

Prepare in quintuplicate (original and 4 copies)  
CONTROL NO. 05

CONTRACTOR DRAWINGS & INFORMATION SUBMITTAL  
EFANENAVFACENGCOM 4335/3 (Rev. 6/80)

|  |  |  |
|--|--|--|
| CONTRACT NO.<br><b>N62472-99-D-0032</b>                              | CONTRACT TASK ORDER NO.<br><b>0100</b> | ACTIVITY LOCATION<br><b>Naval Weapons Station Earle – Colts Neck, NJ</b> |
| PROJECT TITLE:<br><b>Removal of Mine Actuators at Site 48</b>        |  |  |
| FROM:<br><b>Tetra Tech FW, Inc.: Program QC Manager Thomas Kelly</b> |  | DATE<br>July 13, 2004  |
| TO:<br><b>M. DiGeambeardino (CD-Copy)</b>                            |  | DATE<br>July 13, 2004  |

- THE CONTRACTOR SUBMITTALS LISTED BELOW ARE FORWARDED FOR YOUR REVIEW AND RECOMMENDATIONS.
  - APPLY APPROPRIATE STAMP IMPRINT TO EACH SUBMITTAL AND INDICATE REVIEW COMMENTS, AS REQUIRED.
  - RETAIN ONE (1) COPY OF THIS TRANSMITTAL FORM AND RETURN REMAINING COPIES WITH REVIEWED SUBMITTALS TO ROICC.
- THESE SUBMITTALS SHOULD BE RETURNED TO THIS OFFICE BY \_\_\_\_\_
- \_\_\_\_\_

CD-COPY TO: EFANE: C. Davis, D. Zari  
NWS-Earle: L. Burg

HARD COPY TO:

ROICC       RPM       CSO

\_\_\_\_\_  
SIGNATURE AND DATE      JULY 13, 2004

|                |      |
|----------------|------|
| FROM: DESIGNER | DATE |
| TO: ROICC      | DATE |

- THE SUBMITTALS LISTED BELOW HAVE BEEN REVIEWED AND ARE RETURNED, WITH ACTION TAKEN AS INDICATED.
- \_\_\_\_\_

COPY TO:

ROICC       DESIGNER

\_\_\_\_\_  
SIGNATURE AND DATE

|                |      |
|----------------|------|
| FROM: ROICC    | DATE |
| TO: CONTRACTOR | DATE |

- THE SUBMITTALS LISTED BELOW HAVE BEEN REVIEWED AND ARE APPROVED/DISAPPROVED AS SHOWN BELOW AND ON EACH STAMP IMPRINT.

COPY TO:

ROICC       OTHER

\_\_\_\_\_  
FOR COMMANDING OFFICER, ENGINEERING FIELD      DATE  
ACTIVITY NORTHEAST - NAVAL FACILITIES ENGINEERING  
COMMAND

| ITEM NO. | SUBMITTAL DESCRIPTION  | PREPARED/SUBMITTED BY | APPROVED | DISAPPROVED | REMARKS |
|----------|--|-----------------------|----------|-------------|---------|
| 1        | SD-18, Records; Final Closeout Report for Removal of Mine Actuators at Site 48 | Thomas Kelly          |          |             |         |
|          |  |                       |          |             |         |
|          |  |                       |          |             |         |

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**FINAL CLOSEOUT REPORT**

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**FOR  
REMOVAL OF MINE ACTUATORS AT SITE 48  
AT  
NAVAL WEAPONS STATION EARLE  
COLTS NECK, NEW JERSEY**

**Prepared for:**

**ENGINEERING FIELD ACTIVITY, NORTHEAST  
NAVAL FACILITIES ENGINEERING COMMAND  
10 INDUSTRIAL HIGHWAY  
LESTER, PENNSYLVANIA 19113**

**CONTRACT NO. N62472-99-D-0032  
Contract Task Order No. 100**

**July 13, 2004**

**Prepared by:**



**TETRA TECH FW, INC.  
ONE OXFORD VALLEY, SUITE 200  
LANGHORNE, PA 19047-1829**

**Revision**  
0

**Date**  
July 13, 2004

**Prepared By**  
C. DeWolf

**Approved By**  
R. Woodworth

**Pages Affected**  
All

**FINAL CLOSEOUT REPORT  
FOR  
REMOVAL OF MINE ACTUATORS AT SITE 48  
AT  
NAVAL WEAPONS STATION EARLE  
COLTS NECK, NEW JERSEY**

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## **1.0 INTRODUCTION**

Tetra Tech FW, Inc. (TtFW) was contracted by the Engineering Field Activity, Northeast (EFANE), Naval Facilities Engineering Command to perform Mine Actuator Removals at Site 48 located at Naval Weapons Station (NWS) Earle in Colts Neck, NJ. This Closeout Report is being submitted to satisfy requirements of the Scope of Work issued by the Navy under Contract Task Order Number 100.

## **2.0 SITE DESCRIPTION**

### **2.1 Site Location and Description**

The project work was performed at the Mainside site of NWS Earle, Colts Neck, New Jersey. NWS Earle is located in Monmouth County, New Jersey, approximately 47 miles south of New York City. NWS Earle consists of a 10,248-acre Main Base (Mainside) located in the Colts Neck Township approximately 10 miles inland from the Atlantic Ocean at Sandy Hook, and a 706-acre Waterfront Area. The two areas are connected via a Navy-controlled right-of-way. Specifically, the work was performed at Site 48 of the Mainside. The removal areas were defined as an Upland/Wetland Area and the Northern two-thirds portion of West Pond.

## **3.0 SITE WORK**

Site work consisted of installation of erosion controls, limited clearing to gain access to the upland/wetland work areas, removal of mine actuators which were dumped on the upland/wetland area from a previous dredging project within the southeastern portion of the pond, removal of mine actuators based on visual observation within the remaining two-thirds of the pond on the northwestern side, restoration of disturbed areas, transportation and disposal of recovered mine actuators and demobilization. Prior to any field activities a conference call was conducted with all field personnel to inform them of the potential presence of unexploded ordnance (UXO) in the work area. Field personnel were briefed and provided with photographic documentation of what to look for and what action to be taken if UXO type items were found/observed. At the completion of field activities no UXO items were found.

### **3.1 Excavation Permit, Waste Characterization Sampling, Limits of Upland/Wetland Excavation and Pond Removal**

Excavation Permit Number 04-26 was issued by Base Civil Engineering and Public Works prior to any excavation activities. The permit is included as Appendix A. One mine actuator was analyzed for waste characterization. Waste Characterization Results are included in Appendix B. Limits of excavation within the upland/wetland area was based on visual observation of surface mine actuators, stockpiled spoils within the area from the previous pond dredging operation and selective “test trenching” within the upland/wetland area. Limits of removal for the pond were based on visual observation (by boat) from within the pond.

### **3.2 Upland/Wetland Area Mine Actuator Removal**

Initial mine actuator removal was based on visual observation of surface mine actuators followed by excavation within the areas of located surface mine actuators. Excavation was performed by screening or “turning over” the soil with the excavator bucket while closely observing the soil. Average excavation depth for the upland/wetland area was two feet, none were found at lower depths. Within the upland/wetland area there were seven stockpiles of soil ranging in size. This material appeared to be spoils from the previous dredging operation. These stockpiles were also screened with the excavator. The stockpiles produced very few mine actuators. The majority of mine actuators were found on the surface and within the “flat” area of the uplands north of spoils piles 1 and 2. Figure 1 indicates the stockpile locations and areas of mine actuator removals.

### **3.3 West Pond Area Mine Actuator Removal**

A small flat bottom boat was used to remove mine actuators from West Pond. Observation of the pond floor from the boat was performed while traveling in a grid pattern around the pond. Only one area produced any mine actuators, which was in the middle of the previous dredge line (northeast to southwest). Figure 1 indicates the approximate location of the area within the pond and upland/wetland area where mine actuators were removed. Figure 2 represents an aerial view of Site 48 prior to field activities.

