration (if any):		Load Size (cu. yds./tons):	(circle one) am/pm
LOAD 5: Signature of Transporter Representative:		Receiving Facility/Temporary S	Storage Representative:
Date of Shipment: Time of Shipment: (circle one) am/pm	į	Date of Receipt:	Time of Receipt
Truck/Tractor Registration: Trailer Registration (if any):		.oad Size (cu. yds./tons):	(circle one) am/pm
LOAD 6: Signature of Transporter Representative:		Receiving Facility/Temporary S	torage Representative:
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J. LOG SHEET VOLUME INFORMATION:	Total Volume T	his Page (cu.yds.)	114,82
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Total Carned	Forward and	This Page(cu.yds./tons):	114.82



# Massachusetts Department of Environmental Protection Bureau of Waste Site Cleanup

BWSC-012C

Release Tracking Number:

2-11210

BILL OF LADING (pursuant to 310 CMR 40.0030)
SUMMARY SHEET \_\_\_\_\_ OF \_\_\_\_

K. SUMMARY OF SHIPMENTS:			
DATE OF SHIPMENT:	DATE OF RECEIPT:	NUMBER OF LOADS SHIPPED:	DAILY VOLUME SHIPPED (CU. YDS,/TONS):
8-14-96	8-14-96	IS	503.15
8-15-96	8-15-96	3	114.82
			,
,			
SUMMARY S	SHEET TOTAL SHIPPED:	18	617.97
BILL OF LADING TOTALS	1	<u> </u>	VII.II



# Massachusetts Department of Environmental Protection BWSC-012C Bureau of Waste Site Cleanup

BILL OF LADING (pursuant to 310 CMR 40,0030) SUMMARY SHEET

1900 St. Petersteine Avis, Paller	
L ACKNOWLEDGEMENT OF RECEIPT OF REMEDIATION WAS TEMPORARY STORAGE LOCATION:  Receiving Facility/Temporary Location Representative (print): Anglique OSgrove  Signature:	Title: Sale Coordington  Date: 8/15/96
M. ACKNOWLEDGEMENT OF SHIPMENT AND RECEIPT OF REM CONDUCTING RESPONSE ACTION ASSOCIATED WITH THIS I certify under penalties of law that I have personally examined and am familiar with the and all documents accompanying this cardification, and that, based on my inquiry of the information, the material information contained herein is, to the best of my knowled that there are significant penalties, including, but not limited to, possible fines and in incomplete information.  Signature:  Name of Person (print):  Tames E Armsmort  Som Ron GSTNO WSKI	the information contained in this submittal, including any fitnose individuals immediately responsible for obtaining age and belief, true, accurate and complete. I am aware



# Massachusetts Department of Environmental Protection

BWSC-012A

	Bureau of Waste Site Cleanup	Release Tracking Number	
E P	BILL OF LADING (pursuant to 310 CMR 40.0030)	2-11210	

A LOCATION OF SITE OR DISPOSAL SITE WHERE REMEDIATION WASTE Release Name (optional):	WAS GENERATED:
	Aid: Buildings 1437 and 2729
City/Town: Devens Zip Code	01433
Date/Period of Generation: 8 / 23 / 96 to 8 / 23 / 96	
Additional Release Tracking Numbers Associated with this Bill of Lading:	
"Note: If this Bill of Lading is the result of a Limited Removal Action (LRA) to Number is not needed,	uken phor to mostication, a Heliease Tracking
B. PERSON CONDUCTING RESPONSE ACTION ASSOCIATED WITH BILL O	OF LADING:
Name of Organization: Devens Communice Center	
Name of Contact Ronald J. Ostrowski	de: Env. Mgr.
Sreet 43 Buena Vista St., P-12	
Cby/Town: Devens State: MA	Zip Code: 01433 -
Telephone: 508 - 772 - 6340 Ext 303	
C. RELATIONSHIP TO RELEASE OR THREAT OF RELEASE OF PERSON ( ASSOCIATED WITH BILL OF LADING: (check one/specify)	CONDUCTING RESPONSE ACTION
Printed	RP;
PRP Specify (circle one): Owner Operator Generator Transporter Oth	er PRP.
Fiduciary/Secured Lender	
Agency/Public Utility on a Right of Way	* *
Other Person:	
If an owner and/or operator is not conducting the response action associated with the Bill or person, address and telephone number, including any area code and exension, for each,	
D. TRANSPORTER/COMMON CARRIER INFORMATION:	
Transporter/Common Carrier Name: Carney Brothers Trucking	
Contact Person:	me: General Manager
Street: 1958 Broadway	
City/Town: Raynham State: MA	Zip Ç∞e: <u>02767</u> -
Telephone: 508 - 824 - 4071 Ext	
E. RECEIVING FACILITY/TEMPORARY STORAGE LOCATION:	
Operator/Facility Name: Laidlaw Waste Systems	*
Contact Person: Angelique Cosgrove Tit	e: Sale's Coord./
Sweet 14 Belcher St.	4.
City/Town: Plainville State: MA	Zp Code: 02762 -
Telephone: 508 - 6990 - 2267 Ext	
Type of Facility: Landill/Disposal	Incinerator
(check one) Landfill/Daily Cover	Temporary
I Inential Processing Landfill/Structural Fill	Storage
Division of Hazardous	Other;
Waste Class A Permit #: 15095	EPA Identification #: MAD 108010729
Actual/Anticipated Period of Temporary Storage (specify dates if applicable):	
Reason for Temporary Storage (il applicable):	
tomposail om ego (n approane).	

