US ERA ARCHIVE DOCUMENT



| Facility: West Lake Landfill                 | Well ID: _          | D-3  | Date: 4/11/2013                         |
|--|---------------------|--|---|
| Access:                                      |                     |  |   |
| Accessibility: Good                          | Fair _              | Poor   |   |
| Vicinity of well clear of weeds and/or debri | s: Yes_             | No _   |   |
| Remarks: LA                                  |                     |  |   |
| Concrete Pad:                                |                     |  |   |
| Any issues with concrete pad?                | No V                | Yes  | f yes, then explain below.              |
| Presence of depressions or standing wate     | r around well:      | Yes  | No No                                   |
| Remarks: N.A                                 |                     |  |   |
| Protective Outer Casing: Material:_          | Steel               |  |   |
| Note: For ANY indication of Damaged, ple     | ease provide writte | en description   |   |
| Condition of Protective Casing:              | Good                | Damaged  | Missing                                 |
| Condition of Exterior Well ID Markings:      | Good                | Damaged  | Missing                                 |
| Condition of Locking Cap:                    | Good                | Damaged  | Missing                                 |
| Condition of Lock                            | Good 🗸              | Damaged  | Missing                                 |
| Condition of Weep Hole:                      | Good 🗸              | Damaged  | Missing                                 |
| Remarks: Eightenor ID faded - r              | e-scheled enter     | nor 18 an 4/1  | 1/2013; replaced lock on                |
| Well Riser: Material: PUC                    |                     |  | **************************************  |
| Note: For ANY indication of Damaged, ple     | ease provide writte | en description   |   |
| Condition of Riser:                          | Goo                 | d  | Damaged                                 |
| Condition of Riser Cap: God                  | od                  | Damaged  | Missing                                 |
| Measurement Reference Point: God             | od                  | Damaged  | Missing                                 |
| Remarks: LLA                                 |                     | entitioner internet i |   |
| Dedicated Purging / Sampling Device Present  | >                   |  |   |
| Yes No                                       | lf yes, what type o | f device? Wate   | ra foot value à tubuy                   |
| Condition: Good                              | Damaged             | If Damag   | ed, please provide written description. |
| Remarks: NA                                  |                     | ***************************************  |   |
| Field Certification: 12                      | £                   | v. Chemica 6   | naise 4/11/2 no                         |
| Signed                                       | 7-110               | Title  | Date                                    |



| Facility: West Lake Landfill Well ID: D-6 Date: 4/9/13                                | <u> </u>    |
|---|-------------|
| Access:   |             |
| Accessibility: Good Fair Poor   |             |
| Vicinity of well clear of weeds and/or debris: VV Yes No X                            |             |
| Remarks: areas by Mile only   |             |
| Concrete Pad:  Any issues with concrete pad?  No   Yes   If yes, then explain below.  |             |
| Presence of depressions or standing water around well: YesNo $\overline{\mathcal{Y}}$ |             |
| Remarks:  |             |
| Protective Outer Casing: Material: 5 too  | <del></del> |
| Note: For ANY indication of Damaged, please provide written description               |             |
| Condition of Protective Casing: Good 📈 Damaged Missing                                |             |
| Condition of Exterior Well ID Markings: Good Damaged Missing                          |             |
| Condition of Locking Cap: Good Damaged Missing  | <del></del> |
| Condition of Lock Good Damaged 💹 Missing  | <del></del> |
| Condition of Weep Hole: Good A Damaged Missing  Remarks:                              |             |
| Well Riser: Material:   |             |
| Note: For ANY indication of Damaged, please provide written description               |             |
| Condition of Riser: Good Damaged  |             |
| Condition of Riser Cap: Good 🗡 Damaged Missing  | •           |
| Measurement Reference Point: Good Damaged Missing                                     |             |
| Remarks:  |             |
| L Dedicated Purging / Sampling Device Present?  |             |
| Yes No If yes, what type of device?   |             |
| Condition: Good $\nearrow$ Damaged If Damaged, please provide written descr           | iption.     |
| Remarks:  |             |
| Field Certification: Sr. Good Chy 4/9/13 Signed Title Date                            |             |