## **4.0 WASTE DISPOSAL DOCUMENTATION**

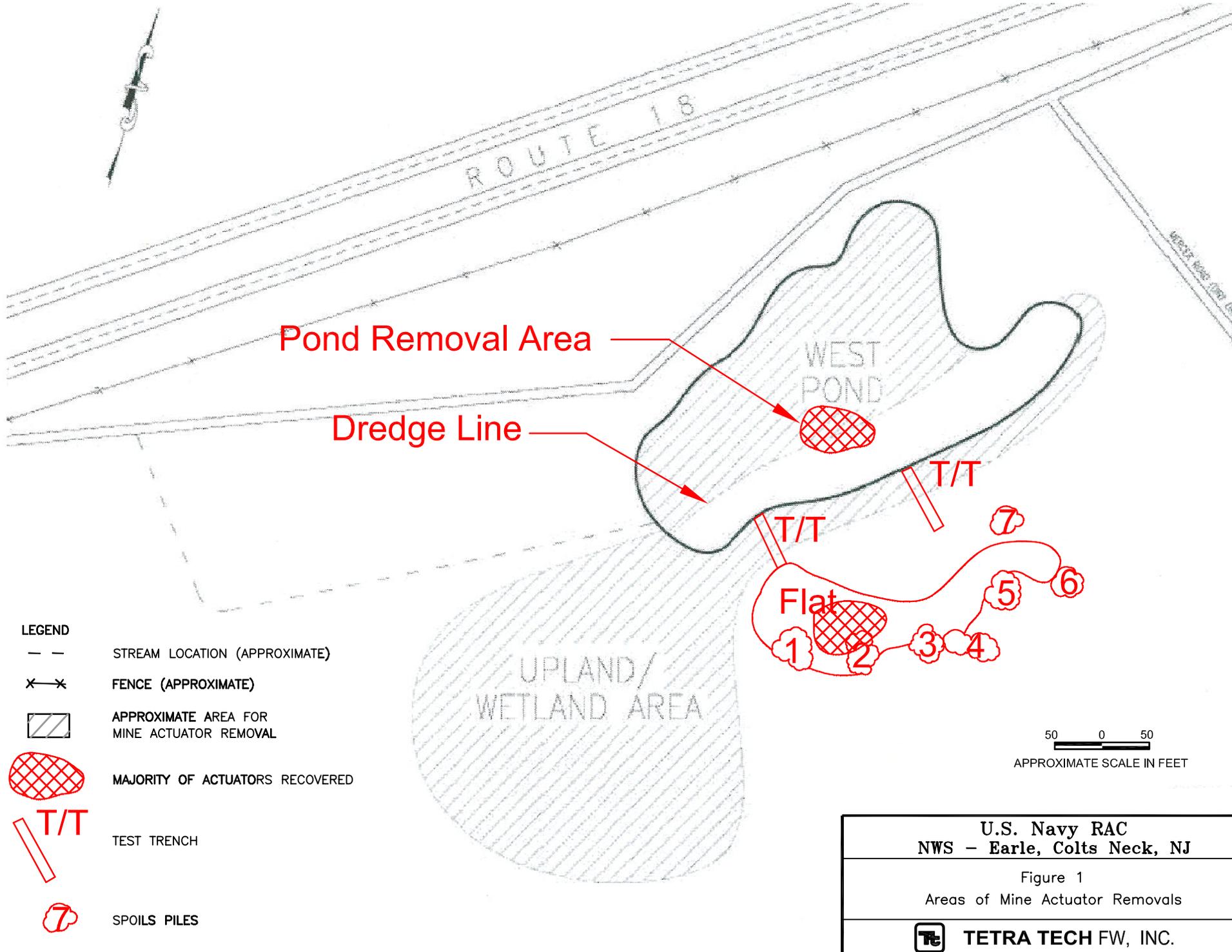
TtFW removed and shipped a total of nine (9) 55-gallon steel drums containing mine actuators. Based on a hand count while filling one drum, the average capacity of a 55-gallon drum was 230 mine actuators. Total volume was nine (9) drums or approximately 2,070 mine actuators. A total of 6.5 drums of mine actuators were removed from the upland/wetland area, while 2.5 drums were removed from the pond. Waste disposal documentation is included as Appendix C.

## **5.0 PROJECT DOCUMENTATION**

Daily Production Reports are included as Appendix D and Photographic Documentation is included as Appendix E.

This Closeout Report satisfies the post construction submittal requirements included in the Statement of Services for CTO 100 under RAC No. N62472-99-D-0032.

## **FIGURES**



U.S. Navy RAC  
 NWS - Earle, Colts Neck, NJ  
 Figure 1  
 Areas of Mine Actuator Removals  
 TETRA TECH FW, INC.



250 0 250 500 750 1000 Feet

Figure 2

Aerial Photograph

**APPENDIX A**  
**EXCAVATION PERMIT**

MEMORANDUM

Date: 5/6/04

From: 092  
To: E500  
Via: E09

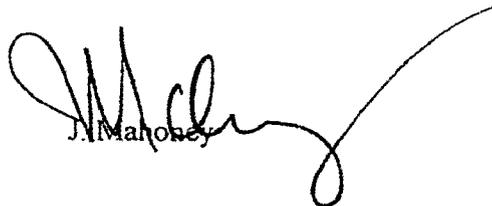
Subj: VERIFICATION AND MARKING OF EXISTING UTILITIES FOR

EXCAVATION PERMIT NO. 04-26

SITE LOCATION 2000 ft. NW of S-35 (Environmental Clean-up site #48)

REQUESTOR RALPH WILBERT PHONE NO. 2962

1. The subject excavation permit with sketches of as-built or recorded utilities drawings attached, is enclosed for your action.
2. Request marking of existing utilities at excavation site be complete by ASAP
3. Please forward the permit to the requestor upon your completion of verification and marking of existing utilities in the field.

  
J. Mahoney

DEED 5/4/09 TB



# EXCAVATION PERMIT

WPNSTAE 11017/1 (6/77)

ISSUE DATE  
5/7/04

EXPIRATION DATE  
6/7/04

DATE  
5/7/04

REQUESTOR **ALPHA WILBERT**

TO: PUBLIC WORKS ENGINEERING DIRECTOR

SITE LOCATION **SITE #48 CONTRACT # 99-D-0032 CTO100**  
**RAC II WEST POND AREA**

PURPOSE OF EXCAVATION (Include Plan Sheet #, Details, Etc.)  
**REMOVAL OF MINE ACTUATORS + BATTERYS**  
**EXCAVATE TO + - 36" ABOUT 1 ACRE SITE**  
**SEE ATTACHED SITE PLAN**

SIGNATURE OF REQUESTOR *Alpha Wilbert* RD1000.5 x 2962

UTILITY DRAWINGS REVIEWED / APPROVED

APPROVAL



GRANTED

PERMIT NO.

**04-26**



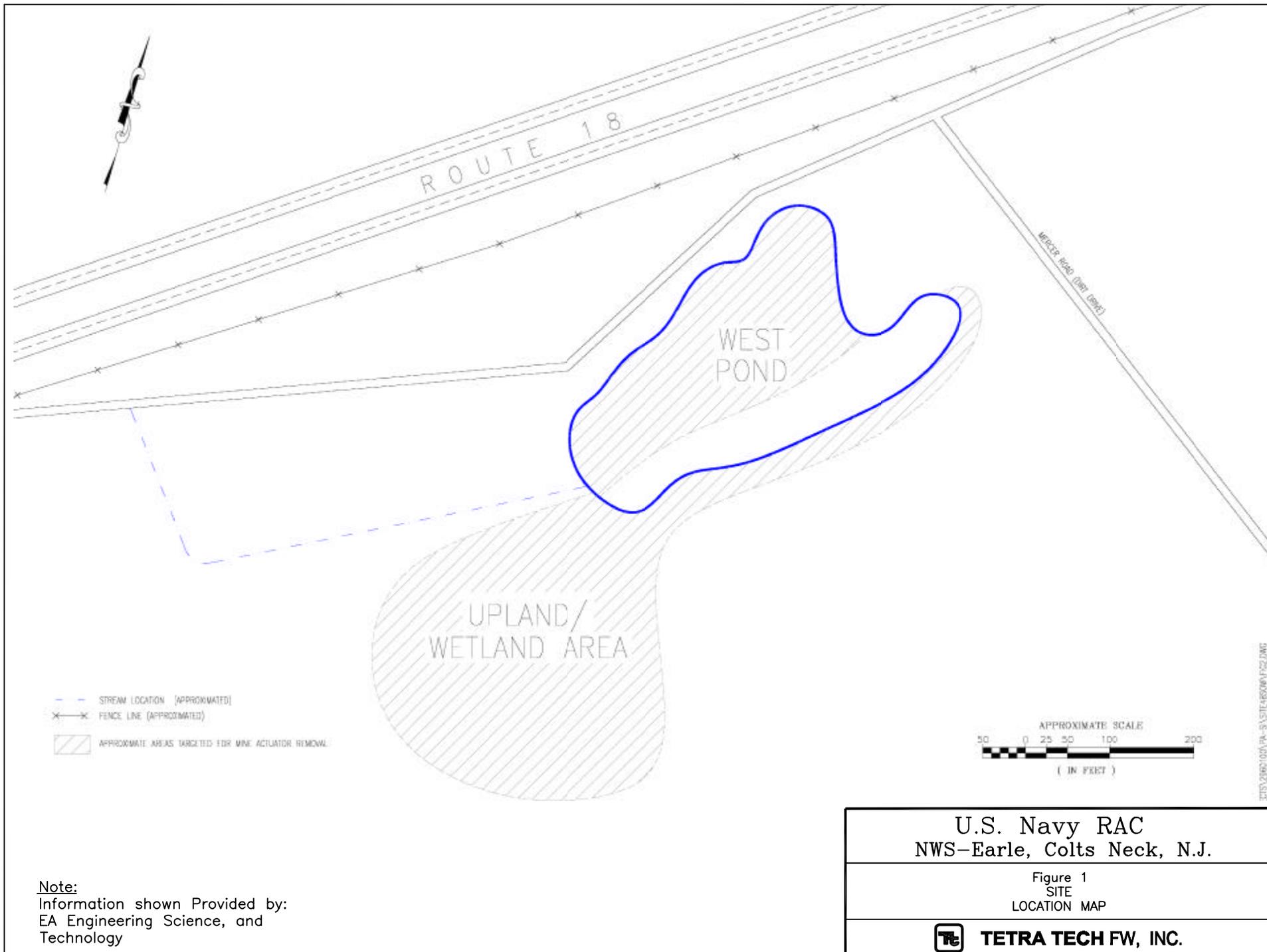
DENIED

REASON

SIGNATURE (ENGINEERING DIRECTOR)

DATE  
5/7/04

1. See attached drawings for locations of underground utilities.
2. Contact PWC Bldg. C-15 for markout of base owned utilities.
3. Requestor call 1-800-272-1000 for markout of public utilities.
4. Before excavation, field verify locations of all underground utilities. Sketches are based on records available but do not guarantee their accuracy.
5. Telecom markout is hereby requested.
6. Hand dig within 5' of markout.