TO



# Massachusetts Department of Environmental Protection Bureau of Waste Site Cleanup

BWSC-012A

Reinster Tracking Names:

11210 BILL OF LADING (pursuant to \$10 CMR 40.0030)

E RECEIVING FACILITY/TEMPORARY STORAGE	LOCATION (continued):		
Temporary Storage Address:	*		
Street: N/A			
City/Town:	State:	Zip Cose:	
F. DESCRIPTION OF REMEDIATION WASTE:			
(check all that apply)	Groundwater Surface Water	er <i>Opiei:</i>	
The state of the s		Vegetador/Organic Materials	*
_			
Non-hezardous Uncontainerized Waste (circle all that a	ipply): Non-aqueous Phase	Liquid Other:	
Non-hazardous Containerized Waste (circle all that app			
Engineered Impoundments Other:			
Type of Contamination (circle all that apply): Gasoline	Diesel Fuel #2 Oil		Waste Oil
Esamated Volume of Materials: Cubic Yards:	Tons;	Other:	
Contaminant Source (check one/specify): Transportable	on Accidem 🔀 Underground	Storage Tank Other;	
Response Action Associated with Bill of Lading (circle one);	Immediate Response A	Release Abatemer	nt Measure
Utility-Related Abstement Measure	Limited Removal Action (LRA	Comprehensive Responsive	onse Action
Other (specify):			4
Remediation Waste Characterization Support Documentation	n attached:		
Size History Information Sampling and Analytica	al Methods and Procedures	Laboratory Data  Field	Screening Data
If supporting documentation is not eppended, provide an art	tachment stating the date and i	in connection with what document	מוכה וחוסות מוכם
was previously submitted to DEP.			
G. LICENSED SITE PROFESSIONAL (LSP) OPINIO	ON:		
Name of Organization: S E A Consultant			
LSP Name: William J. Mallio		Principal Scie	nrier
Telephone: 617 - 498 - 4635 Ex			21.1.3.1
1		rom to the first t	
I allest that I have personally examined and am familiar with and all documents accompanying this submittal, and in my p			
(i) the standard of care in 309 CMR 4 02(1)	Control of the second s		
(ii) the applicable provisions of 309 CMR 4.02(2) and (iii) the provisions of 309 CMR 4.03(5).	- 10), <b>4</b> 110		
to the best of my knowledge, information and belief, the asse Waste which is (are) the subject of this submittal for accepta	nce at the facility identified in th	is submitted comply with the	141
applicable provisions of 310 CMR 40,0000, and such facility characteristics described in this submittal. I am aware trut s	is permitted to accept Remedia	tion Waste having the including, but not limited to.	
possible fines and imprisonment, if I submit information whice	h I know to be false, inaccurate	or materially incomplete.	
Signature: William & Mallio		A STATE OF THE STA	<b>k</b> _
Signature: William & Walleto	s	eal:	
Date: <u>99 / 17 / 96</u> License Number: 4966		A Maria	EIE
License Number: 7966		مسع	
		17 m	<u>R</u> E
	4.		
v v			See.

#### Messachusetts Department of Environmental Protection Bureau of Waste Site Cleanup

BWSC-012A

11210

BILL OF LADING (granusent to \$10 CER excess)

#### H, CERTIFICATION OF PERSON CONBUCTING RESPONSE ACTION ASSOCIATED WITH THIS BILL OF LADRIC:

I carrily under parasties of law that I have possonely examined and an familiar with the information contained in this culturities, including any and all desturances accompanying this confication, and that, based on my impairy of Poso individuals immediately responsible for obtaining the information, the mested information contained herein is, to the best of my innorthings and build, true, accurate and complete. I am assure that there are significant penalties, including, but not limited to, possible fines and impresentant, for wifully submitting takes, inscruzing, or incomplete information.

Synature.

