

3M Company

Site Investigation Report

Rail Lots – BRRTS #02-37-587000
Wausau, Marathon County, Wisconsin

February 2022

Site Investigation Report

Rail Lots – BRRTS #02-37-587000
Wausau, Marathon County, Wisconsin

February 8, 2022

Prepared By:

Arcadis U.S., Inc.
126 North Jefferson Street, Suite 400
Milwaukee
Wisconsin 53202
Phone: 414 276 7742
Fax: 414 276 7603

Prepared For:

Matt Thompson
Wisconsin Department of Natural Resources
1300 Clairemont Avenue
Eau Claire
Wisconsin 54702

Our Ref:

30087606



Luke Reuteman
Field Geologist



Trena Seilheimer
Project Manager



Jennine Trask
Account Leader

This document is intended only for the use of the individual or entity for which it was prepared and may contain information that is privileged, confidential and exempt from disclosure under applicable law. Any dissemination, distribution or copying of this document is strictly prohibited.

Contents

1	Introduction	1
2	Site Investigation	1
2.1	Site Geologic and Hydrogeologic Conditions	2
2.2	Subsurface Investigation	2
3	Site Investigation Results	2
4	Conclusion and Recommendations	2

Tables

1	Summary of Sample Locations
2	Summary of Soil Analytical Results

Figures

1	Site Location Map
2	Site Layout Map
3	Soil Boring Location Map

Appendices

A	Soil Boring Logs
B	Abandonment Logs
C	Laboratory Analytical Report

1 Introduction

Arcadis U.S., Inc. (Arcadis) has prepared this Site Investigation Report (SIR) on behalf of the 3M Company (3M) for the supplemental investigation of arsenic in soil at the three lots which consist of railroad track and right-of-way (ROW) located from Sherman Street to West Thomas Street in Wausau, Marathon County, Wisconsin (the Site, **Figure 1**). The supplemental investigation activities were outlined in the Revised Investigation Activities Work Plan dated September 8, 2021 and approved by the Wisconsin Department of Natural Resources (WDNR) via email on September 29, 2021. The activities were conducted at the Site by Arcadis on November 12, 2021.

The Site consists of three lots approximately 0.23 acres (Lot 1), 1.74 acres (Lot 2), and 0.29 acres (Lot 3) in size and consists of railroad track and ROW (**Figure 2**). According to historical aerial photographs and topographic maps, the Site appears to have been developed with railroad tracks since 1898. 3M purchased the Site in November 2020.

The Site is surrounded by Bureau for Remediation and Redevelopment Tracking System Activity #02-37-000273 (3M Wausau Downtown Parking Lot, Closed) to the west and #02-37-000006 (Wauleco SNE Corp, Open) to the east. The adjacent properties to the east and west of the Site have been owned by 3M since at least 1961 and the current development footprint surrounding the Site has been consistent since at least 1998.

In September 2020, Arcadis conducted a Phase II Environmental Site Assessment of the Site to support a property transaction. A total of five soil borings were advanced throughout the Site with three being converted to temporary monitoring wells. Based on the analytical results, the *Notification for Hazardous Substance Discharge (Non-Emergency Only) Form 4400-225* (WDNR Notification Form) was submitted to the WDNR on December 18, 2020, by 3M. The WDNR Notification Form included a site map, soil and groundwater analytical result tables, laboratory reports, and identified the arsenic exceedances at SB-04 (0 to 4 feet below ground surface [bgs]) and SB-05 (0 to 4 feet bgs) as the reason for the submittal.

A letter was received from the WDNR dated February 26, 2021, which outlined the requirements for the Site. Based on the property transaction completed between 3M and Canadian National Railway in November 2020 and the discussion with WDNR Matt Thompson on June 24, 2021, 3M is the current owner of the Site and agreed to work with the WDNR to complete additional shallow soil sampling related to arsenic exceedances at SB-01 (0 to 4 feet bgs) at 7.7 milligram per kilogram (mg/kg), SB-02 (0 to 4 feet bgs) at 3.3 mg/kg, SB-04 (0 to 4 feet bgs) at 55 mg/kg and SB-05 (0 to 4 feet bgs) at 8.6 mg/kg.

The supplemental investigation activities were outlined in the Revised Investigation Activities Work Plan dated September 8, 2021 and approved by the WDNR via email on September 29, 2021. The activities were conducted by Arcadis on November 12, 2021.

2 Site Investigation

The November 2021 supplemental investigation was performed to evaluate arsenic in soil at the Site. As outlined in the Revised Investigation Activities Work Plan, up to 13 new soil borings were proposed to be advanced to depths of four feet bgs.

Drilling activities were coordinated with Braun Intertec of La Crosse, Wisconsin. Two samples from each soil boring were collected and submitted to Eurofins TestAmerica in University Park, Illinois for laboratory analysis.

Table 1 presents the sampling summary for the site investigation activities.

2.1 Site Geologic and Hydrogeologic Conditions

The Site's near-surface geology consists of sedimentary-derived deposits. Ground surface cover across the Site consists of either gravel, asphalt, or grass. Underlying the surface cover material are sedimentary-derived deposits consisting of sand and silt units. The sand and silt units contain little to some gravel (fine to coarse) and trace cobbles and boulders. These units were encountered from below the ground surface cover to the bottom of each borehole.

2.2 Subsurface Investigation

Prior to any intrusive work, site utilities were cleared in accordance with the Arcadis Utility Locate Policy, with a minimum of three lines of evidence. Arcadis contacted the Wisconsin 811 One-Call, contracted Ground Penetrating Radar Systems, Inc., and reviewed figures provided by the facility to confirm the locations of known utilities.

On November 12, 2021, 12 new soil borings were advanced, using direct-push technology. Soil borings were advanced to a depth of four feet bgs at each location and continuous soil cores were logged by Arcadis field personnel prior to sampling. Two samples from each boring were collected, 0 to 2 feet bgs and 2 to 4 feet bgs and submitted for arsenic laboratory analysis. Following completion of each boring, each was abandoned and patched to match ground surface. One proposed location (SB-02B) was not completed due to drill rig inaccessibility. Soil boring logs are included in **Appendix A** and soil boring abandonment logs are included in **Appendix B**.

Soil cuttings generated during the site investigation activities were collected in one 55-gallon steel drum. The drum was staged at the 3M facility awaiting disposal to the 3M-Cottage Grove, Minnesota facility.

3 Site Investigation Results

A total of 27 soil samples (24 investigative and three duplicates) were collected from the 12 new soil boring locations and analyzed for arsenic, as outlined in **Table 1**. Soil data was compared to the Natural Resources (NR) 720 Wisconsin Administrative Code (WAC) Direct Contact Industrial (DCI) and Leaching Soil to Groundwater screening criteria. Arsenic concentrations in soil were not compared to the arsenic NR720 Wisconsin Background Threshold Value (8 mg/kg) per previous communications with the WDNR.

Arsenic was detected in 26 of the 27 collected soil samples. Thirteen soil samples exceeded the NR720 WAC DCI screening criteria of 3 mg/kg:

- SB-1A (0-2), 12 mg/kg
- SB-1A (2-4), 3.2 mg/kg
- SB-2A (0-2), 3.2 mg/kg
- SB-2C (0-2), 3.2 mg/kg
- SB-4A (0-2), 3.8 mg/kg
- SB-4B (0-2), 64 mg/kg
- SB-4C (0-2), 3.1 mg/kg
- SB-4C (2-4), 3.7 mg/kg
- SB-5A (0-2), 6.1 mg/kg
- SB-5A (2-4), 5.7 mg/kg
- SB-5B (0-2), 5.9 mg/kg
- SB-5B (2-4), 9.2 mg/kg
- SB-5C (0-2), 7.8 mg/kg

Table 2 presents the soil analytical results, **Figure 3** presents a summary of sample locations and analytical results, and the soil analytical laboratory report is included in **Appendix C**.

4 Conclusion and Recommendations

Based on the soil analytical results, 3M is recommending the following next steps which are also presented on **Figure 3**:

- Lot 1: As discussed with WDNR on January 28, 2022, excavation activities were conducted within a majority of the lot in December 2020 to support drainage issues. Soils were excavated to approximately 2 feet bgs with new gravel/ballast being backfilled throughout the excavation extents. The SB-01 location from September 2020 was located within the excavation extents.
 - Excavation and backfill activities are proposed throughout the remainder of the Lot 1 parcel boundaries, not part of the December 2020 excavation/backfill activity, as shown on **Figure 3**.
 - As discussed with WDNR on January 28, 2022, no further off-site delineation activities are being proposed. The proposed excavation and backfill activities will provide a clean buffer between the rail tracks and the parcel boundary, a distance of nearly 30 feet.
- Lot 2 (SB-02 area)
 - Due to the arsenic concentrations being slightly above the NR720 WAC DCI screening criteria of 3 mg/kg and the constraints of being able to complete remedial actions in this area, no further delineation activities are being proposed. As discussed with WDNR on January 28, 2022, a land-use restriction may be proposed.
- Lot 2 (SB-04 area): As discussed with WDNR on January 28, 2022, and as outlined in the As-Built Report dated February 2, 2022, the excavation/cover activities associated with the drainage project were completed in December 2021. The SB-04 location from September 2020 was located within the excavation extents.
 - Excavation and backfill activities are proposed near SB-04A. The excavation extents would be to the drainage project extents to the north and south, to the parcel boundary to the west, and to the rail tracks to the east, as shown on **Figure 3**.
 - As discussed with WDNR on January 28, 2022, no further delineation activities are being proposed. The proposed excavation and backfill activities will provide a clean buffer between the rail tracks and the west parcel boundary, a distance of nearly 25 feet.
 - Excavation and backfill activities are proposed in the southeast corner of Lot 2 near SB-04B and SB-04C. The excavation extents would be to the drainage project extents to the north, to the rail tracks to the west, to the parcel boundary to the south, and to the building to the east, as shown on **Figure 3**.
- Lot 3
 - Excavation and backfill activities are proposed throughout the entire eastern portion of the lot. The excavation extents would be from Thomas Street to the eastern and southern extent of the parcel boundary and from the rail tracks to the parcel boundary to the east, as shown on **Figure 3**.

A Remedial Action Plan will be prepared and submitted for WDNR review which will provide details for the recommendations above.

Tables

Table 1
Summary of Sample Locations
3M Company
Rail Lots
Wausau, WI

Location ID	Latitude	Longitude	Boring Install Date	Total Depth Drilled (ft bgs)	Soil Sample Intervals Collected (ft bgs)	Soil Sample Analysis
						RCRA Metals
Soil Borings						
SB-01A	44°57'8.92"N	89°38'16.14"W	11/12/2021	4	0-2, 2-4	Arsenic Only
SB-02A	44°57'6.83"N	89°38'14.43"W	11/12/2021	4	0-2, 2-4	Arsenic Only
SB-02B	44°57'5.88"N	89°38'13.92"W	11/12/2021	Soil boring location unable to be completed due to drill rig inaccessibility.		
SB-02C	44°57'6.33"N	89°38'14.14"W	11/12/2021	4	0-2, 2-4	Arsenic Only
SB-02D	44°57'6.34"N	89°38'14.68"W	11/12/2021	4	0-2, 2-4	Arsenic Only
SB-04A	44°56'55.26"N	89°38'14.49"W	11/12/2021	4	0-2, 2-4	Arsenic Only
SB-04B	44°56'54.61"N	89°38'13.92"W	11/12/2021	4	0-2, 2-4	Arsenic Only
SB-04C	44°56'54.79"N	89°38'13.80"W	11/12/2021	4	0-2, 2-4	Arsenic Only
SB-04D	44°56'54.90"N	89°38'14.32"W	11/12/2021	4	0-2, 2-4	Arsenic Only
SB-05A	44°56'53.20"N	89°38'13.95"W	11/12/2021	4	0-2, 2-4	Arsenic Only
SB-05B	44°56'52.85"N	89°38'13.95"W	11/12/2021	4	0-2, 2-4	Arsenic Only
SB-05C	44°56'53.02"N	89°38'13.77"W	11/12/2021	4	0-2, 2-4	Arsenic Only
SB-05D	44°56'53.01"N	89°38'14.41"W	11/12/2021	4	0-2, 2-4	Arsenic Only

Acronyms and Abbreviations:

bgs - below ground surface

ft - feet

RCRA - Resource Conservation and Recovery Act

Table 2
Summary of Soil Analytical Results
3M Company
Rail Lots
Wausau, WI

Chemical Name	NR720 Wisconsin Administrative Code Screening Criteria ¹		Location ID	SB-01	SB-01	SB-01	SB-01A	SB-01A	SB-02	SB-02
	Direct Contact Industrial	Leaching Soil to Groundwater	Sample ID	SB-01 (0-4)	SB-01 (28-31)	DUP-01 (092620)	SB-01A (0-2)	SB-01A (2-4)	SB-02 (0-4)	SB-02 (24-26)
			Sample Date	9/26/2020	9/26/2020	9/26/2020	11/12/2021	11/12/2021	9/30/2020	9/30/2020
			Sample Depth	0-4 ft bgs	28-31 ft bgs	28-31 ft bgs	0-2 ft bgs	2-4 ft bgs	0-4 ft bgs	24-26 ft bgs
Unit										
RCRA Metals (Method SW846 6020A)										
Arsenic	3	0.584	mg/kg	7.7*	0.99	1.2	12	3.2	3.3	1.1
Chemical Name	NR720 Wisconsin Administrative Code Screening Criteria ¹		Location ID	SB-02A	SB-02A	SB-02C	SB-02C	SB-02D	SB-02D	SB-02D
	Direct Contact Industrial	Leaching Soil to Groundwater	Sample ID	SB-02A (0-2)	SB-02A (2-4)	SB-02C (0-2)	SB-02C (2-4)	SB-02D (0-2)	SB-02D (2-4)	DUP-02 (111221)
			Sample Date	11/12/2021	11/12/2021	11/12/2021	11/12/2021	11/12/2021	11/12/2021	11/12/2021
			Sample Depth	0-2 ft bgs	2-4 ft bgs	0-2 ft bgs	2-4 ft bgs	0-2 ft bgs	2-4 ft bgs	2-4 ft bgs
Unit										
RCRA Metals (Method SW846 6020A)										
Arsenic	3	0.584	mg/kg	3.2	< 0.49	3.2	0.77 J	2.5	1.6	2.4
Chemical Name	NR720 Wisconsin Administrative Code Screening Criteria ¹		Location ID	SB-03	SB-03	SB-04	SB-04	SB-04A	SB-04A	SB-04A
	Direct Contact Industrial	Leaching Soil to Groundwater	Sample ID	SB-03 (0-4)	SB-03 (24-27.5)	SB-04 (0-4)	SB-04 (24-26)	SB-04A (0-2)	SB-04A (2-4)	DUP-01 (111221)
			Sample Date	9/26/2020	9/26/2020	9/30/2020	9/30/2020	11/12/2021	11/12/2021	11/12/2021
			Sample Depth	0-4 ft bgs	24-27.5 ft bgs	0-4 ft bgs	24-26 ft bgs	0-2 ft bgs	2-4 ft bgs	2-4 ft bgs
Unit										
RCRA Metals (Method SW846 6020A)										
Arsenic	3	0.584	mg/kg	1.8	1	55*	0.63 J	3.8	0.73 J	0.57 J
Chemical Name	NR720 Wisconsin Administrative Code Screening Criteria ¹		Location ID	SB-04B	SB-04B	SB-04C	SB-04C	SB-04D	SB-04D	SB-05
	Direct Contact Industrial	Leaching Soil to Groundwater	Sample ID	SB-04B (0-2)	SB-04B (2-4)	SB-04C (0-2)	SB-04C (2-4)	SB-04D (0-2)	SB-04D (2-4)	SB-05 (0-4)
			Sample Date	11/12/2021	11/12/2021	11/12/2021	11/12/2021	11/12/2021	11/12/2021	9/30/2020
			Sample Depth	0-2 ft bgs	2-4 ft bgs	0-2 ft bgs	2-4 ft bgs	0-2 ft bgs	2-4 ft bgs	0-4 ft bgs
Unit										
RCRA Metals (Method SW846 6020A)										
Arsenic	3	0.584	mg/kg	64	2.4	3.1	3.7	0.77 J	0.39 J	8.6
Chemical Name	NR720 Wisconsin Administrative Code Screening Criteria ¹		Location ID	SB-05	SB-05A	SB-05A	SB-05B	SB-05B	SB-05C	SB-05C
	Direct Contact Industrial	Leaching Soil to Groundwater	Sample ID	SB-05 (29-31.5)	SB-05A (0-2)	SB-05A (2-4)	SB-05B (0-2)	SB-05B (2-4)	SB-05C (0-2)	SB-05C (2-4)
			Sample Date	9/30/2020	11/12/2021	11/12/2021	11/12/2021	11/12/2021	11/12/2021	11/12/2021
			Sample Depth	29-31.5 ft bgs	0-2 ft bgs	2-4 ft bgs	0-2 ft bgs	2-4 ft bgs	0-2 ft bgs	2-4 ft bgs
Unit										
RCRA Metals (Method SW846 6020A)										
Arsenic	3	0.584	mg/kg	1.7	6.1	5.7	5.9	9.2	7.8	1.4