**Note:**  
 Information shown Provided by:  
 EA Engineering Science, and  
 Technology

|   |                            |
|---|----------------------------|
| <b>U.S. Navy RAC</b><br><b>NWS-Earle, Colts Neck, N.J.</b>                            |                            |
| Figure 1<br>SITE<br>LOCATION MAP  |                            |
|  | <b>TETRA TECH FW, INC.</b> |

J:\13\2060\04\PA-S\SITE\8206\F02.DWG

C

MATCH LINE

JERSEY CENTRAL POWER & LIGHT COMPANY

BELL TELEPHONE CO

JC 525 ACT

A-963  
BT1087ACT

A-962

A-961

A-960  
BT1090ACT

A-959

A-958  
BT1092ACT

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BT1095ACT

A-954  
BT1097ACT

BT1098ACT  
A-953

A-930  
S-35  
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A-783

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REMO

L-6

L-5

ROAD

A-790

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ELECTRIC

D

**APPENDIX B**

**WASTE CHARACTERIZATION RESULTS**

Mr. Rick Woodworth  
Tetra Tech FW Inc.  
2300 Lincoln Highway East One Oxford  
Valley, Suite 200  
Langhorne PA 19047

**Report Number: 51800**

**Revision: Rev. 0**

**Re: Naval Weapons Station Earle, NJ**

**CTO 100**

Enclosed are the results of the analyses on your sample(s). Samples were received on 10 May 2004 and analyzed for the tests listed below. Samples were received in acceptable condition, with the exceptions noted below or on the chain of custody. The results reported herein conform to the most current NELAC standards, where applicable, unless otherwise narrated in the body of the report. Please see individual reports for specific methodologies and references.

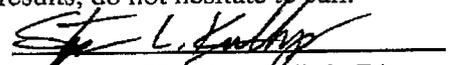
| <u>Lab Number</u> | <u>Sample Date</u> | <u>Station Location</u> | <u>Analysis</u>                      | <u>Comments</u> |
|-------------------|--------------------|-------------------------|--------------------------------------|-----------------|
| 51800-1           | 05/07/04           | Mine Actuator Battery   | Cyanide Reactivity                   |                 |
|                   | 05/07/04           | Mine Actuator Battery   | EPA 1010 Flashpoint                  |                 |
|                   | 05/07/04           | Mine Actuator Battery   | EPA 8081(TCLP Pesticides)            |                 |
|                   | 05/07/04           | Mine Actuator Battery   | EPA 8151(TCLP Herbicides)            |                 |
|                   | 05/07/04           | Mine Actuator Battery   | EPA 8260 (TCLP Volatile<br>Organics) |                 |
|                   | 05/07/04           | Mine Actuator Battery   | EPA 8270 (TCLP Semivolatiles)        |                 |
|                   | 05/07/04           | Mine Actuator Battery   | Sulfide Reactivity                   |                 |
|                   | 05/07/04           | Mine Actuator Battery   | SW-846 9045 pH in Solid              |                 |
|                   | 05/07/04           | Mine Actuator Battery   | TCLP Extraction                      |                 |
|                   | 05/07/04           | Mine Actuator Battery   | TCLP RCRA Metals                     |                 |
| 51800-2           | 05/07/04           | Mine Actuator Battery   | TCLP Zero Headspace Extraction       |                 |
|                   | 05/07/04           | Mine Actuator Battery   | EPA 8082 (PCBs only)                 |                 |

**Sample Receipt Exceptions: None**

Analytics Environmental Laboratory is certified by the states of New Hampshire, Maine, Massachusetts, Connecticut, Rhode Island, North Carolina, Virginia, Pennsylvania and is validated by the U.S. Army Corps of Engineers (MRD) and U.S. Navy (NFESC). A list of actual certified parameters is available upon request.

If you have any further question on the analytical methods or these results, do not hesitate to call.

Authorized signature

  
Stephen L. Knollmeyer Lab. Director

Date

5/17/2004

**This report shall not be reproduced, except in full, without the written consent of Analytics Environmental Laboratory, LLC.**

Mr. Rick Woodworth  
Tetra Tech FW Inc.  
2300 Lincoln Highway East One Oxford Valley,  
Suite 200  
Langhorne PA 19047

May 17, 2004

**SAMPLE DATA**

**CLIENT SAMPLE ID**

**Project Name:** Naval Weapons Station Earle, NJ  
**Project Number:** CTO 100  
**Field Sample ID:** Mine Actuator Battery

**Lab Sample ID:** 51800-1  
**Matrix:** Aqueous  
**Percent Solid:** N/A  
**Dilution Factor:** 100  
**Collection Date:** 05/07/04  
**Lab Receipt Date:** 05/10/04  
**TCLP Extraction Date:** 05/11/04  
**Analysis Date:** 05/12/04

**ANALYTICAL RESULTS  
TCLP VOLATILE ORGANICS**

| COMPOUND             | Quantitation<br>Limit µg/L | Result<br>µg/L | Regulatory<br>Limit<br>µg/L | Matrix Spike<br>Percent<br>Recovery |
|----------------------|----------------------------|----------------|-----------------------------|-------------------------------------|
| Vinyl chloride       | 200                        | U              | 200                         | 88                                  |
| Trichloroethene      | 200                        | U              | 500                         | 88                                  |
| Tetrachloroethene    | 200                        | U              | 700                         | 99                                  |
| Chloroform           | 200                        | U              | 6,000                       | 98                                  |
| Carbon tetrachloride | 200                        | U              | 500                         | 102                                 |
| 1,1-Dichloroethene   | 200                        | U              | 700                         | 97                                  |
| 1,2-Dichloroethane   | 200                        | U              | 500                         | 97                                  |
| Chlorobenzene        | 200                        | U              | 100,000                     | 102                                 |
| Benzene              | 200                        | U              | 500                         | 106                                 |
| Methyl ethyl ketone  | 1000                       | U              | 200,000                     | 99                                  |

| <b>Surrogate Standard Recovery</b> |       |                       |       |
|------------------------------------|-------|-----------------------|-------|
| Dibromofluoromethane               | 104 % | d4-1,2-Dichloroethane | 105 % |
| d8-Toluene                         | 99 %  | Bromofluorobenzene    | 97 %  |

|              |             |                             |                     |
|--------------|-------------|-----------------------------|---------------------|
| U=Undetected | J=Estimated | E=Exceeds Calibration Range | B=Detected in Blank |
|--------------|-------------|-----------------------------|---------------------|

**METHODOLOGY:** TCLP sample extraction was performed according to "Test Methods for Evaluating Solid Waste, SW-846 Method 1311." TCLP extract analysis was conducted according to "Test Methods for Evaluating Solid Waste, SW-846 Method 8260B."