| Facility: West Lake Landfill Well ID: Dete: 4/4/13   |
|--|
| Access: Accessibility: Good Fair  Vicinity of well clear of weeds and/or debris:  Remarks: |
| Concrete Pad:  |
| Any issues with concrete pad? No Yes If yes, then explain below.                           |
| Presence of depressions or standing water around well: Yes No                              |
| Remarks:   |
| Protective Outer Casing: Material: 5)-8  |
| Note: For ANY indication of Damaged, please provide written description                    |
| Condition of Protective Casing: Good Damaged Missing                                       |
| Condition of Exterior Well ID Markings: Good Damaged Missing                               |
| Condition of Locking Cap: Good Damaged Missing   |
| Condition of Lock Good Damaged Missing   |
| Condition of Weep Hole: Good X Damaged Missing   |
| Well Riser: Material: DVC  |
| Note: For ANY indication of Damaged, please provide written description                    |
| Condition of Riser: Good 💥 Damaged   |
| Condition of Riser Cap: Good Damaged Missing   |
| Measurement Reference Point: Good N Damaged Missing  |
| Remarks:   |
| Dedicated Purging / Sampling Device Present?   |
| Yes No If yes, what type of device? Worker   |
| Condition: Good Namaged If Damaged, please provide written description.                    |
| Remarks:   |
| Field Certification: Signed Signed Title Date  |



| Facility: West Lake Landfill Well ID: D-B Date: 4/4/3   |
|---|
| Access:  Accessibility:  Good Fair Poor  Vicinity of well clear of weeds and/or debris:  Yes No   |
| Remarks:  |
| Concrete Pad:  Any issues with concrete pad?  No Yes If yes, then explain below.  |
| Presence of depressions or standing water around well: Yes No   |
| Remarks:  |
| Protective Outer Casing: Material: 5 ce   |
| Note: For ANY indication of Damaged, please provide written description   |
| Condition of Protective Casing: Good <u>N</u> Damaged Missing   |
| Condition of Exterior Well ID Markings: Good <u>W</u> Damaged <u>Missing</u>  |
| Condition of Locking Cap: Good Damaged Missing  |
| Condition of Lock Good Damaged Missing  |
| Condition of Weep Hole: Good N Damaged Missing  Remarks: No. Koroso Doods W Mouron Condition of Weep Hole: Good No. Warner Condition of Weep Hole: Good No. Warner Condition of Weep Hole: Missing No. Warner Condition of Weep Hole: Good No. Warner |
| Well Riser: Material:   |
| Note: For ANY indication of Damaged, please provide written description   |
| Condition of Riser: Good Damaged  |
| Condition of Riser Cap: Good Damaged Missing  |
| Measurement Reference Point: Good Damaged Missing   |
| Remarks: Coop propert, stuckent too toll, trum Put to close well  |
| Dedicated Purging / Sampling Device Present?  |
| Yes P No If yes, what type of device? (LD (DV)  |
| Condition: Good Damaged If Damaged, please provide written description.   |
| Remarks:  |
| Field Certification: Stop Stop UMB Signed Title Date  |



| Facility: West Lake Landfill                   | Well ID:       | D-14            | Date: 4/8/2013   |
|--|----------------|-----------------|--|
| Access:  |                |                 |  |
| Accessibility: Good                            | Fair           | Poor            | - Andrewson and the state of th |
| Vicinity of well clear of weeds and/or debris: |                |                 |  |
| Remarks: Wasking access of                     | my per         | sik manger.     |  |
| Concrete Pad: Any issues with concrete pad? No |                | Yes /           | f yes, then explain below.   |
| Presence of depressions or standing water are  | ound well;     | Yes             | No   |
| Remarks: Pad burned if present                 | ·              |                 |  |
| Protective Outer Casing: Material:             | Seel           |                 |  |
| Note: For ANY indication of Damaged, please    | provide writ   | ten description |  |
| Condition of Protective Casing: Go             | od 🗸           | Damaged _       | Missing  |
| Condition of Exterior Well ID Markings: Go     | od             | Damaged         | Missing 🗸  |
| Condition of Locking Cap: Go                   | od <u> </u>    | Damaged         | Missing  |
| Condition of Lock Go                           | ood 🗸          | _ Damaged       | Missing  |
| ·  | ood            | Damaged         | Missing V  |
| Remarks: Replaced love a                       | 4/3/2013       | <u> </u>        | · · · · · · · · · · · · · · · · · · ·  |
| Well Riser: Material: PUC                      |                |                 |  |
| Note: For ANY indication of Damaged, please    | e provide writ | ten description |  |
| Condition of Riser:                            | Go             | od              | Damaged  |
| Condition of Riser Cap: Good                   |                | Damaged         | Missing  |
| Measurement Reference Point: Good              |                | Damaged         | Missing  |
| Remarks:                                       |                |                 |  |
| Dedicated Purging / Sampling Device Present?   |                |                 |  |
| Yes No If ye                                   | s, what type   | of device? كالم | terre foot volue & trong   |
| Condition: Good Da                             | amaged         | If Damag        | ed, please provide written description   |
| Remarks: WA                                    |                |                 |  |
| Field Certification:                           | C              | nior Clentel G  | ieries 4/3hm   |
| Signed   |                | Title           | Date   |