Table 2
Summary of Soil Analytical Results
3M Company
Rail Lots
Wausau, WI

Chemical Name	NR720 Wisconsin Administrative Code Screening Criteria		Location ID	SB-05D	SB-05D	SB-05D
	Direct Contact Industrial	Leaching Soil to Groundwater	Sample ID	SB-05D (0-2)	SB-05D (2-4)	DUP-03 (111221)
			Sample Date	11/12/2021	11/12/2021	11/12/2021
			Sample Depth	0-2 ft bgs	2-4 ft bgs	2-4 ft bgs
			Sample Type			
Unit						
RCRA Metals (Method SW846 6020A)						
Arsenic	3	0.584	mg/kg	2.9	1.1	0.78 J

Qualifier Definitions:

< - Result < MDL
 J - Result < RL but ≥ to MDL, concentration is approximate value

Acronyms and Abbreviations:

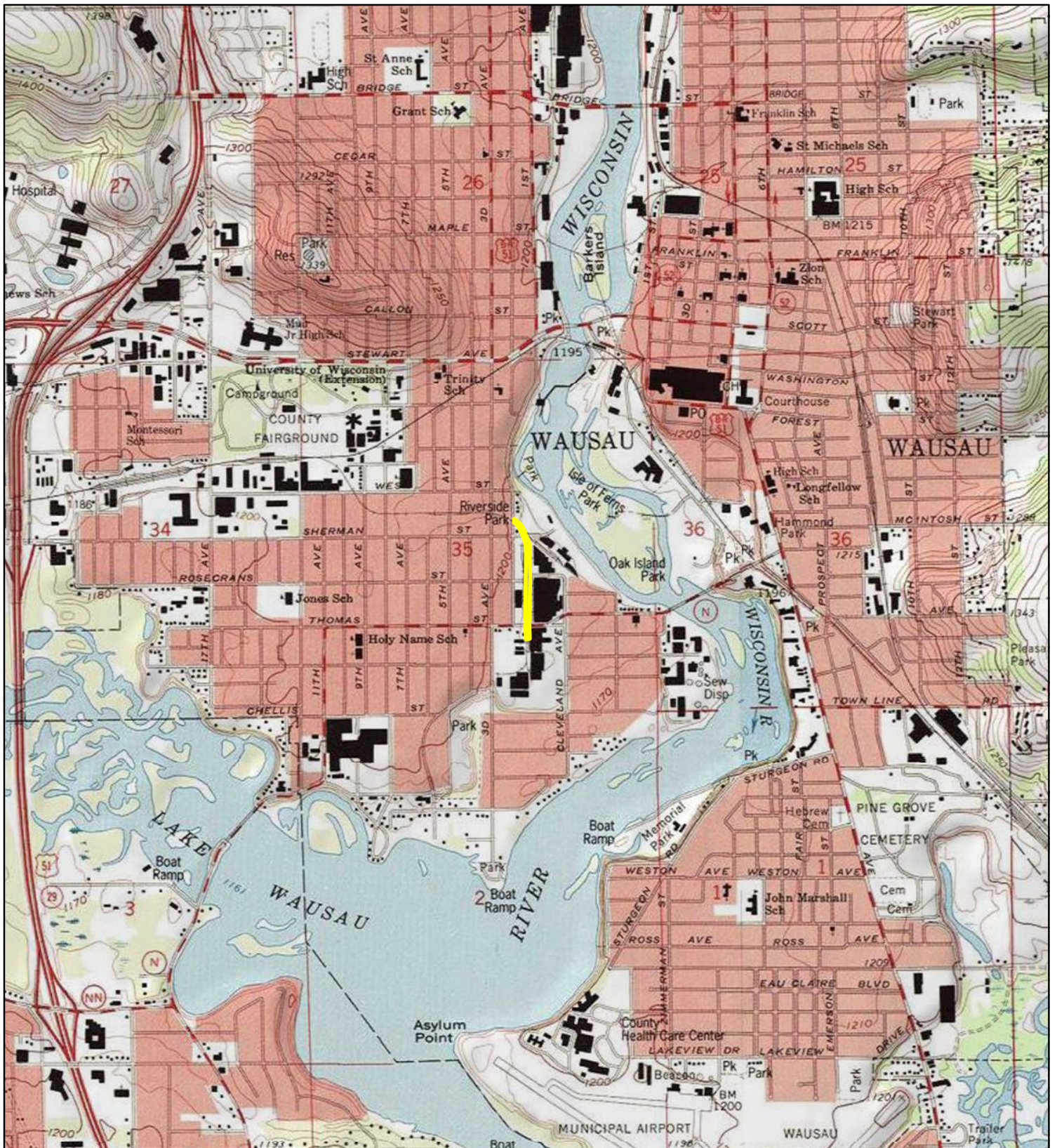
ft bgs - feet below ground surface
 ID - identification
 MDL - method detection limit
 mg/kg - milligram per kilogram
 RL - reporting limit
 RCRA - Resource Conservation and Recovery Act


Notes:

1 - Background Threshold Values: Arsenic (8 mg/kg)
 *Soil boring location/soils within excavation extents of December 2020 event (SB-01) and December 2021 event (SB-04)

Result exceeds all NR720 WAC screening criteria outlined
Result exceeds Leaching Soil to Groundwater screening criteria

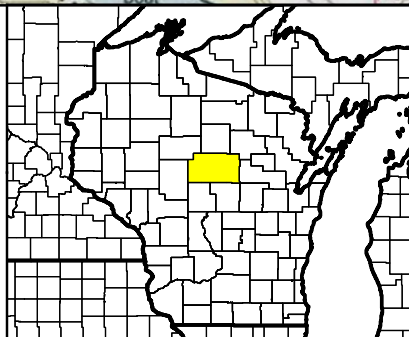
Figures



Legend
 Lot Boundary



0 2,000 4,000
 Feet



**3M COMPANY
 RAIL LOTS
 WAUSAU, MARATHON COUNTY, WI**

SITE LOCATION MAP



FIGURE
1



**BRRTS #02-37-000273
(3M WAUSAU DOWNTOWN
PARKING LOT, CLOSED)**

**BRRTS #02-37-000006
(WAULECO SNE CORP, OPEN)**

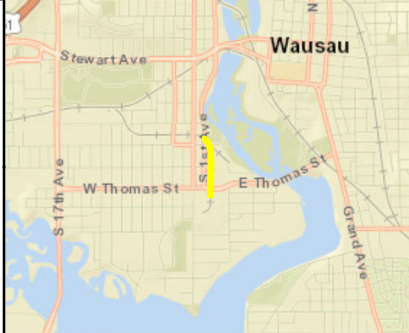
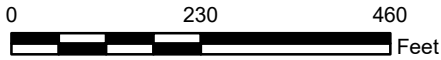
Lot 1

Lot 2

Lot 3

Legend

 Lot Boundary

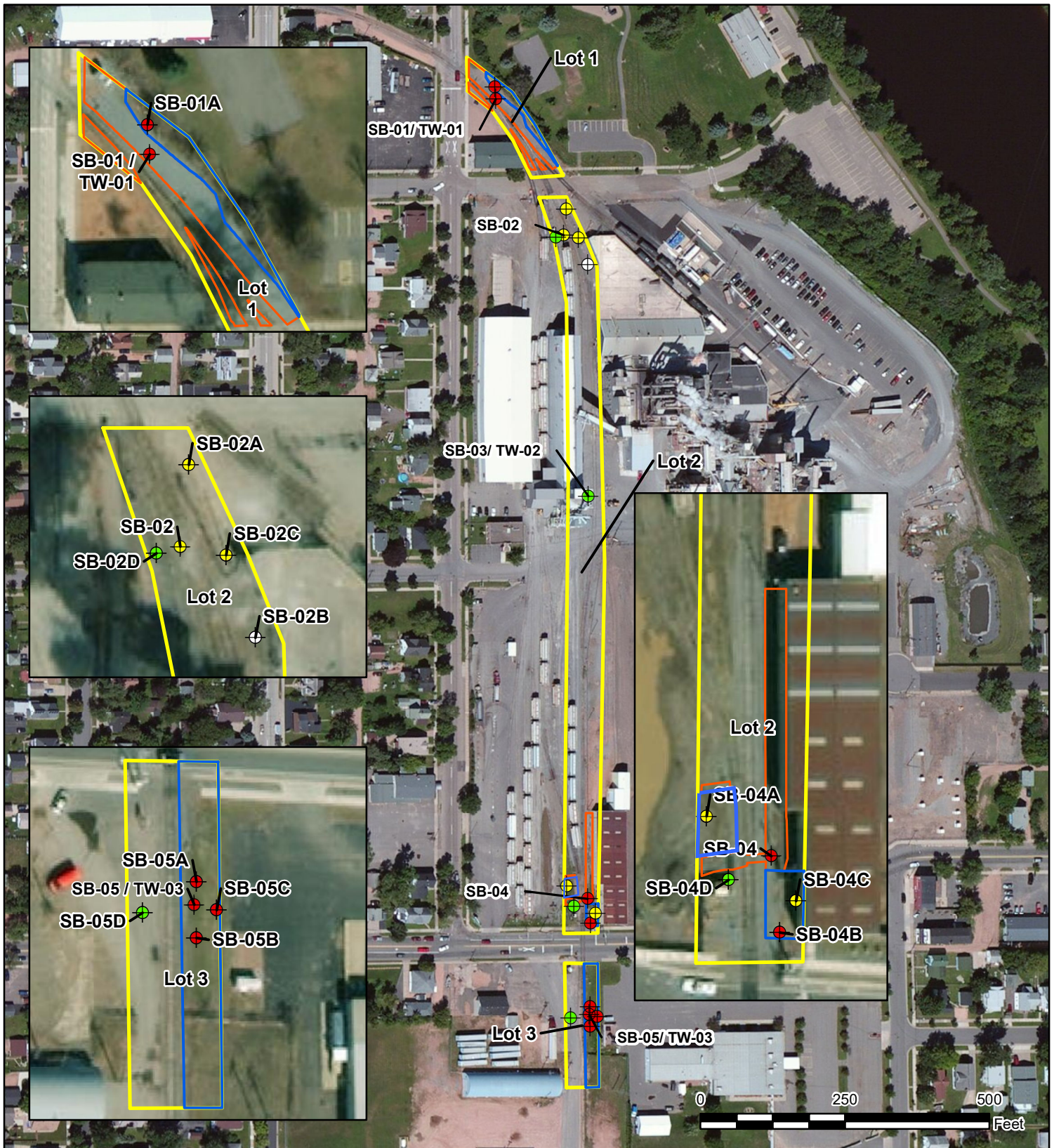


**3M COMPANY
RAIL LOTS
WAUSAU, MARATHON COUNTY, WI**

SITE LAYOUT MAP

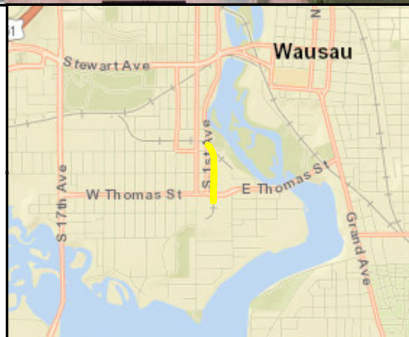


**FIGURE
2**



Legend

- ⊕ Unsampled
- <3 mg/kg
- 3 - 3.8 mg/kg
- >3.8 mg/kg
- ▭ Proposed Excavation Extent
- ▭ Completed Excavation Extent
- ▭ Lot Boundary



<p>3M COMPANY CN LOTS WAUSAU, MARATHON COUNTY, WISCONSIN</p>	
<p>SOIL BORING LOCATION MAP</p>	
	<p>FIGURE 3</p>

Appendix A

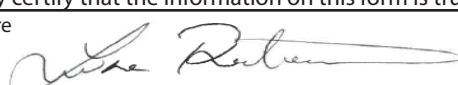
Soil Boring Logs

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

Facility/Project Name 3M Wausau		License/Permit/Monitoring Number		Boring Number SB-01A	
Boring Drilled By: Name of crew chief (first, last) and Firm First Name Travis Last Name _____ Firm Geiss Soil and Samples, LLC			Date Drilling Started 11/12/21	Date Drilling Completed 11/12/21	Drilling Method Direct Push Technology
WI Unique Well No.	DNR Well ID No.	Well Name	Final Static Water Level _____ Feet	Surface Elevation _____ Feet MSL	Borehole Diameter 2 inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/> State Plane _____ N, _____ E S <input type="checkbox"/> /C <input type="checkbox"/> /N <input type="checkbox"/> Lat _____ _____ 1/4 of _____ 1/4 of Section _____, T _____ N,R _____ <input checked="" type="checkbox"/> E <input type="checkbox"/> W Long _____			Local Grid Location _____ Feet <input type="checkbox"/> N _____ Feet <input type="checkbox"/> E _____ Feet <input type="checkbox"/> S _____ Feet <input type="checkbox"/> W		
Facility ID	County Marathon	County Code 37	Civil Town/City/or Village Wausau		

Sample Number and Type	Length All. & Recovered (in)	Blow Counts	Depth in Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments		
									Compressive Strength	Moisture Content	Liquid Limit	Plastic Limit	P 200			
1	1.9'		0	0-4/ 0-3.5': Fine to coarse sand, some silt, trace gravel, subangular, dry to moist, trace foundry sand, dark brown. 3.5-4.0': Fine to coarse sand, some gravel, subangular, light brown, loose, dry.												
			4													EOB @4'
			6													
			8													
			10													
			12													

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

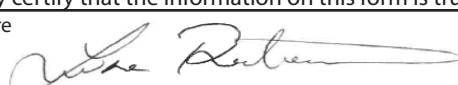
Signature 	Firm ARCADIS 126 N. Jefferson St., Suite Milwaukee, WI (414) 276-7742
--	--

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

Facility/Project Name 3M Wausau		License/Permit/Monitoring Number		Boring Number SB-02A	
Boring Drilled By: Name of crew chief (first, last) and Firm First Name Travis Last Name Firm Geiss Soil and Samples, LLC			Date Drilling Started 11/12/21	Date Drilling Completed 11/12/21	Drilling Method Direct Push Technology
WI Unique Well No.	DNR Well ID No.	Well Name	Final Static Water Level Feet	Surface Elevation Feet MSL	Borehole Diameter 2 inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/> State Plane _____ N, _____ E S <input type="checkbox"/> / C <input type="checkbox"/> / N <input type="checkbox"/> Lat _____ _____ 1/4 of _____ 1/4 of Section _____, T _____ N, R _____ <input checked="" type="checkbox"/> E <input type="checkbox"/> W Long _____ _____ Feet <input type="checkbox"/> S _____ Feet <input type="checkbox"/> W			Local Grid Location <input type="checkbox"/> N <input type="checkbox"/> E <input type="checkbox"/> S <input type="checkbox"/> W		
Facility ID	County Marathon	County Code 37	Civil Town/City/or Village Wausau		