**COMMENTS:**

Authorized signature Melina A. Falli

May 17, 2004

Mr. Rick Woodworth  
Tetra Tech FW Inc.  
2300 Lincoln Highway East One Oxford  
Valley, Suite 200

**SAMPLE DATA**

Lab Sample ID: 51800-1  
Matrix: Aqueous  
Percent Solid: N/A  
Dilution Factor: 5.0  
Collection Date: 05/07/04  
Lab Receipt Date: 05/10/04  
TCLP Extraction Date: 05/11/04  
Preparative Extraction Date: 05/12/04  
Analysis Date: 05/13/04

**CLIENT SAMPLE ID**

Project Name: Naval Weapons Station Earle, NJ  
Project Number: CTO 100  
Field Sample ID: Mine Actuator Battery

**ANALYTICAL RESULTS TCLP SEMI-VOLATILE ORGANICS**

| COMPOUND              | Quantitation Limit µg/L | Result µg/L | Regulatory Limit µg/L | Matrix Spike Percent Recovery |
|-----------------------|-------------------------|-------------|-----------------------|-------------------------------|
| 2-Methylphenol        | 25                      | U           | 200,000               | 6                             |
| 3+4-Methylphenol      | 25                      | U           | 200,000               | 11                            |
| 1,4-Dichlorobenzene   | 10                      | U           | 7,500                 | 55                            |
| 2,4-Dinitrotoluene    | 10                      | U           | 130                   | 90                            |
| Hexachlorobenzene     | 10                      | U           | 130                   | 76                            |
| Hexachlorobutadiene   | 10                      | U           | 500                   | 55                            |
| Hexachloroethane      | 10                      | U           | 3,000                 | 53                            |
| Nitrobenzene          | 10                      | U           | 2,000                 | 73                            |
| Pentachlorophenol     | 50                      | U           | 100,000               | 61                            |
| Pyridine              | 10                      | U           | 5,000                 | 45                            |
| 2,4,5-Trichlorophenol | 25                      | U           | 400,000               | 75                            |
| 2,4,6-Trichlorophenol | 25                      | U           | 2,000                 | 55                            |

**Surrogate Standard Recovery**

|                  |       |                      |       |                 |      |
|------------------|-------|----------------------|-------|-----------------|------|
| 2-Fluorophenol   | 11 *% | d5-Phenol            | 7 *%  | d5-nitrobenzene | 85 % |
| 2-Fluorobiphenyl | 87 %  | 2,4,6-Tribromophenol | 52 *% | d14-p-terphenyl | 69 % |

U=Undetected J=Estimated E=Exceeds Calibration Range B=Detected in Blank

**METHODOLOGY:** TCLP sample extraction was performed according to "Test Methods for Evaluating Solid Waste, SW-846 Method 1311." TCLP extract analysis was conducted according to "Test Methods for Evaluating Solid Waste, SW-846 Method 8270c."

**COMMENTS:** \*Surrogate recoveries were outside of the laboratory acceptance criteria. Sample was reanalyzed with similar results.

Authorized signature 

Mr. Rick Woodworth  
 Tetra Tech FW Inc.  
 2300 Lincoln Highway East One Oxford Valley,  
 Suite 200  
 Langhorne PA 19047

May 17, 2004

**SAMPLE DATA**

**CLIENT SAMPLE ID**

**Project Name:** Naval Weapons Station Earle, NJ  
**Project Number:** CTO 100  
**Field Sample ID:** Mine Actuator Battery

**Lab Sample ID:** 51800-1  
**Matrix:** Aqueous  
**Percent Solid:** N/A  
**Dilution Factor:** 4.0  
**Collection Date:** 05/07/04  
**Lab Receipt Date:** 05/10/04  
**TCLP Extraction Date:** 05/11/04  
**Extraction Date:** 05/12/04  
**Analysis Date:** 05/12/04

**TCLP ORGANOCHLORINE PESTICIDE RESULTS**

| COMPOUND   | Quantitation Limit $\mu\text{g/L}$ | Results $\mu\text{g/L}$ | Regulatory Limit $\mu\text{g/L}$ | Matrix Spike Percent Recovery |
|--|------------------------------------|-------------------------|----------------------------------|-------------------------------|
| Chlordane  | 8                                  | U                       | 30                               | 82                            |
| Endrin   | 8                                  | U                       | 20                               | 105                           |
| Heptachlor   | 8                                  | U                       | 8                                | 110                           |
| Heptachlor Epoxide   | 8                                  | U                       | 8                                | 103                           |
| Lindane  | 8                                  | U                       | 400                              | 90                            |
| Methoxychlor   | 8                                  | U                       | 10,000                           | 90                            |
| Toxaphene  | 8                                  | U                       | 500                              | 91                            |
| <b>Surrogate Standard Recovery</b>                                       |                                    |                         |                                  |                               |
|  | 2,4,5,6-Tetrachloro-m-xylene       | 92                      | %                                |                               |
|  | Decachlorobiphenyl                 | 58                      | %                                |                               |
| U=Undetected J=Estimated E=Exceeds Calibration Range B=Detected in Blank |                                    |                         |                                  |                               |

**METHODOLOGY:** TCLP sample extraction was performed according to "Test Methods for Evaluating Solid Waste, SW-846 Method 1311."  
 TCLP extract analysis was conducted according to "Test Methods for Evaluating Solid Waste, SW-846 Method 8081."

**COMMENTS:**

Authorized signature 

May 17, 2004

Mr. Rick Woodworth  
Tetra Tech FW Inc.  
2300 Lincoln Highway East One Oxford  
Valley, Suite 200  
Langhorne PA 19047

**SAMPLE DATA**

Lab Sample ID: 51800-1  
Matrix: Aqueous  
Percent Solid: N/A  
Dilution Factor: 5  
Collection Date: 05/07/04  
Lab Receipt Date: 05/10/04  
TCLP Extraction Date: 05/11/04  
Extraction Date: 05/12/04  
Analysis Date: 05/15/04

**CLIENT SAMPLE ID**

Project Name: Naval Weapons Station Earle,  
Project Number: CTO 100  
Client Sample ID: Mine Actuator Battery

**TCLP CHLORINATED HERBICIDE RESULTS**

| COMPOUND   | Quantitation Limit $\mu\text{g/L}$ | Results $\mu\text{g/L}$ | Regulatory Limit $\mu\text{g/L}$ |
|--|------------------------------------|-------------------------|----------------------------------|
| 2,4-D  | 5                                  | U                       | 10,000                           |
| 2,4,5-TP (Silvex)  | 5                                  | U                       | 1,000                            |
| <b>Surrogate Standard Recovery</b>                                       |                                    |                         |                                  |
| 2,4-Dichlorophenylacetic acid 119 %                                      |                                    |                         |                                  |
| U=Undetected J=Estimated E=Exceeds Calibration Range B=Detected in Blank |                                    |                         |                                  |

METHODOLOGY: TCLP sample extraction was performed according to Test Methods for Evaluating Solid Waste, SW-846 Method 1311. TCLP extract analysis was conducted according to Test Methods for Evaluating Solid Waste, SW-846 Method 8151.

COMMENTS:

Authorized signature *M. Lina A. Pali*

Mr. Rick Woodworth  
Tetra Tech FW Inc.  
2300 Lincoln Highway East One Oxford Valley,  
Suite 200  
Langhorne PA 19047

May 17, 2004

**CLIENT SAMPLE ID**

**Project Name:** Naval Weapons Station  
**Project Number:** CTO 100  
**Client Sample ID:** Mine Actuator Battery

**SAMPLE DATA**

**Lab Sample ID:** 51800-1  
**Matrix:** Solid  
**Percent Solid:** 85%  
**Collection Date:** 05/07/04 11:30  
**Lab Receipt Date:** 05/10/04

| Parameter  | Result | Date Analyzed  | Detection Limit | Units        |
|--|--------|----------------|-----------------|--------------|
| pH   | 5.7    | 05/11/04 11:16 | NA              | pH units     |
| Flashpoint   | >165   | 05/13/04       | NA              | ° Fahrenheit |
| Sulfide Reactivity   | U      | 05/11/04       | 12              | mg/kg        |
| Cyanide Reactivity   | U      | 05/11/04       | 12              | mg/kg        |
| U = Undetected    NA = Not Applicable    <=Less than    >=Greater than |        |                |                 |              |

**METHODOLOGY:** pH: Sample analyzed according to "EPA SW 846 Method 9045 pH in solid"  
FlashPoint: Sample analysis was conducted according to "Test Methods for Evaluating Solid Waste, EPA SW-846, Method 1010."  
Reactivity: Sulfide reactivity analysis was conducted according to "Test Methods for Evaluating Solid Waste, SW-846, Sulfide by Modified Method 7.3.4.2."  
Cyanide reactivity analysis was conducted according to "Test Methods for Evaluating Solid Waste, SW-846, Cyanide by Modified Method 7.3.3.2."

**COMMENTS:** Results are expressed on a dry weight basis.

Authorized signature 

Mr. Rick Woodworth  
Tetra Tech FW Inc.  
2300 Lincoln Highway East One Oxford Valley,  
Suite 200  
Langhorne PA 19047

May 17, 2004

**SAMPLE DATA**

**CLIENT SAMPLE ID**

**Project Name:** Naval Weapons Station Earle, NJ  
**Project Number:** CTO 100  
**Field Sample ID:** Mine Actuator Battery

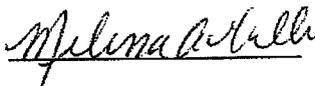
**Lab Sample ID:** 51800-2  
**Matrix:** Solid  
**Percent Solid:** 85  
**Dilution Factor:** 1.1  
**Collection Date:** 05/07/04  
**Lab Receipt Date:** 05/10/04  
**Extraction Date:** 05/12/04  
**Analysis Date:** 05/14/04

**PCB ANALYTICAL RESULTS**

| COMPOUND   | Quantitation Limit $\mu\text{g}/\text{kg}$ | Results $\mu\text{g}/\text{kg}$ |
|--|--|---------------------------------|
| PCB-1016   | 17   | U                               |
| PCB-1221   | 17   | U                               |
| PCB-1232   | 17   | U                               |
| PCB-1242   | 17   | U                               |
| PCB-1248   | 17   | U                               |
| PCB-1254   | 17   | U                               |
| PCB-1260   | 17   | U                               |
| <b><u>Surrogate Standard Recovery</u></b>                                |  |                                 |
| 2,4,5,6-Tetrachloro-m-xylene   | 65 %                                       |                                 |
| Decachlorobiphenyl   | 24* %                                      |                                 |
| U=Undetected J=Estimated E=Exceeds Calibration Range B=Detected in Blank |  |                                 |

**METHODOLOGY:** Sample analysis conducted according to Test Methods for Evaluating Solid Waste, SW-846 Method 8082.

**COMMENTS:** Results are expressed on a dry weight basis.  
\* Surrogate recovery outside control limits. Secondary surrogate is in control.