9117196

TO

Name of Person (print) Ronald J. Ostrowski

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# Enclosure to Bill of Lading (BWSC -12A) SUMMARY OF LABORATORY ANALYTICAL RESULTS Release Tracking No. 2-11210 Re-Excavation of 2729 and 1437

Analyte	Range/Peak of Lab Results
ТРН	106 ppm
Total PCB's	0.0149 ppm
Total Arsenic	11.8 ppm
Total Barium	12.9 ppm
Total Cadmium	1.19
Total Chromium	7.64 ppm
Total Lead	14.6 ppm
Total Mercury	0.02 ppm
Total PAH's	13.93 ppm
Total VOC's	< 1 ppm

Note: ppm = parts per million

Massachusetts Department of Environ Bureau of Waste Site Cleanup	nmental Protection	BWSC-012
	1994	Release Tracking Number
DEP LOG SHEET _ OF _ /_	sct Devens P. [	112100
I. LOAD INFORMATION:  LOAD T: Signature of Transporter Representative:	Receiving Facility Temporary	
Date of Shipment: Time of Shipment:    Gircle one   am/pm	Date of Receipt:	Time of Receipt:
Truck/Tractor Registration: Trailer Registration (if any):	Load Size (çu. yds.//ons)/	(circle one) am/pr
LOAD 2: Signeture of Transporter Representative: //533	Receiving Facility Temporary	Storage Representativ
Date of Shipment:	Date of Receipt:	Time of Receipt:
Truck/Tractor Registration: Trailer Registration (if any):	Load Size (cu. yds./tons):	(circle one) am/pm 33 49
LOAD 3: Signature of Transporter Representative: 1/5 5 3	Receiving Facility/Temporary	Śtorage Representativ
Date of Shipment:  [1819] AC: 30 (circle one) am/pm	Date of Receipt: 96	Time of Receipt:
Truck/Tractor Registration: Trailer Registration (if any):	Load Size (cu. yds./tons)	(circle one) am/pm 5488
LOAD 4: Signature of Transporter Representative:	Receiving Facility/Temporary	Storage Representative
Date of Shipment: (circle one) am/pm	Date of Receipt: /	// Time of Receipt:
Truck/Tractor Registration: Trailer Registration (if any):	Load Size (cu. yds./tons)!)	(circle one) am/pm
LOAD 5: Signature of Transporter Representative:	Receiving Facility/Temporary S	Storage Representative
Date of Shipment: Time of Shipment: (circle one) am/pm	Date of Receipt:	Time of Receipt:
Truck/Tractor Registration: Trailer Registration (if any):	Load Size (cu. yds./tons):	(circle one) am/pm
LOAD 6: Signature of Transporter Representative:	Receiving Facility/Temporary S	lorage Representative
Date of Shipment: Time of Shipment: (circle one) am/pm	Date of Receipt:	Time of Receipt:
ruck/Tractor Registration: Trailer Registration (if any):	Load Size (cu. yds./tons):	(circle one) am/pm
-OAD 7: Signature of Transporter Representative:	Receiving Facility/Temporary S	torage Representative
Date of Shipment: Time of Shipment: (circle one) am/pm	Date of Receipt:	Time of Receipt:
ruck/Tractor Registration: Trailer Registration (if any):	- ' - ' <del>- </del>	(circle one) am/pm

J. LOG SHEET VOLUME INFORMATION:

Total Volume This Page (cu.yds./tons):

Total Carried Forward (cu.yds./tons):

Total Carried Forward and This Page(cu.yds./tons)

Load Size (cu. yds./tons):

130.16



Massachusetts Department of Environmental Protection BWSC-012C Bureau of Waste Site Cleanup Release Tracking Number:

DEP . SUMMARY SHEET OF		_	
K. SUMMARY OF S	HIPMENTS:		
DATE OF SHIPMENT:	DATE OF RECEIPT:	NUMBER OF LOADS SHIPPED:	DAILY VOLUME SHIPPED (CU. YDS. TONS)
4-8-96	9-18-96	4	130 10
			-
SUMMARY SHEET TOTAL SHIPPED:		4	130.16
LE OF ENDING TOTALSHIP	CD (Only it different).		

Revised 10/1/93

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# Massachusetts Department of Environmental Protection Bureau of Waste Site Cleanup

BWSC-012C

BILL OF LADING (pursuant to 310 CMR 40.0030) SUMMARY SHEET	Release Tracking Number					
L. ACKNOWLEDGEMENT OF RECEIPT OF REMEDIATION WASTE AT RECEIVING FACILITY OR TEMPORARY STORAGE LOCATION:						
	Title: SGLES cordinatur					
Signature: Wind die Charles	Date: 1 / 1 \land 1 \land 1 \land 2 \land					
M. ACKNOWLEDGEMENT OF SHIPMENT AND RECEIPT OF REME CONDUCTING RESPONSE ACTION ASSOCIATED WITH THIS						
I certify under penalties of law that I have personally examined and am familiar with the and all documents accompanying this certification, and that, based on my inquiry of the information, the material information contained herein is, to the best of my knowledge that there are significant penalties, including, but not limited to, possible fines and imprincomplete information.	nose individuals immediately responsible for obtaining e and belief, true, accurate and complete. I am aware prisonment, for wilfully submitting false, inaccurate, or					
Signature: R. TOstroush:  Name of Person (print): RONALD J. OSTROWSK)	Date: 10 / 9 / 96					
%.• #						