Sample Number and Type	Length All. & Recovered (in)	Blow Counts	Depth in Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plastic Limit	P 200		
1	2.3'		0	0-4/ 0-1.5': Fine to medium sand, trace gravel, sub-angular, moist, dark brown, moderately dense. 1.5-2.0': Fine to medium sand, trace coarse sand, moist, moderately dense, black, trace foundry sand. 2.0-2.2': Silt, trace clay, not plastic, very light brown/white, dry. 2.2-4.0': Fine sand, some silt, trace medium coarse sand, very light brown/white. 4': Brown, fine to coarse sand, trace gravel.											
			4	EOB @4'											
			6												
			8												
			10												
			12												

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

Signature  Firm **ARCADIS**
126 N. Jefferson St., Suite
Milwaukee, WI (414) 276-7742

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

Facility/Project Name 3M Wausau		License/Permit/Monitoring Number		Boring Number SB-02C	
Boring Drilled By: Name of crew chief (first, last) and Firm First Name Travis Last Name _____ Firm Geiss Soil and Samples, LLC			Date Drilling Started 11/12/21	Date Drilling Completed 11/12/21	Drilling Method Direct Push Technology
WI Unique Well No.	DNR Well ID No.	Well Name	Final Static Water Level _____ Feet	Surface Elevation _____ Feet MSL	Borehole Diameter 2 inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/> State Plane _____ N, _____ E S <input type="checkbox"/> / C <input type="checkbox"/> / N <input type="checkbox"/> Lat _____ _____ 1/4 of _____ 1/4 of Section _____, T _____ N, R _____ <input checked="" type="checkbox"/> E <input type="checkbox"/> W Long _____			Local Grid Location _____ Feet <input type="checkbox"/> N _____ Feet <input type="checkbox"/> E _____ Feet <input type="checkbox"/> S _____ Feet <input type="checkbox"/> W		
Facility ID	County Marathon	County Code 37	Civil Town/City/or Village Wausau		

Sample Number and Type	Length All. & Recovered (in)	Blow Counts	Depth in Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plastic Limit	P 200	
1	1.8'		0 1 2 3 4 5 6 7 8 9 10 11 12	0-4/ 0-1.0': Medium sand, trace fine to coarse sand, trace foundry sand, dark gray, wet. 1.0-3.0': Fine to medium sand, trace coarse sand, trace to some gravel, subangular, moist to wet, moderately dense, brown. 3.0-4.0': Fine to medium sand, trace to some silt, trace clay, trace gravel, subangular, moist to wet. EOB @4'										

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

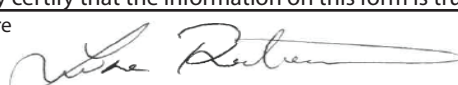
Signature:  Firm: **ARCADIS**
126 N. Jefferson St., Suite
Milwaukee, WI (414) 276-7742

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

Facility/Project Name 3M Wausau		License/Permit/Monitoring Number		Boring Number SB-02D	
Boring Drilled By: Name of crew chief (first, last) and Firm First Name Travis Last Name _____ Firm Geiss Soil and Samples, LLC			Date Drilling Started 11/12/21	Date Drilling Completed 11/12/21	Drilling Method Direct Push Technology
WI Unique Well No.	DNR Well ID No.	Well Name	Final Static Water Level _____ Feet	Surface Elevation _____ Feet MSL	Borehole Diameter 2 inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/> State Plane _____ N, _____ E S <input type="checkbox"/> /C <input type="checkbox"/> /N <input type="checkbox"/> Lat _____ _____ 1/4 of _____ 1/4 of Section _____, T _____ N,R _____ <input checked="" type="checkbox"/> E <input type="checkbox"/> W Long _____			Local Grid Location _____ Feet <input type="checkbox"/> N _____ Feet <input type="checkbox"/> E _____ Feet <input type="checkbox"/> S _____ Feet <input type="checkbox"/> W		
Facility ID	County Marathon	County Code 37	Civil Town/City/or Village Wausau		

Sample Number and Type	Length All. & Recovered (in)	Blow Counts	Depth in Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plastic Limit	P 200	
1	2.6'		0	0-4/ 0-2.5': Fine to medium sand, trace gravel, subangular, moist, brown to gray. 2.5-3.0': Fine to coarse sand, some silt, moist, light brown to gray. 3.0-3.5' Fine to coarse sand, trace foundry sand, trace to some gravel, subangular, black, moist. 3.5-4.0' Fine to coarse sand, trace gravel, subangular, poorly sorted, brown to orange, moist.										
			4	EOB @4'										
			6											
			8											
			10											
			12											

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

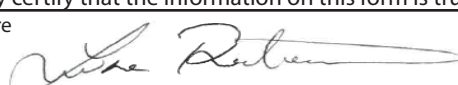
Signature 	Firm ARCADIS 126 N. Jefferson St., Suite Milwaukee, WI (414) 276-7742
--	--

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

Facility/Project Name 3M Wausau		License/Permit/Monitoring Number		Boring Number SB-04A	
Boring Drilled By: Name of crew chief (first, last) and Firm First Name Travis Last Name _____ Firm Geiss Soil and Samples, LLC			Date Drilling Started 11/12/21	Date Drilling Completed 11/12/21	Drilling Method Direct Push Technology
WI Unique Well No.	DNR Well ID No.	Well Name	Final Static Water Level _____ Feet	Surface Elevation _____ Feet MSL	Borehole Diameter 2 inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/> State Plane _____ N, _____ E S <input type="checkbox"/> / C <input type="checkbox"/> / N <input type="checkbox"/> Lat _____ _____ 1/4 of _____ 1/4 of Section _____, T _____ N, R _____ <input checked="" type="checkbox"/> E <input type="checkbox"/> W Long _____			Local Grid Location _____ Feet <input type="checkbox"/> N _____ Feet <input type="checkbox"/> E _____ Feet <input type="checkbox"/> S _____ Feet <input type="checkbox"/> W		
Facility ID	County Marathon	County Code 37	Civil Town/City/or Village Wausau		

Sample Number and Type	Length All. & Recovered (in)	Blow Counts	Depth in Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plastic Limit	P 200		
1	1.7'		0	0-4/ 0-0.6' Fine to coarse sand, some fine gravel, brown, moist. 0.6-2.0': Silt, trace to some fine sand, very dark brown, dry. 2.0-4.0' Fine to medium sand, some coarse sand, some gravel, subangular, dry, strong brown.											
			4												
			6												
			8												
			10												
			12												

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

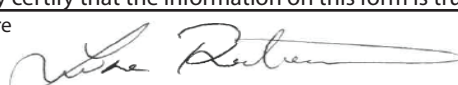
Signature 	Firm ARCADIS 126 N. Jefferson St., Suite Milwaukee, WI (414) 276-7742
--	--

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

Facility/Project Name 3M Wausau		License/Permit/Monitoring Number		Boring Number SB-04B	
Boring Drilled By: Name of crew chief (first, last) and Firm First Name Travis Last Name Firm Geiss Soil and Samples, LLC			Date Drilling Started 11/12/21	Date Drilling Completed 11/12/21	Drilling Method Direct Push Technology
WI Unique Well No.	DNR Well ID No.	Well Name	Final Static Water Level _____ Feet	Surface Elevation _____ Feet MSL	Borehole Diameter 2 inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/> State Plane _____ N, _____ E S <input type="checkbox"/> / C <input type="checkbox"/> / N <input type="checkbox"/> Lat _____ _____ 1/4 of _____ 1/4 of Section _____, T _____ N, R _____ <input checked="" type="checkbox"/> E <input type="checkbox"/> W Long _____			Local Grid Location _____ Feet <input type="checkbox"/> N _____ Feet <input type="checkbox"/> E _____ Feet <input type="checkbox"/> S _____ Feet <input type="checkbox"/> W		
Facility ID	County Marathon	County Code 37	Civil Town/City/or Village Wausau		

Sample Number and Type	Length All. & Recovered (in)	Blow Counts	Depth in Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plastic Limit	P 200	
1	1.9'		0	0-4/ 0-2.5': Fine to coarse sand, trace to some silt, some gravel, subangular, moist, very dark brown/black; 2" layer fine sand, white at 2.0'. 2.5-4.0': Fine to medium sand, trace coarse sand, some gravel, subangular, moist to wet, moderately well sorted, strong brown.										
			4	EOB @4'										
			6											
			8											
			10											
			12											

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

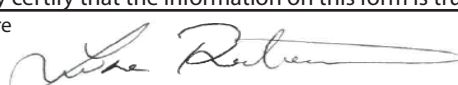
Signature 	Firm ARCADIS 126 N. Jefferson St., Suite Milwaukee, WI (414) 276-7742
--	--

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

Facility/Project Name 3M Wausau		License/Permit/Monitoring Number		Boring Number SB-04C	
Boring Drilled By: Name of crew chief (first, last) and Firm First Name Travis Last Name Firm Geiss Soil and Samples, LLC			Date Drilling Started 11/12/21	Date Drilling Completed 11/12/21	Drilling Method Direct Push Technology
WI Unique Well No.	DNR Well ID No.	Well Name	Final Static Water Level _____ Feet	Surface Elevation _____ Feet MSL	Borehole Diameter 2 inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/> State Plane _____ N, _____ E S <input type="checkbox"/> / C <input type="checkbox"/> / N <input type="checkbox"/> Lat _____ _____ 1/4 of _____ 1/4 of Section _____, T _____ N, R _____ <input checked="" type="checkbox"/> E <input type="checkbox"/> W Long _____			Local Grid Location _____ Feet <input type="checkbox"/> N _____ Feet <input type="checkbox"/> E _____ Feet <input type="checkbox"/> S _____ Feet <input type="checkbox"/> W		
Facility ID	County Marathon	County Code 37	Civil Town/City/or Village Wausau		

Sample Number and Type	Length All. & Recovered (in)	Blow Counts	Depth in Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
									Compressive Strength	Moisture Content	Liquid Limit	Plastic Limit	P 200	
1	2.3		0 1 2 3 4 5 6 7 8 9 10 11 12	0-4/ 0-1.5': Medium to coarse sand, trace to some fine sand, trace gravel, subangular, moist, dark brown. 1.5-2.0': Silt, trace fine sand, moist, dark gray. 2.0-2.5': Silt, trace to some fine sand, moist, brown. 2.5-4.0': Fine to coarse sand, some gravel, sub-angular, moderately dense to loose, moist, brown.										
			4	EOB @4'										

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

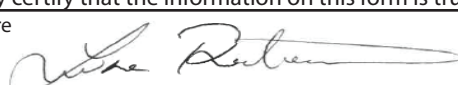
Signature  Firm **ARCADIS**
126 N. Jefferson St., Suite
Milwaukee, WI (414) 276-7742

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

Facility/Project Name 3M Wausau		License/Permit/Monitoring Number		Boring Number SB-04D	
Boring Drilled By: Name of crew chief (first, last) and Firm First Name Travis Last Name _____ Firm Geiss Soil and Samples, LLC			Date Drilling Started 11/12/21	Date Drilling Completed 11/12/21	Drilling Method Direct Push Technology
WI Unique Well No.	DNR Well ID No.	Well Name	Final Static Water Level _____ Feet	Surface Elevation _____ Feet MSL	Borehole Diameter 2 inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/> State Plane _____ N, _____ E S <input type="checkbox"/> / C <input type="checkbox"/> / N <input type="checkbox"/> _____ 1/4 of _____ 1/4 of Section _____, T _____ N, R _____ <input checked="" type="checkbox"/> E <input type="checkbox"/> W _____ Lat _____ Long _____			Local Grid Location _____ Feet <input type="checkbox"/> N <input type="checkbox"/> E _____ Feet <input type="checkbox"/> S <input type="checkbox"/> W		
Facility ID	County Marathon	County Code 37	Civil Town/City/or Village Wausau		

Sample		Blow Counts	Depth in Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments
Number and Type	Length All. & Recovered (in)								Compressive Strength	Moisture Content	Liquid Limit	Plastic Limit	P 200	
1	1.2'		0	0-4/ 0-1.0' Fine to coarse sand, some gravel, subangular, dark brown, moist. 1.0-4.0': Fine to medium sand, some coarse sand, some gravel, subangular, moist, moderately dense, strong brown.										
			4	EOB @4'										
			6											
			8											
			10											
			12											

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

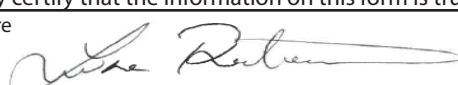
Signature 	Firm ARCADIS 126 N. Jefferson St., Suite Milwaukee, WI (414) 276-7742
--	--

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

Facility/Project Name 3M Wausau		License/Permit/Monitoring Number		Boring Number SB-05A	
Boring Drilled By: Name of crew chief (first, last) and Firm First Name Travis Last Name Firm Geiss Soil and Samples, LLC			Date Drilling Started 11/12/21	Date Drilling Completed 11/12/21	Drilling Method Direct Push Technology
WI Unique Well No.	DNR Well ID No.	Well Name	Final Static Water Level _____ Feet	Surface Elevation _____ Feet MSL	Borehole Diameter 2 inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/> State Plane _____ N, _____ E S <input type="checkbox"/> / C <input type="checkbox"/> / N <input type="checkbox"/> Lat _____ _____ 1/4 of _____ 1/4 of Section _____, T _____ N, R _____ <input checked="" type="checkbox"/> E <input type="checkbox"/> W Long _____			Local Grid Location _____ Feet <input type="checkbox"/> N _____ Feet <input type="checkbox"/> E _____ Feet <input type="checkbox"/> S _____ Feet <input type="checkbox"/> W		
Facility ID	County Marathon	County Code 37	Civil Town/City/or Village Wausau		

Sample Number and Type	Length All. & Recovered (in)	Blow Counts	Depth in Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plastic Limit	P 200		
1	2.0		0	0-4/ 0-0.5': Topsoil. 0.5-2.5' Fine to coarse sand, poorly sorted, trace foundry sand, trace silt, loose, moist, very dark brown to black. 2.5-4.0' Silt, some fine to medium sand, trace slag, trace gravel, subangular, dry, light brown.											
			4	EOB @4'											
			6												
			8												
			10												
			12												

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

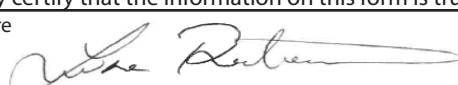
Signature 	Firm ARCADIS 126 N. Jefferson St., Suite Milwaukee, WI (414) 276-7742
--	--

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

Facility/Project Name 3M Wausau		License/Permit/Monitoring Number		Boring Number SB-05B	
Boring Drilled By: Name of crew chief (first, last) and Firm First Name Travis Last Name Firm Geiss Soil and Samples, LLC			Date Drilling Started 11/12/21	Date Drilling Completed 11/12/21	Drilling Method Direct Push Technology
WI Unique Well No.	DNR Well ID No.	Well Name	Final Static Water Level _____ Feet	Surface Elevation _____ Feet MSL	Borehole Diameter 2 inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/> State Plane _____ N, _____ E S <input type="checkbox"/> / C <input type="checkbox"/> / N <input type="checkbox"/> Lat _____ _____ 1/4 of _____ 1/4 of Section _____, T _____ N, R _____ <input checked="" type="checkbox"/> E <input type="checkbox"/> W Long _____			Local Grid Location _____ Feet <input type="checkbox"/> N _____ Feet <input type="checkbox"/> E _____ Feet <input type="checkbox"/> S _____ Feet <input type="checkbox"/> W		
Facility ID	County Marathon	County Code 37	Civil Town/City/or Village Wausau		

Sample Number and Type	Length All. & Recovered (in)	Blow Counts	Depth in Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plastic Limit	P 200		
1	1.9'		0	0-4/ 0-0.5': Topsoil. 0.5-3.0' Fine to coarse sand, poorly sorted, trace gravel, subangular, moist, loose, trace foundry sand, black. 3.0-4.0': Fine to medium sand, trace to some silt, moist to wet, trace gravel, subangular, brown.											
			4	EOB @4'											
			6												
			8												
			10												
			12												