Authorized signature 

**ANALYTICS ENVIRONMENTAL LABORATORY LLC**

Client Sample ID: MINE ACTUATOR BATTERY/51800-1

**TCLP Metals**

Lot-Sample #...: C4E130189-001  
 Date Sampled...: 05/07/04  
 Leach Date.....: 05/12/04

Date Received...: 05/13/04  
 Leach Batch #...: P413508

Matrix.....: SOLID

| <u>PARAMETER</u>                    | <u>RESULT</u> | <u>REPORTING<br/>LIMIT</u> | <u>UNITS</u> | <u>METHOD</u>           | <u>PREPARATION-<br/>ANALYSIS DATE</u> | <u>WORK<br/>ORDER #</u> |
|-------------------------------------|---------------|----------------------------|--------------|-------------------------|---------------------------------------|-------------------------|
| Prep Batch #...: 4136016<br>Mercury | 0.072         | 0.0020                     | mg/L         | SW846 7470A             | 05/15/04                              | GF6GM1AJ                |
|                                     |               | Dilution Factor: 10        |              | Analysis Time...: 10:56 | MS Run #.....: 4136009                |                         |
| Prep Batch #...: 4136018<br>Arsenic | 0.17 B        | 2.5                        | mg/L         | SW846 6010B             | 05/15-05/17/04                        | GF6GM1AA                |
|                                     |               | Dilution Factor: 5         |              | Analysis Time...: 12:12 | MS Run #.....:                        |                         |
| Barium                              | 0.54 B        | 10.0                       | mg/L         | SW846 6010B             | 05/15/04                              | GF6GM1AC                |
|                                     |               | Dilution Factor: 1         |              | Analysis Time...: 14:53 | MS Run #.....:                        |                         |
| Cadmium                             | 0.93          | 0.50                       | mg/L         | SW846 6010B             | 05/15-05/17/04                        | GF6GM1AD                |
|                                     |               | Dilution Factor: 5         |              | Analysis Time...: 12:12 | MS Run #.....:                        |                         |
| Chromium                            | ND            | 2.5                        | mg/L         | SW846 6010B             | 05/15-05/17/04                        | GF6GM1AE                |
|                                     |               | Dilution Factor: 5         |              | Analysis Time...: 12:12 | MS Run #.....:                        |                         |
| Lead                                | 13.5          | 2.5                        | mg/L         | SW846 6010B             | 05/15-05/17/04                        | GF6GM1AF                |
|                                     |               | Dilution Factor: 5         |              | Analysis Time...: 12:12 | MS Run #.....:                        |                         |
| Selenium                            | ND            | 0.25                       | mg/L         | SW846 6010B             | 05/15/04                              | GF6GM1AG                |
|                                     |               | Dilution Factor: 1         |              | Analysis Time...: 14:53 | MS Run #.....:                        |                         |
| Silver                              | ND            | 2.5                        | mg/L         | SW846 6010B             | 05/15-05/17/04                        | GF6GM1AH                |
|                                     |               | Dilution Factor: 5         |              | Analysis Time...: 12:12 | MS Run #.....:                        |                         |

**NOTE(S):**

Analysis performed in accordance with USEPA Toxicity Characteristic Leaching Procedure Method 1311  
 B Estimated result. Result is less than RL.

**APPENDIX C**

**WASTE DISPOSAL DOCUMENTATION**



PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION  
Bureau of Land Recycling and Waste Management  
P.O. Box 8550

Harrisburg, PA 17105-8550

Form approved.  
OMB No. 2050-0039

OFFICIAL PENNSYLVANIA MANIFEST FORM

2500-FM-LRWM0051 REV. 7/99

|   |  |   |  |  |   |   |              |
|---|--|---|--|--|---|---|--------------|
| <b>UNIFORM HAZARDOUS WASTE MANIFEST</b>   |  | 1. Generator's US EPA ID No.<br><b>NJ0170022172</b>   | Manifest Document No.<br><b>137198</b> | 2. Page 1 of <b>1</b>                                  | Information within the bold red border is not required by Federal law but may be required by State law. |   |              |
| 3. Generator's Name and Mailing Address<br><b>US Dept. of the Navy<br/>Naval Weapons Station Earle<br/>201 Hwy 345.<br/>Collinsville, NJ 07722</b>  |  |   |  | A. State Manifest Document Number<br><b>PAH 037198</b> |   | B. State Gen. ID<br><b>SAME</b>                 |              |
| 4. Generator's Phone<br><b>(866) 262-7321</b>   |  | 6. US EPA ID Number<br><b>PA D146714878</b>   |  | C. State Trans. ID<br><b>PA-AH 0176</b>                |   | D. Transporter's Phone<br><b>(866) 220-8867</b> |              |
| 5. Transporter 1 Company Name<br><b>Horwith Trucks Inc.</b>   |  | 8. US EPA ID Number   |  | E. State Trans. ID<br><b>PA-AH</b>                     |   | F. Transporter's Phone ( )                      |              |
| 7. Transporter 2 Company Name   |  | 10. US EPA ID Number<br><b>PA D01054045</b>   |  | G. State Facility's ID                                 |   | H. Facility's Phone<br><b>(717) 846-1900</b>    |              |
| 9. Designated Facility Name and Site Address<br><b>Envirote of PA, Inc.<br/>730 Vogelberg Road<br/>York PA 17404-1725</b>   |  | 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)<br><b>HM</b> |  | 12. Containers   | 13. Total Quantity  | 14. Unit Wt/Vol                                 | 1. Waste No. |
| a.  |  | b.  |  | No.  | Type  |   |              |
| X   |  | Recharge Batteries wet filled with Acid, 8,<br>UN2794, PGII (D002, D008)                          |  | X19  | DM  | X3352 P   | D002<br>D008 |
| b.  |  | c.  |  |  |   |   |              |
| c.  |  | d.  |  |  |   |   |              |
| d.  |  |   |  |  |   |   |              |
| J. Additional Descriptions for Materials Listed Above<br><b>1a. S.C.F YS3555</b>  |  |   |  | K. Handling Codes for Wastes Listed Above              |   |   |              |
| a.  |  |   |  | c.   |   |   |              |
| b.  |  |   |  | d.   |   |   |              |
| 15. Special Handling Instructions and Additional Information<br><b>Emergency phone: 1-877 460 1038<br/>NWS Earle 24 hr. # (732) 866-2500</b>  |  |   |  |  |   |   |              |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked and labeled and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. 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 the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. |  |   |  |  |   |   |              |
| Printed/Typed Name<br><b>Dennis Swafwell</b>  |  |   |  | Signature<br><i>Dennis Swafwell</i>                    |   | MONTH DAY YEAR                                  |              |
| 17. Transporter 1 Acknowledgement of Receipt of Materials<br>Printed/Typed Name<br><b>Willard Wartenluft</b>  |  |   |  | Signature<br><i>Willard Wartenluft</i>                 |   | MONTH DAY YEAR<br><b>10/6/22/04</b>             |              |
| 18. Transporter 2 Acknowledgement of Receipt of Materials<br>Printed/Typed Name   |  |   |  | Signature  |   | MONTH DAY YEAR                                  |              |
| 19. Discrepancy Indication Space  |  |   |  |  |   |   |              |
| 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.<br>Printed/Typed Name  |  |   |  |  |   |   |              |
| Signature   |  |   |  | MONTH DAY YEAR   |   |   |              |

PAH 037198

**LAND DISPOSAL NOTIFICATION/CERTIFICATION  
FORM for PROCESS WASTES**

**ENVIRITE OF PENNSYLVANIA, INC.**

The purpose of this document is to provide notification — and if appropriate, certification — relating to the waste referenced herein, as required by the land disposal restrictions codified at 40 CFR Part 268.