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

Signature 	Firm ARCADIS 126 N. Jefferson St., Suite Milwaukee, WI (414) 276-7742
--	--

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

Facility/Project Name 3M Wausau		License/Permit/Monitoring Number		Boring Number SB-05C	
Boring Drilled By: Name of crew chief (first, last) and Firm First Name Travis Last Name Firm Geiss Soil and Samples, LLC			Date Drilling Started 11/12/21	Date Drilling Completed 11/12/21	Drilling Method Direct Push Technology
WI Unique Well No.	DNR Well ID No.	Well Name	Final Static Water Level _____ Feet	Surface Elevation _____ Feet MSL	Borehole Diameter 2 inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/> State Plane _____ N, _____ E S <input type="checkbox"/> / C <input type="checkbox"/> / N <input type="checkbox"/> Lat _____ _____ 1/4 of _____ 1/4 of Section _____, T _____ N, R _____ <input checked="" type="checkbox"/> E <input type="checkbox"/> W Long _____			Local Grid Location _____ Feet <input type="checkbox"/> N _____ Feet <input type="checkbox"/> E _____ Feet <input type="checkbox"/> S _____ Feet <input type="checkbox"/> W		
Facility ID	County Marathon	County Code 37	Civil Town/City/or Village Wausau		

Sample Number and Type	Length All. & Recovered (in)	Blow Counts	Depth in Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments	
									Compressive Strength	Moisture Content	Liquid Limit	Plastic Limit	P 200		
1	2.3'		0	0-4/ 0-0.5': Topsoil. 0.5-2.5' Fine to coarse sand, poorly sorted, trace to some gravel, subangular, loose, moist, trace foundry sand, very dark brown to black, trace silt. 2.5-4.0': Fine to medium sand, moderately well sorted, trace coarse sand, trace to some gravel, subangular, moist.											
			4	EOB @4'											
			6												
			8												
			10												
			12												

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

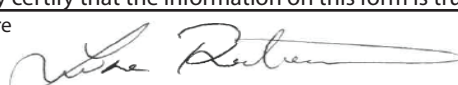
Signature  Firm **ARCADIS**
126 N. Jefferson St., Suite
Milwaukee, WI (414) 276-7742

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

Facility/Project Name 3M Wausau		License/Permit/Monitoring Number		Boring Number SB-05D	
Boring Drilled By: Name of crew chief (first, last) and Firm First Name Travis Last Name Firm Geiss Soil and Samples, LLC			Date Drilling Started 11/12/21	Date Drilling Completed 11/12/21	Drilling Method Direct Push Technology
WI Unique Well No.	DNR Well ID No.	Well Name	Final Static Water Level _____ Feet	Surface Elevation _____ Feet MSL	Borehole Diameter 2 inches
Local Grid Origin <input type="checkbox"/> (estimated: <input type="checkbox"/>) or Boring Location <input type="checkbox"/> State Plane _____ N, _____ E S <input type="checkbox"/> / C <input type="checkbox"/> / N <input type="checkbox"/> Lat _____ _____ 1/4 of _____ 1/4 of Section _____, T _____ N, R _____ <input checked="" type="checkbox"/> E <input type="checkbox"/> W Long _____			Local Grid Location _____ Feet <input type="checkbox"/> N _____ Feet <input type="checkbox"/> E _____ Feet <input type="checkbox"/> S _____ Feet <input type="checkbox"/> W		
Facility ID	County Marathon	County Code 37	Civil Town/City/or Village Wausau		

Sample Number and Type	Length All. & Recovered (in)	Blow Counts	Depth in Feet	Soil/Rock Description And Geologic Origin For Each Major Unit	USCS	Graphic Log	Well Diagram	PID/FID	Soil Properties					RQD/ Comments		
									Compressive Strength	Moisture Content	Liquid Limit	Plastic Limit	P 200			
1	2.5'		0	0-4/ 0-8": Asphalt. 8"-1.0': Fine to coarse sand, silt, brick, brown. 1.0-2.0': Fine to coarse sand, silt, trace green shingle granules, trace clay, moist, black. 2.0-4.0': Fine to medium sand, some coarse sand, trace to some gravel, subangular, moist, brown, poorly sorted.												
			4													EOB @4'
			6													
			8													
			10													
			12													

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

Signature 	Firm ARCADIS 126 N. Jefferson St., Suite Milwaukee, WI (414) 276-7742
--	--

Appendix B

Abandonment Logs

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

- Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

1. Well Location Information **2. Facility / Owner Information**

County		WI Unique Well # of Removed Well		Hicap #	
Latitude / Longitude (see instructions)		Format Code		Method Code	
_____ N		<input type="checkbox"/> DD		<input type="checkbox"/> GPS008	
_____ W		<input type="checkbox"/> DDM		<input type="checkbox"/> SCR002	
_____ W		<input type="checkbox"/> OTH001			
¼ / ¼	¼	Section	Township	Range	<input type="checkbox"/> E
or Gov't Lot #			N		<input type="checkbox"/> W
Well Street Address					
Well <u>City</u> Village or Town			Well ZIP Code		
Subdivision Name			Lot #		
Reason for Removal from Service		WI Unique Well # of Replacement Well			

Facility Name		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner		
Present Well Owner		
Mailing Address of Present Owner		
City of Present Owner	State	ZIP Code

3. Filled & Sealed Well / Drillhole / Borehole Information

<input type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy)	
<input type="checkbox"/> Water Well		
<input type="checkbox"/> Borehole / Drillhole		
If a Well Construction Report is available, please attach.		
Construction Type:		
<input type="checkbox"/> Drilled	<input type="checkbox"/> Driven (Sandpoint)	<input type="checkbox"/> Dug
<input type="checkbox"/> Other (specify): _____		
Formation Type:		
<input type="checkbox"/> Unconsolidated Formation	<input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.)	Casing Diameter (in.)	
Lower Drillhole Diameter (in.)	Casing Depth (ft.)	
Was well annular space grouted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet)	

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity		<input type="checkbox"/> Conductor Pipe-Pumped	
<input type="checkbox"/> Screened & Poured (Bentonite Chips)		<input type="checkbox"/> Other (Explain): _____	
Sealing Materials			
<input type="checkbox"/> Neat Cement Grout		<input type="checkbox"/> Concrete	
<input type="checkbox"/> Sand-Cement (Concrete) Grout		<input type="checkbox"/> Bentonite Chips	
For Monitoring Wells and Monitoring Well Boreholes Only:			
<input type="checkbox"/> Bentonite Chips		<input type="checkbox"/> Bentonite - Cement Grout	
<input type="checkbox"/> Granular Bentonite		<input type="checkbox"/> Bentonite - Sand Slurry	

5. Material Used to Fill Well / Drillhole

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface			

6. Comments

7. Supervision of Work **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy)	Date Received	Noted By
Street or Route		Telephone Number ()	Comments	
City	State	ZIP Code	Signature of Person Doing Work	Date Signed

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

- Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

1. Well Location Information **2. Facility / Owner Information**

County		WI Unique Well # of Removed Well	Hicap #
Latitude / Longitude (see instructions)		Format Code	Method Code
_____ N	_____ W	<input type="checkbox"/> DD <input type="checkbox"/> DDM	<input type="checkbox"/> GPS008 <input type="checkbox"/> SCR002 <input type="checkbox"/> OTH001
¼ / ¼	¼	Section	Township
or Gov't Lot #			Range <input type="checkbox"/> E <input type="checkbox"/> W
Well Street Address			
Well <u>City</u> Village or Town		Well ZIP Code	
Subdivision Name		Lot #	

Facility Name		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner		
Present Well Owner		
Mailing Address of Present Owner		
City of Present Owner	State	ZIP Code

3. Filled & Sealed Well / Drillhole / Borehole Information

<input type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy)
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	
If a Well Construction Report is available, please attach.	
Construction Type:	
<input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug	<input type="checkbox"/> Other (specify): _____
Formation Type:	
<input type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.)	Casing Diameter (in.)
Lower Drillhole Diameter (in.)	Casing Depth (ft.)
Was well annular space grouted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
If yes, to what depth (feet)?	Depth to Water (feet)

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

Pump and piping removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did sealing material rise to surface?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If yes, was hole retopped?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Required Method of Placing Sealing Material	
<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped	
<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____	
Sealing Materials	
<input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete	
<input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite Chips	
<i>For Monitoring Wells and Monitoring Well Boreholes Only:</i>	
<input type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout	
<input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry	

5. Material Used to Fill Well / Drillhole

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface			

6. Comments

7. Supervision of Work **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy)	Date Received	Noted By
Street or Route		Telephone Number ()	Comments	
City	State	ZIP Code	Signature of Person Doing Work	Date Signed

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

- Drinking Water
- Watershed/Wastewater
- Remediation/Redevelopment
- Waste Management
- Other: _____

1. Well Location Information

County		WI Unique Well # of Removed Well	Hicap #
Latitude / Longitude (see instructions)		Format Code	Method Code
_____ N		<input type="checkbox"/> DD	<input type="checkbox"/> GPS008
_____ W		<input type="checkbox"/> DDM	<input type="checkbox"/> SCR002
1/4 / 1/4	1/4	Section	Township
or Gov't Lot #			Range <input type="checkbox"/> E
			<input type="checkbox"/> W
Well Street Address			
Well City Village or Town		Well ZIP Code	
Subdivision Name		Lot #	
Reason for Removal from Service		WI Unique Well # of Replacement Well	

2. Facility / Owner Information

Facility Name			
Facility ID (FID or PWS)			
License/Permit/Monitoring #			
Original Well Owner			
Present Well Owner			
Mailing Address of Present Owner			
City of Present Owner		State	ZIP Code

3. Filled & Sealed Well / Drillhole / Borehole Information

<input type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy)
<input type="checkbox"/> Water Well	
<input type="checkbox"/> Borehole / Drillhole	
If a Well Construction Report is available, please attach.	
Construction Type:	
<input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug	
<input type="checkbox"/> Other (specify): _____	
Formation Type:	
<input type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.)	Casing Diameter (in.)
Lower Drillhole Diameter (in.)	Casing Depth (ft.)
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet)

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped			
<input type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____			
Sealing Materials			
<input type="checkbox"/> Neat Cement Grout		<input type="checkbox"/> Concrete	
<input type="checkbox"/> Sand-Cement (Concrete) Grout		<input type="checkbox"/> Bentonite Chips	
For Monitoring Wells and Monitoring Well Boreholes Only:			
<input type="checkbox"/> Bentonite Chips		<input type="checkbox"/> Bentonite - Cement Grout	
<input type="checkbox"/> Granular Bentonite		<input type="checkbox"/> Bentonite - Sand Slurry	

5. Material Used to Fill Well / Drillhole

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface			

6. Comments

7. Supervision of Work

Name of Person or Firm Doing Filling & Sealing			License #	Date of Filling & Sealing or Verification (mm/dd/yyyy)	DNR Use Only	
					Date Received	Noted By
Street or Route				Telephone Number ()		Comments
City	State	ZIP Code	Signature of Person Doing Work			Date Signed

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

- Drinking Water
- Watershed/Wastewater
- Remediation/Redevelopment
- Waste Management
- Other: _____

1. Well Location Information **2. Facility / Owner Information**

County		WI Unique Well # of Removed Well		Hicap #	
Latitude / Longitude (see instructions)		Format Code		Method Code	
_____ N		<input type="checkbox"/> DD		<input type="checkbox"/> GPS008	
_____ W		<input type="checkbox"/> DDM		<input type="checkbox"/> SCR002	
_____ W		<input type="checkbox"/> OTH001			
1/4 / 1/4	1/4	Section	Township	Range	<input type="checkbox"/> E
or Gov't Lot #			N		<input type="checkbox"/> W
Well Street Address					
Well <u>City</u> Village or Town			Well ZIP Code		
Subdivision Name			Lot #		
Reason for Removal from Service		WI Unique Well # of Replacement Well			

Facility Name			
Facility ID (FID or PWS)			
License/Permit/Monitoring #			
Original Well Owner			
Present Well Owner			
Mailing Address of Present Owner			
City of Present Owner		State	ZIP Code

3. Filled & Sealed Well / Drillhole / Borehole Information

<input type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy)	
<input type="checkbox"/> Water Well		
<input type="checkbox"/> Borehole / Drillhole		
If a Well Construction Report is available, please attach.		
Construction Type:		
<input type="checkbox"/> Drilled	<input type="checkbox"/> Driven (Sandpoint)	<input type="checkbox"/> Dug
<input type="checkbox"/> Other (specify): _____		
Formation Type:		
<input type="checkbox"/> Unconsolidated Formation	<input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.)	Casing Diameter (in.)	
Lower Drillhole Diameter (in.)	Casing Depth (ft.)	
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		
If yes, to what depth (feet)?	Depth to Water (feet)	

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity		<input type="checkbox"/> Conductor Pipe-Pumped	
<input type="checkbox"/> Screened & Poured (Bentonite Chips)		<input type="checkbox"/> Other (Explain): _____	
Sealing Materials			
<input type="checkbox"/> Neat Cement Grout		<input type="checkbox"/> Concrete	
<input type="checkbox"/> Sand-Cement (Concrete) Grout		<input type="checkbox"/> Bentonite Chips	
For Monitoring Wells and Monitoring Well Boreholes Only:			
<input type="checkbox"/> Bentonite Chips		<input type="checkbox"/> Bentonite - Cement Grout	
<input type="checkbox"/> Granular Bentonite		<input type="checkbox"/> Bentonite - Sand Slurry	

5. Material Used to Fill Well / Drillhole

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface			

6. Comments

7. Supervision of Work **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy)	Date Received	Noted By
Street or Route			Telephone Number ()	Comments	
City	State	ZIP Code	Signature of Person Doing Work	Date Signed	

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

- Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

1. Well Location Information **2. Facility / Owner Information**

County		WI Unique Well # of Removed Well		Hicap #	
Latitude / Longitude (see instructions)		Format Code		Method Code	
_____ N		<input type="checkbox"/> DD		<input type="checkbox"/> GPS008	
_____ W		<input type="checkbox"/> DDM		<input type="checkbox"/> SCR002	
_____ W		<input type="checkbox"/> OTH001			
1/4 / 1/4	1/4	Section	Township	Range	<input type="checkbox"/> E
or Gov't Lot #					<input type="checkbox"/> W
Well Street Address					
Well <u>City</u> Village or Town			Well ZIP Code		
Subdivision Name			Lot #		

Facility Name		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner		
Present Well Owner		
Mailing Address of Present Owner		
City of Present Owner	State	ZIP Code

3. Filled & Sealed Well / Drillhole / Borehole Information

Reason for Removal from Service		WI Unique Well # of Replacement Well	
<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy)	
Construction Type:		If a Well Construction Report is available, please attach.	
<input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____			
Formation Type:			
<input type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock			
Total Well Depth From Ground Surface (ft.)		Casing Diameter (in.)	
Lower Drillhole Diameter (in.)		Casing Depth (ft.)	
Was well annular space grouted?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?		Depth to Water (feet)	

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity		<input type="checkbox"/> Conductor Pipe-Pumped	
<input type="checkbox"/> Screened & Poured (Bentonite Chips)		<input type="checkbox"/> Other (Explain): _____	
Sealing Materials			
<input type="checkbox"/> Neat Cement Grout		<input type="checkbox"/> Concrete	
<input type="checkbox"/> Sand-Cement (Concrete) Grout		<input type="checkbox"/> Bentonite Chips	
For Monitoring Wells and Monitoring Well Boreholes Only:			
<input type="checkbox"/> Bentonite Chips		<input type="checkbox"/> Bentonite - Cement Grout	
<input type="checkbox"/> Granular Bentonite		<input type="checkbox"/> Bentonite - Sand Slurry	