Instructions for completing this form: For each waste stream referenced on this form, please complete Sections 1 through 5, Section 7, and other sections as applicable. To complete Section 7, please note that only one type of notification (and/or certification) will apply to a waste stream, so please consult the following table for further instructions. Complete Section 6 only if a waste subcategory applies. Complete Section 8 only for characteristic wastes, if required by regulation. Signatures must be provided only by an authorized generator representative.

| If the waste ...,     | and/but if...  | then also complete section |
|-----------------------|--|----------------------------|
| is F or K code waste, | and it fails LDRs,   | 9                          |
| is F or K code waste, | and it meets LDRs,   | 10                         |
| is D code waste,      | and it fails LDRs for the hazardous characteristic & UHCs, | 9                          |
| was D code waste,     | and it meets LDRs for the D code, but fails for UHCs,      | 11                         |
| was D code waste,     | and it meets LDRs for both the D code and all UHCs,        | 12                         |

**SECTION 1**

Generator's Name: US Dept of the Navy - Earle Naval Weapons Station Generator's EPA #: NJ0170022172

Pick-up Address: 201 Hwy 34 South, Colt Neck, NJ 07722

Manifest Document Number: \_\_\_\_\_ State Manifest Document Number: \_\_\_\_\_

| SECTION 2       | SECTION 3           | SECTION 4                                | SECTION 5  | SECTION 6                   | SECTION 7  |
|-----------------|---------------------|--|--|-----------------------------|--|
| Manifest Item # | Envirite Approval # | EPA Hazardous Waste Number (-Waste Code) | Treatability Group: Wastewater (WW) or Nonwastewater (NWW) | Subcategory (if applicable) | Type of Notification/Certification (fill in the blank) |
| <u>11a</u>      | <u>YS3555</u>       | <u>D002, D008</u>                        | <u>NWW</u>   |                             | See section <u>9</u>                                   |
|                 |                     |  |  |                             | See section _____                                      |
|                 |                     |  |  |                             | See section _____                                      |
|                 |                     |  |  |                             | See section _____                                      |

**SECTION 8** Underlying Hazardous Constituents (UHCs) (For each waste stream for which they must be identified, please identify all UHCs, or indicate that they are identified in an attachment to this form.)

\_\_\_\_\_

**SECTION 9** To be land disposed, this waste must meet applicable land disposal restrictions treatment standards in 40 CFR 268 Subpart D.

Printed Name: DENNIS SWALLOW Signature: [Signature] Date: 6/22/04

**SECTION 10** I certify under penalty of law that I have personally examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR part 268 subpart D. I believe that the information I submitted is true, accurate, and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION 11** I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic. This decharacterized waste contains underlying hazardous constituents that require further treatment to meet universal treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION 12** I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 to remove the hazardous characteristic and that underlying hazardous constituents, as defined in § 268.2(i) have been treated on-site to meet the § 268.48 Universal Treatment Standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPENDIX D**

**DAILY PRODUCTION REPORTS**

# CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

REPORT DATE **5-10-04**

CONTRACT NO. N62472-99D-0032  
 TITLE AND LOCATION MINE ACTUATOR REMOVAL, SITE 48 POND

REPORT NO. 1

CONTRACTOR TETRA TECH FW

Superintendent **CURT DEWOLF - Monday**

AM WEATHER **Cloudy** PM WEATHER **PT. Cloudy**

MAX TEMP (F) **76** MIN TEMP (F) **63**

**WORK PERFORMED TODAY**

| SCHEDULE ACTIVITY NO. | WORK LOCATION AND DESCRIPTION                | EMPLOYER | NUMBER | TRADE    | HRS |
|-----------------------|--|----------|--------|----------|-----|
|                       | • Review H/S - w/P Work-plans                | TTFWI    | 1      | SUPT     | 10  |
|                       | • UXO Call Steve Neill                       | TTFWI    | 1      | OPERATOR | 10  |
|                       | • H/S CRU TTFWI Program team                 | TTFWI    | 1      | LABORER  | 10  |
|                       | • Mobilization All Supplies & TRAC EXCAVATOR |          |        |          |     |
|                       |  |          |        |          |     |
|                       |  |          |        |          |     |
|                       |  |          |        |          |     |
|                       |  |          |        |          |     |
|                       |  |          |        |          |     |
|                       |  |          |        |          |     |

|                   |   |   |  |  |           |
|-------------------|---|---|--|--|-----------|
| <b>JOB SAFETY</b> | WAS A JOB SAFETY MEETING HELD THIS DATE?<br>(IF YES attach copy of the meeting minutes)                                     | <input checked="" type="checkbox"/> YES | <input type="checkbox"/> NO            | TOTAL WORK HOURS ON JOB SITE THIS DATE, INCL CONT SHEETS | <b>30</b> |
|                   | WERE THERE ANY LOST TIME ACCIDENTS THIS DATE?<br>(IF YES ATtatch Copy of Completed OSHA Report)                             | <input type="checkbox"/> YES            | <input checked="" type="checkbox"/> NO | CUMILATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT      | <b>0</b>  |
|                   | WAS CRANE/MANLIFT/TRENCHING/SCAFFOLDING/HV ELC./HIGH WORK/HAZMAT WORK DONE?   | <input type="checkbox"/> YES            | <input checked="" type="checkbox"/> NO | TOTAL WORK HOURS FROM START OF CONSTRUCTION              | <b>30</b> |
|                   | WAS HAZARDOUS MATERIALS/WASTE RELEASED INTO THE ENVIRONMENT?<br>(if YES attach description of incident and proposed action) | <input type="checkbox"/> YES            | <input checked="" type="checkbox"/> NO |  |           |

|                       |  |                                       |
|-----------------------|--|---------------------------------------|
| Schedule Activity No. | LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED | [X] SAFETY REQUIREMENTS HAVE BEEN MET |
|                       | • UXO Teleconference<br>• ESQ/H/S Teleconference             | <input checked="" type="checkbox"/>   |
|                       |  | <input type="checkbox"/>              |
|                       |  | <input type="checkbox"/>              |
|                       |  | <input type="checkbox"/>              |

| EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATED SCHEDULE ACTIVITY NUMBER) |             |                                   |
|--|-------------|-----------------------------------|
| Schedule Activity No.  | Submittal # | Description of Equipment Received |
|  |             | • L                               |
|  |             |                                   |
|  |             |                                   |
|  |             |                                   |

| CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER. |       |  |            |
|---|-------|--|------------|
| Schedule Activity No.   | OWNER | Description of Construction Equipment Used Today (incl. Make and Model)        | Hours used |
|   |       | • EXCAVATOR<br>• 2 Chain Saws<br>• Drums<br>• misc. Supplies<br>• H/S Supplies |            |
|   |       |  |            |
|   |       |  |            |
|   |       |  |            |

| Schedule Activity No. | Remarks |
|-----------------------|---------|
|                       |         |
|                       |         |
|                       |         |
|                       |         |

  
 CONTRACTOR/SUPERINTENDENT

DATE **5-10-04**

# CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

REPORT DATE **5-11-04**

CONTRACT NO. N62472-99D-0032  
 TITLE AND LOCATION MINE ACTUATOR REMOVAL, SITE 48 POND

REPORT NO. **X 2**

CONTRACTOR TETRA TECH FW  
 Superintendent CURT DEWOLF

- Tuesday

AM WEATHER **High Clouds** PM WEATHER **High Clouds**

MAX TEMP (F) **89** MIN TEMP (F) **64**

### WORK PERFORMED TODAY

| SCHEDULE ACTIVITY NO. | WORK LOCATION AND DESCRIPTION                           | EMPLOYER | NUMBER | TRADE    | HRS |
|-----------------------|---|----------|--------|----------|-----|
|                       | • Cut All Trees Required                                | TTFWI    | 1      | SUPT     | 10  |
|                       | • Chip All Trees Required                               | TTFWI    | 1      | OPERATOR | 10  |
|                       | • Begin EXPOSING /collecting Actuators - UNPLANNED AREA | TTFWI    | 1      | LABORER  | 10  |
|                       | • GPS Log Dredge MOUNDS                                 |          |        |          |     |

|                  |   |               |              |  |           |
|------------------|---|---------------|--------------|--|-----------|
| ..... JOB SAFETY | WAS A JOB SAFETY MEETING HELD THIS DATE?<br>(IF YES attach copy of the meeting minutes)                                     | ..... [X] YES | ..... [ ] NO | TOTAL WORK HOURS ON JOB SITE THIS DATE, INCL. CONT. SHEETS | <b>30</b> |
|                  | WERE THERE ANY LOST TIME ACCIDENTS THIS DATE?<br>(IF YES ATTACH COPY OF COMPLETED OSHA REPORT)                              | ..... [ ] YES | ..... [X] NO | CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT        | <b>30</b> |
|                  | WAS CRANE/MANLIFT/TRENCHING/SCAFFOLDING/HV. ELC./HIGH WORK/HAZMAT. WORK DONE?   | ..... [ ] YES | ..... [X] NO | TOTAL WORK HOURS FROM START OF CONSTRUCTION                | <b>60</b> |
|                  | WAS HAZARDOUS MATERIALS/WASTE RELEASED INTO THE ENVIRONMENT?<br>(if YES attach description of incident and proposed action) | ..... [ ] YES | ..... [X] NO |  |           |

| Schedule Activity No. | LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED | [X] SAFETY REQUIREMENTS HAVE BEEN MET |
|-----------------------|--|---------------------------------------|
|                       | TAILGATE Mtg.  | [X]                                   |

| EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATED SCHEDULE ACTIVITY NUMBER) |             |                                   |
|--|-------------|-----------------------------------|
| Schedule Activity No.  | Submittal # | Description of Equipment Received |
|  |             |                                   |

| CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER. |       |   |            |
|---|-------|---|------------|
| Schedule Activity No.   | OWNER | Description of Construction Equipment Used Today (incl. Make and Model) | Hours used |
|   |       | CHAIN SAWS  |            |
|   |       | EXCAVATOR   |            |
|   |       | Chipper   |            |

| Schedule Activity No. | Remarks                            |
|-----------------------|------------------------------------|
|                       | • ONE DRAW FILED TODAY (ACTUATORS) |
|                       | • ONE DRAW TO DATE                 |