5. Material Used to Fill Well / Drillhole

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface			

6. Comments

7. Supervision of Work **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy)	Date Received	Noted By
Street or Route			Telephone Number ()	Comments	
City	State	ZIP Code	Signature of Person Doing Work	Date Signed	

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

- Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

1. Well Location Information **2. Facility / Owner Information**

County		WI Unique Well # of Removed Well		Hicap #	
Latitude / Longitude (see instructions)		Format Code		Method Code	
_____ N		<input type="checkbox"/> DD		<input type="checkbox"/> GPS008	
_____ W		<input type="checkbox"/> DDM		<input type="checkbox"/> SCR002	
_____ W		<input type="checkbox"/> OTH001			
¼ / ¼	¼	Section	Township	Range	<input type="checkbox"/> E
or Gov't Lot #			N		<input type="checkbox"/> W
Well Street Address					
Well <u>City</u> Village or Town			Well ZIP Code		
Subdivision Name			Lot #		
Reason for Removal from Service		WI Unique Well # of Replacement Well			

Facility Name			
Facility ID (FID or PWS)			
License/Permit/Monitoring #			
Original Well Owner			
Present Well Owner			
Mailing Address of Present Owner			
City of Present Owner		State	ZIP Code

3. Filled & Sealed Well / Drillhole / Borehole Information

<input type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy)	
<input type="checkbox"/> Water Well		
<input type="checkbox"/> Borehole / Drillhole		
If a Well Construction Report is available, please attach.		
Construction Type:		
<input type="checkbox"/> Drilled	<input type="checkbox"/> Driven (Sandpoint)	<input type="checkbox"/> Dug
<input type="checkbox"/> Other (specify): _____		
Formation Type:		
<input type="checkbox"/> Unconsolidated Formation	<input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.)	Casing Diameter (in.)	
Lower Drillhole Diameter (in.)	Casing Depth (ft.)	
Was well annular space grouted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet)	

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity		<input type="checkbox"/> Conductor Pipe-Pumped	
<input type="checkbox"/> Screened & Poured (Bentonite Chips)		<input type="checkbox"/> Other (Explain): _____	
Sealing Materials			
<input type="checkbox"/> Neat Cement Grout		<input type="checkbox"/> Concrete	
<input type="checkbox"/> Sand-Cement (Concrete) Grout		<input type="checkbox"/> Bentonite Chips	
For Monitoring Wells and Monitoring Well Boreholes Only:			
<input type="checkbox"/> Bentonite Chips		<input type="checkbox"/> Bentonite - Cement Grout	
<input type="checkbox"/> Granular Bentonite		<input type="checkbox"/> Bentonite - Sand Slurry	

5. Material Used to Fill Well / Drillhole

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface			

6. Comments

7. Supervision of Work **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy)	Date Received	Noted By
Street or Route			Telephone Number ()	Comments	
City	State	ZIP Code	Signature of Person Doing Work	Date Signed	

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

- Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

1. Well Location Information **2. Facility / Owner Information**

County _____ WI Unique Well # of Removed Well _____ Hicap # _____

Latitude / Longitude (see instructions) _____ N _____ W _____
Format Code DD DDM Method Code GPS008 SCR002 OTH001

1/4 / 1/4 _____ 1/4 _____ Section _____ Township _____ Range E W
or Gov't Lot # _____ N

Well Street Address _____

Well City Village or Town _____ Well ZIP Code _____

Subdivision Name _____ Lot # _____

Reason for Removal from Service _____ WI Unique Well # of Replacement Well _____

Facility Name _____

Facility ID (FID or PWS) _____

License/Permit/Monitoring # _____

Original Well Owner _____

Present Well Owner _____

Mailing Address of Present Owner _____

City of Present Owner _____ State _____ ZIP Code _____

3. Filled & Sealed Well / Drillhole / Borehole Information

Monitoring Well Original Construction Date (mm/dd/yyyy) _____
 Water Well
 Borehole / Drillhole If a Well Construction Report is available, please attach.

Construction Type:
 Drilled Driven (Sandpoint) Dug
 Other (specify): _____

Formation Type:
 Unconsolidated Formation Bedrock

Total Well Depth From Ground Surface (ft.) _____ Casing Diameter (in.) _____

Lower Drillhole Diameter (in.) _____ Casing Depth (ft.) _____

Was well annular space grouted? Yes No Unknown

If yes, to what depth (feet)? _____ Depth to Water (feet) _____

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

Pump and piping removed? Yes No N/A
Liner(s) removed? Yes No N/A
Liner(s) perforated? Yes No N/A
Screen removed? Yes No N/A
Casing left in place? Yes No N/A

Was casing cut off below surface? Yes No N/A
Did sealing material rise to surface? Yes No N/A
Did material settle after 24 hours? Yes No N/A
If yes, was hole retopped? Yes No N/A
If bentonite chips were used, were they hydrated with water from a known safe source? Yes No N/A

Required Method of Placing Sealing Material
 Conductor Pipe-Gravity Conductor Pipe-Pumped
 Screened & Poured (Bentonite Chips) Other (Explain): _____

Sealing Materials
 Neat Cement Grout Concrete
 Sand-Cement (Concrete) Grout Bentonite Chips

For Monitoring Wells and Monitoring Well Boreholes Only:
 Bentonite Chips Bentonite - Cement Grout
 Granular Bentonite Bentonite - Sand Slurry

5. Material Used to Fill Well / Drillhole

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface			

6. Comments

7. Supervision of Work **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy)	Date Received	Noted By
Street or Route		Telephone Number ()	Comments	
City	State	ZIP Code	Signature of Person Doing Work	Date Signed

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

- Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

1. Well Location Information **2. Facility / Owner Information**

County		WI Unique Well # of Removed Well		Hicap #	
Latitude / Longitude (see instructions)		Format Code		Method Code	
_____ N		<input type="checkbox"/> DD		<input type="checkbox"/> GPS008	
_____ W		<input type="checkbox"/> DDM		<input type="checkbox"/> SCR002	
_____ W		<input type="checkbox"/> OTH001			
¼ / ¼	¼	Section	Township	Range	<input type="checkbox"/> E
or Gov't Lot #		N		<input type="checkbox"/> W	
Well Street Address					
Well <u>City</u> Village or Town			Well ZIP Code		
Subdivision Name			Lot #		

Facility Name		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner		
Present Well Owner		
Mailing Address of Present Owner		
City of Present Owner		State
		ZIP Code

3. Filled & Sealed Well / Drillhole / Borehole Information

Reason for Removal from Service		WI Unique Well # of Replacement Well	
<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy)	
Construction Type:		If a Well Construction Report is available, please attach.	
<input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____			
Formation Type:			
<input type="checkbox"/> Unconsolidated Formation		<input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.)		Casing Diameter (in.)	
Lower Drillhole Diameter (in.)		Casing Depth (ft.)	
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
If yes, to what depth (feet)?		Depth to Water (feet)	

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity		<input type="checkbox"/> Conductor Pipe-Pumped	
<input type="checkbox"/> Screened & Poured (Bentonite Chips)		<input type="checkbox"/> Other (Explain): _____	
Sealing Materials			
<input type="checkbox"/> Neat Cement Grout		<input type="checkbox"/> Concrete	
<input type="checkbox"/> Sand-Cement (Concrete) Grout		<input type="checkbox"/> Bentonite Chips	
For Monitoring Wells and Monitoring Well Boreholes Only:			
<input type="checkbox"/> Bentonite Chips		<input type="checkbox"/> Bentonite - Cement Grout	
<input type="checkbox"/> Granular Bentonite		<input type="checkbox"/> Bentonite - Sand Slurry	

5. Material Used to Fill Well / Drillhole

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface			

6. Comments

7. Supervision of Work **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy)	Date Received	Noted By
Street or Route			Telephone Number ()	Comments	
City	State	ZIP Code	Signature of Person Doing Work	Date Signed	

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

- Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

1. Well Location Information **2. Facility / Owner Information**

County		WI Unique Well # of Removed Well		Hicap #	
Latitude / Longitude (see instructions)		Format Code		Method Code	
_____ N		<input type="checkbox"/> DD		<input type="checkbox"/> GPS008	
_____ W		<input type="checkbox"/> DDM		<input type="checkbox"/> SCR002	
_____ W		<input type="checkbox"/> OTH001			
¼ / ¼	¼	Section	Township	Range	<input type="checkbox"/> E
or Gov't Lot #		N		<input type="checkbox"/> W	
Well Street Address					
Well <u>City</u> Village or Town			Well ZIP Code		
Subdivision Name			Lot #		

Facility Name		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner		
Present Well Owner		
Mailing Address of Present Owner		
City of Present Owner	State	ZIP Code

3. Filled & Sealed Well / Drillhole / Borehole Information

Reason for Removal from Service		WI Unique Well # of Replacement Well	
<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy)	
Construction Type:		If a Well Construction Report is available, please attach.	
<input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____			
Formation Type:			
<input type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock			
Total Well Depth From Ground Surface (ft.)		Casing Diameter (in.)	
Lower Drillhole Diameter (in.)		Casing Depth (ft.)	
Was well annular space grouted?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?		Depth to Water (feet)	

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity		<input type="checkbox"/> Conductor Pipe-Pumped	
<input type="checkbox"/> Screened & Poured (Bentonite Chips)		<input type="checkbox"/> Other (Explain): _____	
Sealing Materials			
<input type="checkbox"/> Neat Cement Grout		<input type="checkbox"/> Concrete	
<input type="checkbox"/> Sand-Cement (Concrete) Grout		<input type="checkbox"/> Bentonite Chips	
For Monitoring Wells and Monitoring Well Boreholes Only:			
<input type="checkbox"/> Bentonite Chips		<input type="checkbox"/> Bentonite - Cement Grout	
<input type="checkbox"/> Granular Bentonite		<input type="checkbox"/> Bentonite - Sand Slurry	

5. Material Used to Fill Well / Drillhole

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface			

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface			

6. Comments

7. Supervision of Work **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy)	Date Received	Noted By
Street or Route			Telephone Number ()	Comments	
City	State	ZIP Code	Signature of Person Doing Work	Date Signed	

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

- Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

1. Well Location Information **2. Facility / Owner Information**

County		WI Unique Well # of Removed Well		Hicap #	
Latitude / Longitude (see instructions)		Format Code		Method Code	
_____ N		<input type="checkbox"/> DD		<input type="checkbox"/> GPS008	
_____ W		<input type="checkbox"/> DDM		<input type="checkbox"/> SCR002	
_____ W		<input type="checkbox"/> OTH001			
¼ / ¼	¼	Section	Township	Range	<input type="checkbox"/> E
or Gov't Lot #					<input type="checkbox"/> W
Well Street Address					
Well <u>City</u> Village or Town			Well ZIP Code		
Subdivision Name			Lot #		
Reason for Removal from Service		WI Unique Well # of Replacement Well			

Facility Name		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner		
Present Well Owner		
Mailing Address of Present Owner		
City of Present Owner	State	ZIP Code

3. Filled & Sealed Well / Drillhole / Borehole Information

<input type="checkbox"/> Monitoring Well	Original Construction Date (mm/dd/yyyy)	
<input type="checkbox"/> Water Well		
<input type="checkbox"/> Borehole / Drillhole		
If a Well Construction Report is available, please attach.		
Construction Type:		
<input type="checkbox"/> Drilled	<input type="checkbox"/> Driven (Sandpoint)	<input type="checkbox"/> Dug
<input type="checkbox"/> Other (specify): _____		
Formation Type:		
<input type="checkbox"/> Unconsolidated Formation	<input type="checkbox"/> Bedrock	
Total Well Depth From Ground Surface (ft.)	Casing Diameter (in.)	
Lower Drillhole Diameter (in.)	Casing Depth (ft.)	
Was well annular space grouted?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?	Depth to Water (feet)	

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity		<input type="checkbox"/> Conductor Pipe-Pumped	
<input type="checkbox"/> Screened & Poured (Bentonite Chips)		<input type="checkbox"/> Other (Explain): _____	
Sealing Materials			
<input type="checkbox"/> Neat Cement Grout		<input type="checkbox"/> Concrete	
<input type="checkbox"/> Sand-Cement (Concrete) Grout		<input type="checkbox"/> Bentonite Chips	
For Monitoring Wells and Monitoring Well Boreholes Only:			
<input type="checkbox"/> Bentonite Chips		<input type="checkbox"/> Bentonite - Cement Grout	
<input type="checkbox"/> Granular Bentonite		<input type="checkbox"/> Bentonite - Sand Slurry	

5. Material Used to Fill Well / Drillhole

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface			

6. Comments

7. Supervision of Work **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy)	Date Received	Noted By
Street or Route		Telephone Number ()	Comments	
City	State	ZIP Code	Signature of Person Doing Work	Date Signed

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

Verification Only of Fill and Seal

Route to DNR Bureau:

- Drinking Water Watershed/Wastewater Remediation/Redevelopment
 Waste Management Other: _____

1. Well Location Information **2. Facility / Owner Information**

County		WI Unique Well # of Removed Well		Hicap #	
Latitude / Longitude (see instructions)		Format Code		Method Code	
_____ N		<input type="checkbox"/> DD		<input type="checkbox"/> GPS008	
_____ W		<input type="checkbox"/> DDM		<input type="checkbox"/> SCR002	
_____ W		<input type="checkbox"/> OTH001			
¼ / ¼	¼	Section	Township	Range	<input type="checkbox"/> E
or Gov't Lot #		N		<input type="checkbox"/> W	
Well Street Address					
Well <u>City</u> Village or Town			Well ZIP Code		
Subdivision Name			Lot #		

Facility Name		
Facility ID (FID or PWS)		
License/Permit/Monitoring #		
Original Well Owner		
Present Well Owner		
Mailing Address of Present Owner		
City of Present Owner		State
		ZIP Code

3. Filled & Sealed Well / Drillhole / Borehole Information

Reason for Removal from Service		WI Unique Well # of Replacement Well	
<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy)	
Construction Type:		If a Well Construction Report is available, please attach.	
<input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____			
Formation Type:			
<input type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock			
Total Well Depth From Ground Surface (ft.)		Casing Diameter (in.)	
Lower Drillhole Diameter (in.)		Casing Depth (ft.)	
Was well annular space grouted?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
If yes, to what depth (feet)?		Depth to Water (feet)	

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

Pump and piping removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Liner(s) perforated?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Screen removed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Casing left in place?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Was casing cut off below surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did sealing material rise to surface?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Did material settle after 24 hours?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
If yes, was hole retopped?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
If bentonite chips were used, were they hydrated with water from a known safe source?		<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A
Required Method of Placing Sealing Material			
<input type="checkbox"/> Conductor Pipe-Gravity		<input type="checkbox"/> Conductor Pipe-Pumped	
<input type="checkbox"/> Screened & Poured (Bentonite Chips)		<input type="checkbox"/> Other (Explain): _____	
Sealing Materials			
<input type="checkbox"/> Neat Cement Grout		<input type="checkbox"/> Concrete	
<input type="checkbox"/> Sand-Cement (Concrete) Grout		<input type="checkbox"/> Bentonite Chips	
For Monitoring Wells and Monitoring Well Boreholes Only:			
<input type="checkbox"/> Bentonite Chips		<input type="checkbox"/> Bentonite - Cement Grout	
<input type="checkbox"/> Granular Bentonite		<input type="checkbox"/> Bentonite - Sand Slurry	

5. Material Used to Fill Well / Drillhole

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface			

From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface			

6. Comments

7. Supervision of Work **DNR Use Only**

Name of Person or Firm Doing Filling & Sealing		License #	Date of Filling & Sealing or Verification (mm/dd/yyyy)	Date Received	Noted By
Street or Route			Telephone Number ()	Comments	
City	State	ZIP Code	Signature of Person Doing Work	Date Signed	

Notice: Completion of this report is required by chs. 160, 281, 283, 289, 291-293, 295, and 299, Wis. Stats., and chs. NR 141 and 812, Wis. Adm. Code. In accordance with chs. 281, 289, 291-293, 295, and 299, Wis. Stats., failure to file this form may result in a forfeiture of between \$10-25,000, or imprisonment for up to one year, depending on the program and conduct involved. Personally identifiable information on this form is not intended to be used for any other purpose. Return form to the appropriate DNR office and bureau. See instructions on reverse for more information.

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

1. Well Location Information	2. Facility / Owner Information
------------------------------	---------------------------------

County	WI Unique Well # of Removed Well	Hicap #	Facility Name		
Latitude / Longitude (see instructions)		Format Code	Facility ID (FID or PWS)		
_____ N		<input type="checkbox"/> DD	License/Permit/Monitoring #		
_____ W		<input type="checkbox"/> DDM	Original Well Owner		
1/4 / 1/4	1/4	Section	Township	Range <input type="checkbox"/> E	Present Well Owner
or Gov't Lot #			N	<input type="checkbox"/> W	
Well Street Address			Mailing Address of Present Owner		
Well City Village or Town			Well ZIP Code		
Subdivision Name		Lot #		City of Present Owner	State ZIP Code

3. Filled & Sealed Well / Drillhole / Borehole Information	4. Pump, Liner, Screen, Casing & Sealing Material
--	---

Reason for Removal from Service	WI Unique Well # of Replacement Well	<input type="checkbox"/> Pump and piping removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Liner(s) removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Liner(s) perforated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Screen removed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Casing left in place? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Was casing cut off below surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Did sealing material rise to surface? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Did material settle after 24 hours? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If yes, was hole retopped? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> If bentonite chips were used, were they hydrated with water from a known safe source? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
<input type="checkbox"/> Monitoring Well <input type="checkbox"/> Water Well <input type="checkbox"/> Borehole / Drillhole		Original Construction Date (mm/dd/yyyy) _____	
Construction Type: <input type="checkbox"/> Drilled <input type="checkbox"/> Driven (Sandpoint) <input type="checkbox"/> Dug <input type="checkbox"/> Other (specify): _____		Required Method of Placing Sealing Material <input type="checkbox"/> Conductor Pipe-Gravity <input type="checkbox"/> Conductor Pipe-Pumped <input type="checkbox"/> Screened & Poured (Bentonite Chips) <input type="checkbox"/> Other (Explain): _____	
Formation Type: <input type="checkbox"/> Unconsolidated Formation <input type="checkbox"/> Bedrock		Sealing Materials <input type="checkbox"/> Neat Cement Grout <input type="checkbox"/> Concrete <input type="checkbox"/> Sand-Cement (Concrete) Grout <input type="checkbox"/> Bentonite Chips	
Total Well Depth From Ground Surface (ft.)	Casing Diameter (in.)	For Monitoring Wells and Monitoring Well Boreholes Only: <input type="checkbox"/> Bentonite Chips <input type="checkbox"/> Bentonite - Cement Grout <input type="checkbox"/> Granular Bentonite <input type="checkbox"/> Bentonite - Sand Slurry	
Lower Drillhole Diameter (in.)	Casing Depth (ft.)		
Was well annular space grouted? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown			
If yes, to what depth (feet)?	Depth to Water (feet)		

5. Material Used to Fill Well / Drillhole	From (ft.)	To (ft.)	No. Yards, Sacks Sealant or Volume (circle one)	Mix Ratio or Mud Weight
Surface				

6. Comments

7. Supervision of Work	DNR Use Only
------------------------	--------------

Name of Person or Firm Doing Filling & Sealing	License #	Date of Filling & Sealing or Verification (mm/dd/yyyy)	Date Received	Noted By
Street or Route		Telephone Number ()	Comments	
City	State	ZIP Code	Signature of Person Doing Work	Date Signed

Appendix C

Laboratory Analytical Report

ANALYTICAL REPORT

Eurofins TestAmerica, Chicago
2417 Bond Street
University Park, IL 60484
Tel: (708)534-5200

Laboratory Job ID: 500-208432-1
Client Project/Site: 3M Wausau, WI 30087606.00001

For:
ARCADIS U.S., Inc.
126 North Jefferson Street
Suite 400
Milwaukee, Wisconsin 53202

Attn: Trena Seilheimer



Authorized for release by:
12/6/2021 12:29:11 PM

Sandie Fredrick, Project Manager II
(920)261-1660
sandra.fredrick@eurofinset.com

LINKS

Review your project
results through
TotalAccess

Have a Question?



Visit us at:

www.eurofinsus.com/Env

The test results in this report meet all 2003 NELAC, 2009 TNI, and 2016 TNI requirements for accredited parameters, exceptions are noted in this report. This report may not be reproduced except in full, and with written approval from the laboratory. For questions please contact the Project Manager at the e-mail address or telephone number listed on this page.

This report has been electronically signed and authorized by the signatory. Electronic signature is intended to be the legally binding equivalent of a traditionally handwritten signature.

Results relate only to the items tested and the sample(s) as received by the laboratory.



Table of Contents

Cover Page	1
Table of Contents	2
Case Narrative	3
Detection Summary	4
Method Summary	7
Sample Summary	8
Client Sample Results	9
Definitions	36
QC Sample Results	37
Chronicle	39
Certification Summary	48
Chain of Custody	49
Receipt Checklists	52

Case Narrative

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Job ID: 500-208432-1

Laboratory: Eurofins TestAmerica, Chicago

Narrative

Job Narrative
500-208432-1

Comments

No additional comments.

Receipt

The samples were received on 11/16/2021 10:25 AM. Unless otherwise noted below, the samples arrived in good condition, and where required, properly preserved and on ice. The temperature of the cooler at receipt was 4.8° C.

Metals

No analytical or quality issues were noted, other than those described in the Definitions/Glossary page.

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Detection Summary

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-04A (0-2)

Lab Sample ID: 500-208432-1

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	3.8		1.0	0.35	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-04A (2-4)

Lab Sample ID: 500-208432-2

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	0.73	J	0.96	0.33	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-04D (0-2)

Lab Sample ID: 500-208432-3

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	0.77	J	1.0	0.35	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-04D (2-4)

Lab Sample ID: 500-208432-4

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	0.39	J	1.0	0.35	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-01A (0-2)

Lab Sample ID: 500-208432-5

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	12		0.99	0.34	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-01A (2-4)

Lab Sample ID: 500-208432-6

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	3.2		0.99	0.34	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-02C (0-2)

Lab Sample ID: 500-208432-7

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	3.2		0.97	0.33	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-02C (2-4)

Lab Sample ID: 500-208432-8

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	0.77	J	0.99	0.34	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-02A (0-2)

Lab Sample ID: 500-208432-9

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	3.2		1.1	0.36	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-02A (2-4)

Lab Sample ID: 500-208432-10

No Detections.

Client Sample ID: SB-02D (0-2)

Lab Sample ID: 500-208432-11

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	2.5		0.97	0.33	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-02D (2-4)

Lab Sample ID: 500-208432-12

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	1.6		0.92	0.32	mg/Kg	1	☒	6010C	Total/NA

This Detection Summary does not include radiochemical test results.

Eurofins TestAmerica, Chicago

Detection Summary

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-04C (0-2)

Lab Sample ID: 500-208432-13

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	3.1		0.95	0.32	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-04C (2-4)

Lab Sample ID: 500-208432-14

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	3.7		0.99	0.34	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-04B (0-2)

Lab Sample ID: 500-208432-15

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	64		1.0	0.35	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-04B (2-4)

Lab Sample ID: 500-208432-16

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	2.4		0.97	0.33	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-05B (0-2)

Lab Sample ID: 500-208432-17

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	5.9		1.0	0.35	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-05B (2-4)

Lab Sample ID: 500-208432-18

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	9.2		1.3	0.44	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-05C (0-2)

Lab Sample ID: 500-208432-19

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	7.8		1.1	0.39	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-05C (2-4)

Lab Sample ID: 500-208432-20

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	1.4		0.95	0.33	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-05A (0-2)

Lab Sample ID: 500-208432-21

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	6.1		1.0	0.34	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-05A (2-4)

Lab Sample ID: 500-208432-22

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	5.7		1.3	0.44	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-05D (0-2)

Lab Sample ID: 500-208432-23

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	2.9		1.0	0.35	mg/Kg	1	☒	6010C	Total/NA

Client Sample ID: SB-05D (2-4)

Lab Sample ID: 500-208432-24

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	1.1		0.96	0.33	mg/Kg	1	☒	6010C	Total/NA

This Detection Summary does not include radiochemical test results.

Eurofins TestAmerica, Chicago

Detection Summary

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: DUP-01 (111221)

Lab Sample ID: 500-208432-25

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	0.57	J	0.89	0.30	mg/Kg	1	✳	6010C	Total/NA

Client Sample ID: DUP-02 (111221)

Lab Sample ID: 500-208432-26

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	2.4		0.91	0.31	mg/Kg	1	✳	6010C	Total/NA

Client Sample ID: DUP-03 (111221)

Lab Sample ID: 500-208432-27

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Arsenic	0.78	J	1.0	0.35	mg/Kg	1	✳	6010C	Total/NA

This Detection Summary does not include radiochemical test results.

Eurofins TestAmerica, Chicago

Method Summary

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Method	Method Description	Protocol	Laboratory
6010C	Metals (ICP)	SW846	TAL CHI
Moisture	Percent Moisture	EPA	TAL CHI
3050B	Preparation, Metals	SW846	TAL CHI

Protocol References:

EPA = US Environmental Protection Agency

SW846 = "Test Methods For Evaluating Solid Waste, Physical/Chemical Methods", Third Edition, November 1986 And Its Updates.

Laboratory References:

TAL CHI = Eurofins TestAmerica, Chicago, 2417 Bond Street, University Park, IL 60484, TEL (708)534-5200



Sample Summary

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Lab Sample ID	Client Sample ID	Matrix	Collected	Received
500-208432-1	SB-04A (0-2)	Solid	11/12/21 10:05	11/16/21 10:25
500-208432-2	SB-04A (2-4)	Solid	11/12/21 10:10	11/16/21 10:25
500-208432-3	SB-04D (0-2)	Solid	11/12/21 10:15	11/16/21 10:25
500-208432-4	SB-04D (2-4)	Solid	11/12/21 10:20	11/16/21 10:25
500-208432-5	SB-01A (0-2)	Solid	11/12/21 10:30	11/16/21 10:25
500-208432-6	SB-01A (2-4)	Solid	11/12/21 10:35	11/16/21 10:25
500-208432-7	SB-02C (0-2)	Solid	11/12/21 10:45	11/16/21 10:25
500-208432-8	SB-02C (2-4)	Solid	11/12/21 10:50	11/16/21 10:25
500-208432-9	SB-02A (0-2)	Solid	11/12/21 10:55	11/16/21 10:25
500-208432-10	SB-02A (2-4)	Solid	11/12/21 11:00	11/16/21 10:25
500-208432-11	SB-02D (0-2)	Solid	11/12/21 11:10	11/16/21 10:25
500-208432-12	SB-02D (2-4)	Solid	11/12/21 11:15	11/16/21 10:25
500-208432-13	SB-04C (0-2)	Solid	11/12/21 11:50	11/16/21 10:25
500-208432-14	SB-04C (2-4)	Solid	11/12/21 11:55	11/16/21 10:25
500-208432-15	SB-04B (0-2)	Solid	11/12/21 12:00	11/16/21 10:25
500-208432-16	SB-04B (2-4)	Solid	11/12/21 12:05	11/16/21 10:25
500-208432-17	SB-05B (0-2)	Solid	11/12/21 12:15	11/16/21 10:25
500-208432-18	SB-05B (2-4)	Solid	11/12/21 12:20	11/16/21 10:25
500-208432-19	SB-05C (0-2)	Solid	11/12/21 12:25	11/16/21 10:25
500-208432-20	SB-05C (2-4)	Solid	11/12/21 12:30	11/16/21 10:25
500-208432-21	SB-05A (0-2)	Solid	11/12/21 12:35	11/16/21 10:25
500-208432-22	SB-05A (2-4)	Solid	11/12/21 12:40	11/16/21 10:25
500-208432-23	SB-05D (0-2)	Solid	11/12/21 12:45	11/16/21 10:25
500-208432-24	SB-05D (2-4)	Solid	11/12/21 12:50	11/16/21 10:25
500-208432-25	DUP-01 (111221)	Solid	11/12/21 00:00	11/16/21 10:25
500-208432-26	DUP-02 (111221)	Solid	11/12/21 00:00	11/16/21 10:25
500-208432-27	DUP-03 (111221)	Solid	11/12/21 00:00	11/16/21 10:25

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-04A (0-2)

Lab Sample ID: 500-208432-1

Date Collected: 11/12/21 10:05

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 87.9

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	3.8		1.0	0.35	mg/Kg	☼	12/02/21 03:00	12/03/21 12:02	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-04A (2-4)

Lab Sample ID: 500-208432-2

Date Collected: 11/12/21 10:10

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 95.5

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	0.73	J	0.96	0.33	mg/Kg	☼	12/02/21 02:25	12/03/21 11:08	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-04D (0-2)

Lab Sample ID: 500-208432-3

Date Collected: 11/12/21 10:15

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 90.9

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	0.77	J	1.0	0.35	mg/Kg	☼	12/02/21 03:00	12/03/21 13:12	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-04D (2-4)

Lab Sample ID: 500-208432-4

Date Collected: 11/12/21 10:20

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 95.9

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	0.39	J	1.0	0.35	mg/Kg	☼	12/02/21 03:00	12/03/21 13:16	1

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-01A (0-2)

Lab Sample ID: 500-208432-5

Date Collected: 11/12/21 10:30

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 92.3

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	12		0.99	0.34	mg/Kg	☼	12/02/21 03:00	12/03/21 13:19	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-01A (2-4)

Lab Sample ID: 500-208432-6

Date Collected: 11/12/21 10:35

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 95.0

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	3.2		0.99	0.34	mg/Kg	☼	12/02/21 03:00	12/03/21 13:22	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-02C (0-2)

Lab Sample ID: 500-208432-7

Date Collected: 11/12/21 10:45

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 89.4

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	3.2		0.97	0.33	mg/Kg	☼	12/02/21 03:00	12/03/21 13:25	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-02C (2-4)

Lab Sample ID: 500-208432-8

Date Collected: 11/12/21 10:50

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 87.2

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	0.77	J	0.99	0.34	mg/Kg	☼	12/02/21 03:00	12/03/21 13:28	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-02A (0-2)

Lab Sample ID: 500-208432-9

Date Collected: 11/12/21 10:55

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 89.3

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	3.2		1.1	0.36	mg/Kg	☼	12/02/21 03:00	12/03/21 13:31	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-02A (2-4)

Lab Sample ID: 500-208432-10

Date Collected: 11/12/21 11:00

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 65.8

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	<0.49		1.4	0.49	mg/Kg	☼	12/02/21 03:00	12/03/21 13:41	1

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-02D (0-2)

Lab Sample ID: 500-208432-11

Date Collected: 11/12/21 11:10

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 92.1

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	2.5		0.97	0.33	mg/Kg	☼	12/02/21 03:00	12/03/21 13:44	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-02D (2-4)

Lab Sample ID: 500-208432-12

Date Collected: 11/12/21 11:15

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 91.8

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	1.6		0.92	0.32	mg/Kg	☼	12/02/21 03:00	12/03/21 13:47	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-04C (0-2)

Lab Sample ID: 500-208432-13

Date Collected: 11/12/21 11:50

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 88.6

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	3.1		0.95	0.32	mg/Kg	☼	12/02/21 03:00	12/03/21 13:50	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-04C (2-4)

Lab Sample ID: 500-208432-14

Date Collected: 11/12/21 11:55

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 88.1

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	3.7		0.99	0.34	mg/Kg	☼	12/02/21 03:00	12/03/21 13:53	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-04B (0-2)

Lab Sample ID: 500-208432-15

Date Collected: 11/12/21 12:00

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 89.7

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	64		1.0	0.35	mg/Kg	☼	12/02/21 03:00	12/03/21 13:56	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-04B (2-4)