Curt Dewolf      **5-11-04**  
 CONTRACTOR/SUPERINTENDENT      DATE

# CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

REPORT DATE **5-12-04**  
 REPORT NO. **X3**

CONTRACT NO. **N62472-99D-0032**  
 TITLE AND LOCATION **MINE ACTUATOR REMOVAL, SITE 48 POND**

CONTRACTOR **TETRA TECH FW**

Superintendent **WEDNESDAY**  
**CURT DEWOLF**

AM WEATHER **Clear** PM WEATHER **LATE PM T/Storm** MAX TEMP (F) **86** MIN TEMP (F) **68**

## WORK PERFORMED TODAY

| SCHEDULE ACTIVITY NO. | WORK LOCATION AND DESCRIPTION | EMPLOYER | NUMBER | TRADE    | HRS |
|-----------------------|-------------------------------|----------|--------|----------|-----|
|                       | Continue Collecting           | TTFWI    | 1      | SUPT     | 10  |
|                       | Actuators - upland Area       | TTFWI    | 1      | OPERATOR | 10  |
|                       |                               | TTFWI    | 1      | LABORER  | 10  |

|   |   |   |
|---|---|---|
| ..... JOB SAFETY<br>WAS A JOB SAFETY MEETING HELD THIS DATE?<br>(IF YES attach copy of the meeting minutes)<br>..... [X] YES [ ] NO | WERE THERE ANY LOST TIME ACCIDENTS THIS DATE?<br>(IF yes ATtatch Copy of Completed OSHA Report)<br>..... [ ] YES [X] NO                             | TOTAL WORK HOURS ON JOB SITE THIS DATE, INCL CONT SHEETS<br><b>30</b> |
| WAS CRANE/MANLIFT/TRENCHING/SCAFFOLDING/HV ELC./HIGH WORK/HAZMAT WORK DONE?<br>..... [ ] YES [X] NO                                 | WAS HAZARDOUS MATERIALS/WASTE RELEASED INTO THE ENVIRONMENT?<br>(if YES attach description of incident and proposed action)<br>..... [ ] YES [X] NO | CUMILATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT<br><b>60</b>      |
|   |   | TOTAL WORK HOURS FROM START OF CONSTRUCTION<br><b>90</b>              |

| Schedule Activity No. | LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED | [X] SAFETY REQUIREMENTS HAVE BEEN MET |
|-----------------------|--|---------------------------------------|
|                       | - Tailgate Meeting   |                                       |

| Schedule Activity No. | Submittal # | Description of Equipment Received |
|-----------------------|-------------|-----------------------------------|
|                       |             |                                   |

| Schedule Activity No. | OWNER | Description of Construction Equipment Used Today (incl. Make and Model) | Hours used |
|-----------------------|-------|---|------------|
|                       |       | EXCAVATOR   |            |

| Schedule Activity No. | Remarks                   |
|-----------------------|---------------------------|
|                       | Three Drums Filled Today  |
|                       | Four Drums Filled to Date |

**Curt Dewolf** 5-12-04  
 CONTRACTOR/SUPERINTENDENT DATE



# CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

REPORT DATE **5-17-04**

CONTRACT NO.  
N62472-99D-0032

TITLE AND LOCATION  
MINE ACTUATOR REMOVAL, SITE 48 POND

REPORT NO. **05**

CONTRACTOR  
TETRA TECH FW

Superintendent  
CURT DEWOLF

**Monday**

AM WEATHER  
**HAZY**

PM WEATHER  
**HAZY**

MAX TEMP (F) **78** MIN TEMP (F) **62**

**WORK PERFORMED TODAY**

| SCHEDULE ACTIVITY NO. | WORK LOCATION AND DESCRIPTION   | EMPLOYER | NUMBER | TRADE    | HRS |
|-----------------------|---|----------|--------|----------|-----|
|                       | • Pick-up BOAT FOR Pond Work  | TTFWI    | 1      | SUPT     | 10  |
|                       | • Purchase & use WADERS WITH BOAT TO LOCATE ACT'S                     | TTFWI    | 1      | OPERATOR | 10  |
|                       | • Found Concentration AT MIDDLE OF Pond along EDGE OF Previous Dredge | TTFWI    | 1      | LABORER  | 10  |

|   |  |   |  |
|---|--|---|--|
| <p><b>JOB SAFETY</b></p>  | <p>WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES attach copy of the meeting minutes) <b>LINE</b></p> <p>WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)</p> | <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> | <p>TOTAL WORK HOURS ON JOB SITE THIS DATE, INCL CONT. SHEETS <b>30</b></p> <p>CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT <b>120</b></p> <p>TOTAL WORK HOURS FROM START OF CONSTRUCTION <b>150</b></p> |
| <p>WAS CRANE/MANLIFT/TRENCHING/SCAFFOLDING/HV ELC./HIGH WORK/HAZMAT WORK DONE?</p>  |  | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>  |  |
| <p>WAS HAZARDOUS MATERIALS/WASTE RELEASED INTO THE ENVIRONMENT? (if YES attach description of incident and proposed action)</p> |  | <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p>  |  |

|                       |  |                                       |
|-----------------------|--|---------------------------------------|
| Schedule Activity No. | LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED | [X] SAFETY REQUIREMENTS HAVE BEEN MET |
|                       | • Morning Meeting<br>MODIFIED AAA - WADING                   |                                       |

| EQUIPMENT/MATERIAL RECEIVED TODAY TO BE INCORPORATED IN JOB (INDICATED SCHEDULE ACTIVITY NUMBER) |             |                                   |
|--|-------------|-----------------------------------|
| Schedule Activity No.  | Submittal # | Description of Equipment Received |
|  |             |                                   |
|  |             |                                   |

| CONSTRUCTION AND PLANT EQUIPMENT ON JOB SITE TODAY. INDICATE HOURS USED AND SCHEDULE ACTIVITY NUMBER. |       |   |            |
|---|-------|---|------------|
| Schedule Activity No.   | OWNER | Description of Construction Equipment Used Today (incl. Make and Model) | Hours used |
|   |       | EXCAVATOR   |            |
|   |       | ALUMINUM BOAT   |            |

| Schedule Activity No.             | Remarks  |
|-----------------------------------|--|
|                                   | Removed Approx 1.5 Drums of ACTUATORS<br>Additional Drums to arrive tomorrow<br>to be drummed tomorrow (to date 605 Drums) |
| <p><b>Curt Dewolf</b> 5-17-04</p> |  |

CONTRACTOR/SUPERINTENDENT

DATE

# CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

REPORT DATE **5-18-04**  
 REPORT NO. **x 6**

CONTRACT NO. N62472-99D-0032  
 TITLE AND LOCATION MINE ACTUATOR REMOVAL, SITE 48 POND

CONTRACTOR TETRA TECH FW

Superintendent **Tuesday**  
 CURT DEWOLF

AM WEATHER **cloudy** PM WEATHER **High Clouds**

MAX TEMP (F) **85** MIN TEMP (F) **67**

## WORK PERFORMED TODAY

| SCHEDULE ACTIVITY NO. | WORK LOCATION AND DESCRIPTION               | EMPLOYER | NUMBER | TRADE    | HRS |
|-----------------------|---|----------|--------|----------|-----|
|                       | • Continue Search in pond w/ BOAT           | TTFWI    | 1      | SUPT     | 10  |
|                       | • NO more found                             | TTFWI    | 1      | OPERATOR | 10  |
|                       | • Clear BOAT & Return                       | TTFWI    | 1      | LABORER  | 10  |
|                       | • Purchase & place lime, seed, fertilizer   |          |        |          |     |
|                       | • STAGE ALL DRUMS FOR MOVE TO BUILDING C-63 |          |        |          |     |