Lab Sample ID: 500-208432-16

Date Collected: 11/12/21 12:05

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 91.1

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	2.4		0.97	0.33	mg/Kg	☼	12/02/21 03:00	12/03/21 14:00	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-05B (0-2)

Lab Sample ID: 500-208432-17

Date Collected: 11/12/21 12:15

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 86.2

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	5.9		1.0	0.35	mg/Kg	☼	12/02/21 03:00	12/03/21 14:03	1

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-05B (2-4)

Lab Sample ID: 500-208432-18

Date Collected: 11/12/21 12:20

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 75.4

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	9.2		1.3	0.44	mg/Kg	☼	12/02/21 03:00	12/03/21 14:06	1

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-05C (0-2)

Lab Sample ID: 500-208432-19

Date Collected: 11/12/21 12:25

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 86.0

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	7.8		1.1	0.39	mg/Kg	☼	12/02/21 03:00	12/03/21 14:09	1

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-05C (2-4)

Lab Sample ID: 500-208432-20

Date Collected: 11/12/21 12:30

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 90.2

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	1.4		0.95	0.33	mg/Kg	☼	12/02/21 03:00	12/03/21 14:19	1

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-05A (0-2)

Lab Sample ID: 500-208432-21

Date Collected: 11/12/21 12:35

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 84.2

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	6.1		1.0	0.34	mg/Kg	☼	12/02/21 03:00	12/03/21 14:22	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-05A (2-4)

Lab Sample ID: 500-208432-22

Date Collected: 11/12/21 12:40

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 75.6

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	5.7		1.3	0.44	mg/Kg	☼	12/02/21 03:30	12/03/21 11:18	1

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-05D (0-2)

Lab Sample ID: 500-208432-23

Date Collected: 11/12/21 12:45

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 81.9

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	2.9		1.0	0.35	mg/Kg	☼	12/02/21 03:30	12/03/21 11:40	1

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-05D (2-4)

Lab Sample ID: 500-208432-24

Date Collected: 11/12/21 12:50

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 92.7

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	1.1		0.96	0.33	mg/Kg	☼	12/02/21 03:30	12/03/21 11:43	1

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: DUP-01 (111221)

Lab Sample ID: 500-208432-25

Date Collected: 11/12/21 00:00

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 95.4

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	0.57	J	0.89	0.30	mg/Kg	☼	12/02/21 03:30	12/03/21 11:46	1

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: DUP-02 (111221)

Lab Sample ID: 500-208432-26

Date Collected: 11/12/21 00:00

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 92.8

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	2.4		0.91	0.31	mg/Kg	☼	12/02/21 03:30	12/03/21 11:49	1

Client Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: DUP-03 (111221)

Lab Sample ID: 500-208432-27

Date Collected: 11/12/21 00:00

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 90.1

Method: 6010C - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	0.78	J	1.0	0.35	mg/Kg	☼	12/02/21 03:30	12/03/21 11:52	1

Definitions/Glossary

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Qualifiers

Metals

Qualifier	Qualifier Description
J	Result is less than the RL but greater than or equal to the MDL and the concentration is an approximate value.

Glossary

Abbreviation	These commonly used abbreviations may or may not be present in this report.
α	Listed under the "D" column to designate that the result is reported on a dry weight basis
%R	Percent Recovery
CFL	Contains Free Liquid
CFU	Colony Forming Unit
CNF	Contains No Free Liquid
DER	Duplicate Error Ratio (normalized absolute difference)
Dil Fac	Dilution Factor
DL	Detection Limit (DoD/DOE)
DL, RA, RE, IN	Indicates a Dilution, Re-analysis, Re-extraction, or additional Initial metals/anion analysis of the sample
DLC	Decision Level Concentration (Radiochemistry)
EDL	Estimated Detection Limit (Dioxin)
LOD	Limit of Detection (DoD/DOE)
LOQ	Limit of Quantitation (DoD/DOE)
MCL	EPA recommended "Maximum Contaminant Level"
MDA	Minimum Detectable Activity (Radiochemistry)
MDC	Minimum Detectable Concentration (Radiochemistry)
MDL	Method Detection Limit
ML	Minimum Level (Dioxin)
MPN	Most Probable Number
MQL	Method Quantitation Limit
NC	Not Calculated
ND	Not Detected at the reporting limit (or MDL or EDL if shown)
NEG	Negative / Absent
POS	Positive / Present
PQL	Practical Quantitation Limit
PRES	Presumptive
QC	Quality Control
RER	Relative Error Ratio (Radiochemistry)
RL	Reporting Limit or Requested Limit (Radiochemistry)
RPD	Relative Percent Difference, a measure of the relative difference between two points
TEF	Toxicity Equivalent Factor (Dioxin)
TEQ	Toxicity Equivalent Quotient (Dioxin)
TNTC	Too Numerous To Count

QC Sample Results

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Method: 6010C - Metals (ICP)

Lab Sample ID: MB 500-631718/1-A
Matrix: Solid
Analysis Batch: 632135

Client Sample ID: Method Blank
Prep Type: Total/NA
Prep Batch: 631718

Analyte	MB Result	MB Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	<0.34		1.0	0.34	mg/Kg		12/02/21 02:25	12/03/21 11:01	1

Lab Sample ID: LCS 500-631718/2-A
Matrix: Solid
Analysis Batch: 632135

Client Sample ID: Lab Control Sample
Prep Type: Total/NA
Prep Batch: 631718

Analyte	Spike Added	LCS Result	LCS Qualifier	Unit	D	%Rec	%Rec. Limits
Arsenic	10.0	8.28		mg/Kg		83	80 - 120

Lab Sample ID: MB 500-631719/1-A
Matrix: Solid
Analysis Batch: 632135

Client Sample ID: Method Blank
Prep Type: Total/NA
Prep Batch: 631719

Analyte	MB Result	MB Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	<0.34		1.0	0.34	mg/Kg		12/02/21 03:00	12/03/21 11:56	1

Lab Sample ID: LCS 500-631719/2-A
Matrix: Solid
Analysis Batch: 632135

Client Sample ID: Lab Control Sample
Prep Type: Total/NA
Prep Batch: 631719

Analyte	Spike Added	LCS Result	LCS Qualifier	Unit	D	%Rec	%Rec. Limits
Arsenic	10.0	8.55		mg/Kg		85	80 - 120

Lab Sample ID: 500-208432-1 MS
Matrix: Solid
Analysis Batch: 632135

Client Sample ID: SB-04A (0-2)
Prep Type: Total/NA
Prep Batch: 631719

Analyte	Sample Result	Sample Qualifier	Spike Added	MS Result	MS Qualifier	Unit	D	%Rec	%Rec. Limits
Arsenic	3.8		10.4	12.1		mg/Kg	☼	80	75 - 125

Lab Sample ID: 500-208432-1 MSD
Matrix: Solid
Analysis Batch: 632135

Client Sample ID: SB-04A (0-2)
Prep Type: Total/NA
Prep Batch: 631719

Analyte	Sample Result	Sample Qualifier	Spike Added	MSD Result	MSD Qualifier	Unit	D	%Rec	%Rec. Limits	RPD	RPD Limit
Arsenic	3.8		10.7	12.8		mg/Kg	☼	84	75 - 125	6	20

Lab Sample ID: 500-208432-1 DU
Matrix: Solid
Analysis Batch: 632135

Client Sample ID: SB-04A (0-2)
Prep Type: Total/NA
Prep Batch: 631719

Analyte	Sample Result	Sample Qualifier	DU Result	DU Qualifier	Unit	D	RPD	RPD Limit
Arsenic	3.8		3.81		mg/Kg	☼	1	20

Lab Sample ID: MB 500-631720/1-A
Matrix: Solid
Analysis Batch: 632135

Client Sample ID: Method Blank
Prep Type: Total/NA
Prep Batch: 631720

Analyte	MB Result	MB Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	<0.34		1.0	0.34	mg/Kg		12/02/21 03:30	12/03/21 11:11	1

Eurofins TestAmerica, Chicago

QC Sample Results

Client: ARCADIS U.S., Inc.
 Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Method: 6010C - Metals (ICP)

Lab Sample ID: LCS 500-631720/2-A
Matrix: Solid
Analysis Batch: 632135

Client Sample ID: Lab Control Sample
Prep Type: Total/NA
Prep Batch: 631720
 %Rec.

Analyte	Spike Added	LCS Result	LCS Qualifier	Unit	D	%Rec	Limits
Arsenic	10.0	8.41		mg/Kg		84	80 - 120

Lab Sample ID: 500-208432-22 MS
Matrix: Solid
Analysis Batch: 632135

Client Sample ID: SB-05A (2-4)
Prep Type: Total/NA
Prep Batch: 631720
 %Rec.

Analyte	Sample Result	Sample Qualifier	Spike Added	MS Result	MS Qualifier	Unit	D	%Rec	Limits
Arsenic	5.7		12.2	17.3		mg/Kg	✱	95	75 - 125

Lab Sample ID: 500-208432-22 MSD
Matrix: Solid
Analysis Batch: 632135

Client Sample ID: SB-05A (2-4)
Prep Type: Total/NA
Prep Batch: 631720
 %Rec.

Analyte	Sample Result	Sample Qualifier	Spike Added	MSD Result	MSD Qualifier	Unit	D	%Rec	Limits	RPD	RPD Limit
Arsenic	5.7		12.7	17.5		mg/Kg	✱	93	75 - 125	1	20

Lab Sample ID: 500-208432-22 DU
Matrix: Solid
Analysis Batch: 632135

Client Sample ID: SB-05A (2-4)
Prep Type: Total/NA
Prep Batch: 631720
 %Rec.

Analyte	Sample Result	Sample Qualifier	DU Result	DU Qualifier	Unit	D	RPD	RPD Limit
Arsenic	5.7		5.58		mg/Kg	✱	2	20

Lab Chronicle

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-04A (0-2)

Date Collected: 11/12/21 10:05

Date Received: 11/16/21 10:25

Lab Sample ID: 500-208432-1

Matrix: Solid

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Client Sample ID: SB-04A (0-2)

Date Collected: 11/12/21 10:05

Date Received: 11/16/21 10:25

Lab Sample ID: 500-208432-1

Matrix: Solid

Percent Solids: 87.9

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 12:02	JJB	TAL CHI

Client Sample ID: SB-04A (2-4)

Date Collected: 11/12/21 10:10

Date Received: 11/16/21 10:25

Lab Sample ID: 500-208432-2

Matrix: Solid

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Client Sample ID: SB-04A (2-4)

Date Collected: 11/12/21 10:10

Date Received: 11/16/21 10:25

Lab Sample ID: 500-208432-2

Matrix: Solid

Percent Solids: 95.5

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631718	12/02/21 02:25	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 11:08	JJB	TAL CHI

Client Sample ID: SB-04D (0-2)

Date Collected: 11/12/21 10:15

Date Received: 11/16/21 10:25

Lab Sample ID: 500-208432-3

Matrix: Solid

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Client Sample ID: SB-04D (0-2)

Date Collected: 11/12/21 10:15

Date Received: 11/16/21 10:25

Lab Sample ID: 500-208432-3

Matrix: Solid

Percent Solids: 90.9

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 13:12	JJB	TAL CHI

Client Sample ID: SB-04D (2-4)

Date Collected: 11/12/21 10:20

Date Received: 11/16/21 10:25

Lab Sample ID: 500-208432-4

Matrix: Solid

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Eurofins TestAmerica, Chicago

Lab Chronicle

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-04D (2-4)

Lab Sample ID: 500-208432-4

Date Collected: 11/12/21 10:20

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 95.9

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 13:16	JJB	TAL CHI

Client Sample ID: SB-01A (0-2)

Lab Sample ID: 500-208432-5

Date Collected: 11/12/21 10:30

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Client Sample ID: SB-01A (0-2)

Lab Sample ID: 500-208432-5

Date Collected: 11/12/21 10:30

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 92.3

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 13:19	JJB	TAL CHI

Client Sample ID: SB-01A (2-4)

Lab Sample ID: 500-208432-6

Date Collected: 11/12/21 10:35

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Client Sample ID: SB-01A (2-4)

Lab Sample ID: 500-208432-6

Date Collected: 11/12/21 10:35

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 95.0

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 13:22	JJB	TAL CHI

Client Sample ID: SB-02C (0-2)

Lab Sample ID: 500-208432-7

Date Collected: 11/12/21 10:45

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Lab Chronicle

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-02C (0-2)

Date Collected: 11/12/21 10:45

Date Received: 11/16/21 10:25

Lab Sample ID: 500-208432-7

Matrix: Solid

Percent Solids: 89.4

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 13:25	JJB	TAL CHI

Client Sample ID: SB-02C (2-4)

Date Collected: 11/12/21 10:50

Date Received: 11/16/21 10:25

Lab Sample ID: 500-208432-8

Matrix: Solid

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Client Sample ID: SB-02C (2-4)

Date Collected: 11/12/21 10:50

Date Received: 11/16/21 10:25

Lab Sample ID: 500-208432-8

Matrix: Solid

Percent Solids: 87.2

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 13:28	JJB	TAL CHI

Client Sample ID: SB-02A (0-2)

Date Collected: 11/12/21 10:55

Date Received: 11/16/21 10:25

Lab Sample ID: 500-208432-9

Matrix: Solid

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Client Sample ID: SB-02A (0-2)

Date Collected: 11/12/21 10:55

Date Received: 11/16/21 10:25

Lab Sample ID: 500-208432-9

Matrix: Solid

Percent Solids: 89.3

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 13:31	JJB	TAL CHI

Client Sample ID: SB-02A (2-4)

Date Collected: 11/12/21 11:00

Date Received: 11/16/21 10:25

Lab Sample ID: 500-208432-10

Matrix: Solid

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Lab Chronicle

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-02A (2-4)

Lab Sample ID: 500-208432-10

Date Collected: 11/12/21 11:00

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 65.8

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 13:41	JJB	TAL CHI

Client Sample ID: SB-02D (0-2)

Lab Sample ID: 500-208432-11

Date Collected: 11/12/21 11:10

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Client Sample ID: SB-02D (0-2)

Lab Sample ID: 500-208432-11

Date Collected: 11/12/21 11:10

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 92.1

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 13:44	JJB	TAL CHI

Client Sample ID: SB-02D (2-4)

Lab Sample ID: 500-208432-12

Date Collected: 11/12/21 11:15

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Client Sample ID: SB-02D (2-4)

Lab Sample ID: 500-208432-12

Date Collected: 11/12/21 11:15

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 91.8

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 13:47	JJB	TAL CHI

Client Sample ID: SB-04C (0-2)

Lab Sample ID: 500-208432-13

Date Collected: 11/12/21 11:50

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Lab Chronicle

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-04C (0-2)

Lab Sample ID: 500-208432-13

Date Collected: 11/12/21 11:50

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 88.6

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 13:50	JJB	TAL CHI

Client Sample ID: SB-04C (2-4)

Lab Sample ID: 500-208432-14

Date Collected: 11/12/21 11:55

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Client Sample ID: SB-04C (2-4)

Lab Sample ID: 500-208432-14

Date Collected: 11/12/21 11:55

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 88.1

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 13:53	JJB	TAL CHI

Client Sample ID: SB-04B (0-2)

Lab Sample ID: 500-208432-15

Date Collected: 11/12/21 12:00

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Client Sample ID: SB-04B (0-2)

Lab Sample ID: 500-208432-15

Date Collected: 11/12/21 12:00

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 89.7

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 13:56	JJB	TAL CHI

Client Sample ID: SB-04B (2-4)

Lab Sample ID: 500-208432-16

Date Collected: 11/12/21 12:05

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Lab Chronicle

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-04B (2-4)

Lab Sample ID: 500-208432-16

Date Collected: 11/12/21 12:05

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 91.1

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 14:00	JJB	TAL CHI

Client Sample ID: SB-05B (0-2)

Lab Sample ID: 500-208432-17

Date Collected: 11/12/21 12:15

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Client Sample ID: SB-05B (0-2)

Lab Sample ID: 500-208432-17

Date Collected: 11/12/21 12:15

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 86.2

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 14:03	JJB	TAL CHI

Client Sample ID: SB-05B (2-4)

Lab Sample ID: 500-208432-18

Date Collected: 11/12/21 12:20

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Client Sample ID: SB-05B (2-4)

Lab Sample ID: 500-208432-18

Date Collected: 11/12/21 12:20

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 75.4

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 14:06	JJB	TAL CHI

Client Sample ID: SB-05C (0-2)

Lab Sample ID: 500-208432-19

Date Collected: 11/12/21 12:25

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Lab Chronicle

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-05C (0-2)

Lab Sample ID: 500-208432-19

Date Collected: 11/12/21 12:25

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 86.0

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 14:09	JJB	TAL CHI

Client Sample ID: SB-05C (2-4)

Lab Sample ID: 500-208432-20

Date Collected: 11/12/21 12:30

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631125	11/29/21 07:03	LWN	TAL CHI

Client Sample ID: SB-05C (2-4)

Lab Sample ID: 500-208432-20

Date Collected: 11/12/21 12:30

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 90.2

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 14:19	JJB	TAL CHI

Client Sample ID: SB-05A (0-2)

Lab Sample ID: 500-208432-21

Date Collected: 11/12/21 12:35

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631201	11/29/21 09:31	LWN	TAL CHI

Client Sample ID: SB-05A (0-2)

Lab Sample ID: 500-208432-21

Date Collected: 11/12/21 12:35

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 84.2

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631719	12/02/21 03:00	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 14:22	JJB	TAL CHI

Client Sample ID: SB-05A (2-4)

Lab Sample ID: 500-208432-22

Date Collected: 11/12/21 12:40

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631201	11/29/21 09:31	LWN	TAL CHI

Lab Chronicle

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: SB-05A (2-4)

Lab Sample ID: 500-208432-22

Date Collected: 11/12/21 12:40

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 75.6

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631720	12/02/21 03:30	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 11:18	JJB	TAL CHI

Client Sample ID: SB-05D (0-2)

Lab Sample ID: 500-208432-23

Date Collected: 11/12/21 12:45

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631201	11/29/21 09:31	LWN	TAL CHI

Client Sample ID: SB-05D (0-2)

Lab Sample ID: 500-208432-23

Date Collected: 11/12/21 12:45

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 81.9

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631720	12/02/21 03:30	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 11:40	JJB	TAL CHI

Client Sample ID: SB-05D (2-4)

Lab Sample ID: 500-208432-24

Date Collected: 11/12/21 12:50

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631201	11/29/21 09:31	LWN	TAL CHI

Client Sample ID: SB-05D (2-4)

Lab Sample ID: 500-208432-24

Date Collected: 11/12/21 12:50

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 92.7

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631720	12/02/21 03:30	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 11:43	JJB	TAL CHI

Client Sample ID: DUP-01 (111221)

Lab Sample ID: 500-208432-25

Date Collected: 11/12/21 00:00

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631201	11/29/21 09:31	LWN	TAL CHI

Lab Chronicle

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Client Sample ID: DUP-01 (111221)

Lab Sample ID: 500-208432-25

Date Collected: 11/12/21 00:00

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 95.4

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631720	12/02/21 03:30	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 11:46	JJB	TAL CHI

Client Sample ID: DUP-02 (111221)

Lab Sample ID: 500-208432-26

Date Collected: 11/12/21 00:00

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631201	11/29/21 09:31	LWN	TAL CHI

Client Sample ID: DUP-02 (111221)

Lab Sample ID: 500-208432-26

Date Collected: 11/12/21 00:00

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 92.8

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631720	12/02/21 03:30	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 11:49	JJB	TAL CHI

Client Sample ID: DUP-03 (111221)

Lab Sample ID: 500-208432-27

Date Collected: 11/12/21 00:00

Matrix: Solid

Date Received: 11/16/21 10:25

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Analysis	Moisture		1	631201	11/29/21 09:31	LWN	TAL CHI

Client Sample ID: DUP-03 (111221)

Lab Sample ID: 500-208432-27

Date Collected: 11/12/21 00:00

Matrix: Solid

Date Received: 11/16/21 10:25

Percent Solids: 90.1

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	3050B			631720	12/02/21 03:30	WRE	TAL CHI
Total/NA	Analysis	6010C		1	632135	12/03/21 11:52	JJB	TAL CHI

Laboratory References:

TAL CHI = Eurofins TestAmerica, Chicago, 2417 Bond Street, University Park, IL 60484, TEL (708)534-5200

Accreditation/Certification Summary

Client: ARCADIS U.S., Inc.
Project/Site: 3M Wausau, WI 30087606.00001

Job ID: 500-208432-1

Laboratory: Eurofins TestAmerica, Chicago

The accreditations/certifications listed below are applicable to this report.

Authority	Program	Identification Number	Expiration Date
Wisconsin	State	999580010	08-31-22

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13

Chain of Custody Record

Regulatory Program: DW NPDES RCRA Other

TestAmerica Laboratories, Inc. d/b/a Eurofins TestAmerica

Client Contact	Project Manager: <u>Trena Seheimer</u>	Site Contact: LR	Date: <u>11/15/21</u>
Arcadis 126 N Jefferson St Milwaukee, WI 53202 (xxx) xxx-xxxx Phn (xxx) xxx-xxxx FAX	Analysis Turnaround Time <input type="checkbox"/> CALENDAR DAYS <input type="checkbox"/> WORKING DAYS TAT if different from Below <u>Standard</u> <input type="checkbox"/> 2 weeks <input type="checkbox"/> 1 week <input type="checkbox"/> 2 days <input type="checkbox"/> 1 day	Lab Contact:	Carrier:
Project Name <u>3M Wausau</u> Site <u>Wausau, WI</u> P O # <u>30087606 00001</u>	Sample Identification	Filtered Sample (Y/N)	Perform MS / MSD (Y/N)



500-208432 COC

COC No <u>7</u> of <u>3</u> COCs
TALS Project #
Sampler
For Lab Use Only: Walk-in Client. <input type="checkbox"/> Lab Sampling <input type="checkbox"/>
Job / SDG No <u>500-208432</u>

Sample Identification	Sample Date	Sample Time	Sample Type (C=Comp, G=Grab)	Matrix	# of Cont.	Filtered Sample (Y/N)	Perform MS / MSD (Y/N)	Sample Specific Notes
1 SB-04A (0-2)	11/12/21	1005	G	S	1	N	X	MS/MSD
2 SB-04A (2-4)		1010				N		
3 SB-04D (0-2)		1015				N		
4 SB-04D (2-4)		1020				N		
5 SB-01A (0-2)		1030				N		
6 SB-01A (2-4)		1035				N		
7 SB-02C (0-2)		1045				N		
8 SB-02C (2-4)		1050				N		
9 SB-02A (0-2)		1055				N		
10 SB-02A (2-4)		1100				N		
11 SB-02D (0-2)		1110				N		
12 SB-02D (2-4)		1115				N		

Preservation Used: 1= Ice, 2= HCl; 3= H2SO4; 4=HNO3; 5=NaOH; 6= Other

Possible Hazard Identification: Are any samples from a listed EPA Hazardous Waste? Please List any EPA Waste Codes for the sample in the Comments Section if the lab is to dispose of the sample <input checked="" type="checkbox"/> Non-Hazardous <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown	Sample Disposal (A fee may be assessed if samples are retained longer than 1 month) <input type="checkbox"/> Return to Client <input checked="" type="checkbox"/> Disposal by Lab <input type="checkbox"/> Archive for _____ Months
--	--

Special Instructions/QC Requirements & Comments:

Custody Seals Intact <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Custody Seal No	Cooler Temp (°C) Obs'd <u>4.9</u> Cor'd <u>4.8</u>	Therm ID No
Relinquished by: <u>[Signature]</u>	Company: <u>Arcadis</u>	Date/Time: <u>11/15/21 900</u>	Received by: <u>[Signature]</u>
Relinquished by: <u>[Signature]</u>	Company: <u>TA</u>	Date/Time: <u>11/15/21 1700</u>	Received by: <u>[Signature]</u>
Relinquished by: <u>[Signature]</u>	Company: <u>[Signature]</u>	Date/Time: <u>11/16/21 1025</u>	Received in Laboratory by: <u>[Signature]</u>

University Park, IL 60484-3101
phone 708 534 5200 fax 708 534 5211

Regulatory Program: DW NPDES RCRA Other

TestAmerica Laboratories, Inc. d/b/a Eurofins TestAmerica

Project Manager: See p1

Client Contact		Site Contact: LR		Date: 11/15/21		COC No	
Email		Lab Contact:		Carrier:		2 of 3 COCs	
Tel/Fax:		Analysis Turnaround Time		TALS Project #		Sampler:	
Arcadis		<input type="checkbox"/> CALENDAR DAYS <input type="checkbox"/> WORKING DAYS		Job / SDG No		For Lab Use Only:	
126 N Jefferson St		TAT if different from Below _____		Walk-in Client.		Lab Sampling	
Milwaukee, WI 53202		<input type="checkbox"/> 2 weeks		Job / SDG No		500-208432	
(xxx) xxx-xxxx Phone		<input type="checkbox"/> 1 week		Sample Specific Notes			
(xxx) xxx-xxxx FAX		<input type="checkbox"/> 2 days					
Project Name 3M Wausau		<input type="checkbox"/> 1 day					
Site Wausau, WI							
P O # 30087606 00001							

Sample Identification	Sample Date	Sample Time	Sample Type (C=Comp, G=Grab)	Matrix	# of Cont.	Filtered Sample (Y/N)	Perform MS / MSD (Y/N)	Sample Specific Notes
13 SB-04C (0-2)	11/12/21	1150	G	S	1	N	X	
14 SB-04C (2-4)		1155						
15 SB-04B (0-2)		1200						
16 SB-04B (2-4)		1205						
17 SB-05B (0-2)		1215						
18 SB-05B (2-4)		1220						
19 SB-05C (0-2)		1225						
20 SB-05C (2-4)		1230						
21 SB-05A (0-2)		1235						
22 SB-05A (2-4)		1240						MS/MSD
23 SB-05D (0-2)		1245						
24 SB-05D (2-4)		1250						

Preservation Used: 1= Ice, 2= HCl; 3= H2SO4; 4=HNO3; 5=NaOH; 6= Other

<p>Possible Hazard Identification: Are any samples from a listed EPA Hazardous Waste? Please List any EPA Waste Codes for the sample in the Comments Section if the lab is to dispose of the sample</p> <p><input checked="" type="checkbox"/> Non-Hazardous <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown</p>	<p>Sample Disposal (A fee may be assessed if samples are retained longer than 1 month)</p> <p><input type="checkbox"/> Return to Client <input checked="" type="checkbox"/> Disposal by Lab <input type="checkbox"/> Archive for _____ Months</p>
--	---

Special Instructions/QC Requirements & Comments:

Custody Seals Intact. <input type="checkbox"/> Yes <input type="checkbox"/> No	Custody Seal No	Cooler Temp (°C) Obs'd	Corr'd	Therm ID No
Relinquished by: [Signature]	Company: Arcadis	Date/Time: 11/15/21 900	Received by: [Signature]	Company: A
Relinquished by: [Signature]	Company: T7	Date/Time: 11-15-21 1700	Received by:	Company:
Relinquished by:	Company:	Date/Time:	Received in Laboratory by: [Signature]	Company: [Signature]

Chain of Custody Record

University Park, IL 60484-3101
phone 708 534 5200 fax 708 534 5211

Regulatory Program: DW NPDES RCRA Other

TestAmerica Laboratories, Inc. d/b/a Eurofins TestAmerica

Client Contact		Project Manager: <i>see p1</i>		Site Contact: LR		Date: 11/15/21		COC No	
Arcadis		Email		Lab Contact:		Carrier:		3 of 3 COCs	
126 N Jefferson St		Tel/Fax:		Analysis Turnaround Time <input type="checkbox"/> CALENDAR DAYS <input type="checkbox"/> WORKING DAYS TAT if different from Below _____ <input type="checkbox"/> 2 weeks <input type="checkbox"/> 1 week <input type="checkbox"/> 2 days <input type="checkbox"/> 1 day		Filtered Sample (Y/N) Perform MS / MSD (Y/N) AS		TALS Project #	
Milwaukee, WI 53202		(xxx) xxx-xxxx Phone (xxx) xxx-xxxx FAX						Sampler:	
Project Name 3M Wausau								For Lab Use Only: Walk-in Client <input type="checkbox"/> Lab Sampling <input type="checkbox"/>	
Site Wausau, WI								Job / SDG No	
P O # 30087606 00001								500-208432	
Sample Identification		Sample Date	Sample Time	Sample Type (C=Comp, G=Grab)	Matrix	# of Cont.			Sample Specific Notes
25	DUP-01 (111221)	11/12/21	-	G	S	1	N	N	Duplicate
26	DUP-02 (111221)	↓	-	↓	↓	↓	↓	↓	Duplicate
27	DUP-03 (111221)	↓	-	↓	↓	↓	↓	↓	Duplicate
Preservation Used: 1= Ice, 2= HCl; 3= H2SO4; 4=HNO3; 5=NaOH; 6= Other _____									
Possible Hazard Identification: Are any samples from a listed EPA Hazardous Waste? Please List any EPA Waste Codes for the sample in the Comments Section if the lab is to dispose of the sample <input checked="" type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown					Sample Disposal (A fee may be assessed if samples are retained longer than 1 month) <input type="checkbox"/> Return to Client <input checked="" type="checkbox"/> Disposal by Lab <input type="checkbox"/> Archive for _____ Months				
Special Instructions/QC Requirements & Comments: 									
Custody Seals Intact: <input type="checkbox"/> Yes <input type="checkbox"/> No		Custody Seal No.		Cooler Temp (°C) Obs'd		Corr'd		Therm ID No	
Relinquished by: <i>[Signature]</i>		Company: Arcadis		Date/Time: 11/15/21 9:00		Received by: <i>[Signature]</i>		Company: EA	
Relinquished by: <i>[Signature]</i>		Company: EA		Date/Time: 11-15-21 1700		Received by: <i>[Signature]</i>		Company: EA	
Relinquished by: <i>[Signature]</i>		Company: EA		Date/Time: 11/16/21 1025		Received by: <i>[Signature]</i>		Company: EA	



Login Sample Receipt Checklist

Client: ARCADIS U.S., Inc.

Job Number: 500-208432-1

Login Number: 208432

List Source: Eurofins TestAmerica, Chicago

List Number: 1

Creator: Scott, Sherri L

Question	Answer	Comment
Radioactivity wasn't checked or is \leq background as measured by a survey meter.	True	
The cooler's custody seal, if present, is intact.	True	
Sample custody seals, if present, are intact.	True	
The cooler or samples do not appear to have been compromised or tampered with.	True	
Samples were received on ice.	True	
Cooler Temperature is acceptable.	True	
Cooler Temperature is recorded.	True	4.8
COC is present.	True	
COC is filled out in ink and legible.	True	
COC is filled out with all pertinent information.	True	
Is the Field Sampler's name present on COC?	True	
There are no discrepancies between the containers received and the COC.	True	
Samples are received within Holding Time (excluding tests with immediate HTs)	True	
Sample containers have legible labels.	True	
Containers are not broken or leaking.	True	
Sample collection date/times are provided.	True	
Appropriate sample containers are used.	True	
Sample bottles are completely filled.	True	
Sample Preservation Verified.	True	
There is sufficient vol. for all requested analyses, incl. any requested MS/MSDs	True	
Containers requiring zero headspace have no headspace or bubble is <math><6\text{mm}</math> (1/4").	N/A	
Multiphasic samples are not present.	True	
Samples do not require splitting or compositing.	True	
Residual Chlorine Checked.	N/A	



Arcadis U.S., Inc.
126 North Jefferson Street, Suite 400
Milwaukee
Wisconsin 53202
Phone: 414 276 7742
Fax: 414 276 7603
www.arcadis.com