|  |   |  |     |
|--|---|--|-----|
| JOB SAFETY   | WAS A JOB SAFETY MEETING HELD THIS DATE? (IF YES attach copy of the meeting minutes)<br><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO                                     | TOTAL WORK HOURS ON JOB SITE THIS DATE, INCL. CONT. SHEETS | 30  |
|  | WERE THERE ANY LOST TIME ACCIDENTS THIS DATE? (IF YES ATTACH COPY OF COMPLETED OSHA REPORT)<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO                              | CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT        | 150 |
| WAS CRANE/MANLIFT/TRENCHING/SCAFFOLDING/HV ELC./HIGH WORK/HAZMAT WORK DONE?<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | WAS HAZARDOUS MATERIALS/WASTE RELEASED INTO THE ENVIRONMENT? (IF YES attach description of incident and proposed action)<br><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | TOTAL WORK HOURS FROM START OF CONSTRUCTION                | 180 |

|                       |  |   |
|-----------------------|--|---|
| Schedule Activity No. | LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED | <input checked="" type="checkbox"/> SAFETY REQUIREMENTS HAVE BEEN MET |
|                       | <b>Judge Mtg.</b>  |   |

| Schedule Activity No. | Submittal # | Description of Equipment Received   |
|-----------------------|-------------|---|
|                       |             | <b>AVERAGE 230 PER DRUM X 8.5 DRUMS = APPROX. 1,955 ACTUATORS RECOVERED</b> |

| Schedule Activity No. | OWNER | Description of Construction Equipment Used Today (incl. Make and Model) | Hours used |
|-----------------------|-------|---|------------|
|                       |       | <b>EXTRACTOR BOAT - DEMOB TODAY (5 more)</b>                            |            |

| Schedule Activity No. | Remarks  |
|-----------------------|--|
|                       | • 2.5 DRUMS FILLED FROM POND<br>• 6.5 DRUMS PREVIOUSLY FILLED FROM UPLAND AREA<br>9 DRUMS TOTAL FOR PROJECT FILLED<br>(LAST DRUM 1/2 FULL) |

CONTRACTOR/SUPERINTENDENT \_\_\_\_\_ DATE \_\_\_\_\_

# CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

REPORT DATE **5-19-04**

CONTRACT NO.  
N62472-99D-0032

TITLE AND LOCATION  
MINE ACTUATOR REMOVAL, SITE 48 POND

REPORT NO.  
**X7**

CONTRACTOR  
TETRA TECH FW

Superintendent  
CURT DEWOLF

**Wednesday**

AM WEATHER **Cloudy-Showers**

PM WEATHER **Cloudy-Rain**

MAX TEMP (F) **75** MIN TEMP (F) **62**

## WORK PERFORMED TODAY

| SCHEDULE ACTIVITY NO. | WORK LOCATION AND DESCRIPTION                                       | EMPLOYER | NUMBER | TRADE    | HRS |
|-----------------------|---|----------|--------|----------|-----|
|                       | • Complete seed fert, lime<br>• Place Hay mulch over Restored Areas | TTFWI    | 1      | SUPT     | 10  |
|                       |   | TTFWI    | 1      | OPERATOR | 10  |
|                       |   | TTFWI    | 1      | LABORER  | 10  |
|                       | • Re-locate all drums to Building C-63                              |          |        |          |     |
|                       | Housekeeping for Demob  |          |        |          |     |

|   |   |
|---|---|
| JOB SAFETY<br>WAS A JOB SAFETY MEETING HELD THIS DATE?<br>(IF YES attach copy of the meeting minutes)<br>[X] YES [ ] NO<br>WERE THERE ANY LOST TIME ACCIDENTS THIS DATE?<br>(IF YES Attach Copy of Completed OSHA Report)<br>[ ] YES [X] NO<br>WAS CRANE/MANLIFT/TRENCHING/SCAFFOLDING/HV ELC./HIGH WORK/HAZMAT WORK DONE?<br>[ ] YES [X] NO<br>WAS HAZARDOUS MATERIALS/WASTE RELEASED INTO THE ENVIRONMENT?<br>(if YES attach description of incident and proposed action)<br>[ ] YES [X] NO | TOTAL WORK HOURS ON JOB SITE THIS DATE, INCL CONT SHEETS<br><b>30</b><br>CUMULATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT<br><b>180</b><br>TOTAL WORK HOURS FROM START OF CONSTRUCTION<br><b>210</b> |
|---|---|

|                       |  |                                       |
|-----------------------|--|---------------------------------------|
| Schedule Activity No. | LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED | [X] SAFETY REQUIREMENTS HAVE BEEN MET |
|                       | <b>Toolbox mtg</b>   |                                       |

| Schedule Activity No. | Submittal # | Description of Equipment Received |
|-----------------------|-------------|-----------------------------------|
|                       |             | <b>Hay Bales</b>                  |

| Schedule Activity No. | OWNER | Description of Construction Equipment Used Today (incl. Make and Model) | Hours used |
|-----------------------|-------|---|------------|
|                       |       | <b>EXCAVATOR</b><br>• porta POT removed from site today                 |            |

| Schedule Activity No. | Remarks  |
|-----------------------|--|
|                       | <b>Final inspection scheduled for tomorrow</b> |

**Curt Wolf** 5-19-04  
CONTRACTOR/SUPERINTENDENT DATE

# CONTRACTOR PRODUCTION REPORT

(ATTACH ADDITIONAL SHEETS IF NECESSARY)

REPORT DATE **5-20-04**  
 REPORT NO. **x8**

CONTRACT NO. N62472-89D-0032  
 TITLE AND LOCATION  
 MINE ACTUATOR REMOVAL, SITE 48 POND

CONTRACTOR  
 TETRA TECH FW

Superintendent  
 CURT DEWOLF *Thursday*

AM WEATHER \_\_\_\_\_ PM WEATHER \_\_\_\_\_ MAX TEMP. (F) \_\_\_\_\_ MIN TEMP. (F) \_\_\_\_\_

### WORK PERFORMED TODAY

| SCHEDULE ACTIVITY NO. | WORK LOCATION AND DESCRIPTION  | EMPLOYER | NUMBER | TRADE    | HRS |
|-----------------------|--|----------|--------|----------|-----|
|                       | <ul style="list-style-type: none"> <li>• Accepted Final Pwsp.</li> <li>• Begin/complete Demob</li> </ul> | TTFWI    | 1      | SUPT     | 10  |
|                       |  | TTFWI    | 1      | OPERATOR | 10  |
|                       |  | TTFWI    | 1      | LABORER  | 10  |
|                       |  |          |        |          |     |
|                       |  |          |        |          |     |
|                       |  |          |        |          |     |
|                       |  |          |        |          |     |
|                       |  |          |        |          |     |
|                       |  |          |        |          |     |
|                       |  |          |        |          |     |
|                       |  |          |        |          |     |

|            |   |   |   |     |
|------------|---|---|---|-----|
| JOB SAFETY | WAS A JOB SAFETY MEETING HELD THIS DATE?<br>(IF YES attach copy of the meeting minutes)                                     | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | TOTAL WORK HOURS ON JOB SITE THIS DATE, INCL CON'T SHEETS | 30  |
|            | WERE THERE ANY LOST TIME ACCIDENTS THIS DATE?<br>(IF YES ATtatch Copy of Completed OSHA Report)                             | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | CUMILATIVE TOTAL OF WORK HOURS FROM PREVIOUS REPORT       | 210 |
|            | WAS CRANE/MANLIFT/TRENCHING/SCAFFOLDING/HV ELC./HIGH WORK/HAZMAT WORK DONE?   | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | TOTAL WORK HOURS FROM START OF CONSTRUCTION               | 240 |
|            | WAS HAZARDOUS MATERIALS/WASTE RELEASED INTO THE ENVIRONMENT?<br>(if YES attach description of incident and proposed action) | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |   |     |

|                       |  |   |
|-----------------------|--|---|
| Schedule Activity No. | LIST SAFETY ACTIONS TAKEN TODAY/SAFETY INSPECTIONS CONDUCTED | <input checked="" type="checkbox"/> SAFETY REQUIREMENTS HAVE BEEN MET |
|                       | <i>Tailgate Mtg</i>  |   |
|                       |  |   |
|                       |  |   |
|                       |  |   |

| Schedule Activity No. | Submittal # | Description of Equipment Received |
|-----------------------|-------------|-----------------------------------|
|                       |             |                                   |
|                       |             |                                   |
|                       |             |                                   |
|                       |             |                                   |

| Schedule Activity No. | OWNER | Description of Construction Equipment Used Today ( incl. Make and Model) | Hours used |
|-----------------------|-------|--|------------|
|                       |       | <i>Excavator &amp; all materials Demobed Today</i>                       |            |
|                       |       |  |            |
|                       |       |  |            |
|                       |       |  |            |

| Schedule Activity No. | Remarks  |
|-----------------------|--|
|                       | <ul style="list-style-type: none"> <li>• Project Complete</li> <li>• Drums To Be Shipped Later Date</li> </ul> |
|                       |  |
|                       |  |

*Curt Dewolf*  
 CONTRACTOR/SUPERINTENDENT      DATE **5-20-04**

**APPENDIX E**  
**PHOTOGRAPHIC DOCUMENTATION**



