| Facility: West Lake La   | ındfill  | Well ID:                                 | D-81  | Date: 4/3/13                                     |
|--|--|--|---|--|
| Access: Accessibility: Vicinity of well clea   | Good \(\frac{\frac{1}{\lambda}}{\lambda}\) ar of weeds and/or debris:  | Fair<br>Yes                              | Poor  |  |
| Concrete Pad: Any issues with co Presence of depre Remarks:  | oncrete pad? No _<br>essions or standing water aro   |  | ***************************************     | en explain below.<br>No                          |
| Protective Outer Casin   | g: Material:   | Steel                                    |   |  |
| Condition of Prote  Condition of Exter  Condition of Locki  Condition of Lock  Condition of Weep  Remarks:  Well Riser: Mate | citive Casing: Gordinary Cap: Gordinary Gordin | od Nod Nod Nod Nod Nod Nod Nod Nod Nod N | Damaged  Damaged  Damaged  Damaged  Damaged | Missing Missing Missing Missing Missing  Missing |
| Measurement Ref<br>Remarks:<br>Dedicated Purging / Sa<br>Yes<br>Condition:<br>Remarks:                                       | ampling Device Present?  No If yes   | s, what type of dev                      | 4   | Missing e provide written description.           |
| Field Certification:   | Signed Signed  | Sr(                                      | Scortury<br>tle                             | 4313<br>Batel 3                                  |



| acility: West Lake Landfill           | Well ID                 | D-B\$                                 | Date: 4/4/2113                     |
|---------------------------------------|-------------------------|---------------------------------------|------------------------------------|
| Access:                               |                         |                                       |                                    |
| Accessibility: Good                   | Fair                    | Poor                                  |                                    |
| Vicinity of well clear of weeds and/o | or debris: Ye           | s No                                  |                                    |
| Remarks: Walking                      | access only             |                                       |                                    |
| oncrete Pad:                          |                         |                                       |                                    |
| Any issues with concrete pad?         | No                      | Yes If ye                             | s, then explain below.             |
| Presence of depressions or standing   | ng water around well:   | Yes                                   | No                                 |
| Remarks: Pad burk                     | d, of present.          | Disging our pas                       | will cause weter to                |
| Protective Outer Casing: Ma           | aterial: Rec            |                                       |                                    |
| Note: For ANY indication of Dama      | ged, please provide wri | tten description                      |                                    |
| Condition of Protective Casing:       | Good                    | Damaged                               | Missing                            |
| Condition of Exterior Well ID Marki   | ngs: Good               | Damaged                               | Missing                            |
| Condition of Locking Cap:             | Good                    | Damaged                               | Missing                            |
| Condition of Lock                     | Good                    | Damaged                               | Missing                            |
| Condition of Weep Hole:               | Good                    | Damaged                               | Missing                            |
| Remarks: Replaced                     | love on 4/9/20          | 13                                    |                                    |
| Vell Riser: Material: PUC             |                         |                                       |                                    |
| Note: For ANY indication of Dama      | ged, please provide wri | tten description                      |                                    |
| Condition of Riser:                   | Go                      | ood Dam                               | aged                               |
| Condition of Riser Cap:               | Good                    | Damaged                               | Missing                            |
| Measurement Reference Point:          | Good                    | Damaged                               | Missing                            |
| Remarks: Na                           |                         | , , , , , , , , , , , , , , , , , , , |                                    |
| Pedicated Purging / Sampling Device F | Present?                |                                       |                                    |
| Yes No No                             | If yes, what type       | of device? Lutera                     | - foot value & tubing              |
| Condition: Good                       | Damaged                 | If Damaged, ¡                         | please provide written description |
| Remarks: NA                           |                         |                                       |                                    |
| field Certification:                  | >                       | Emis Cleaned En                       | in ulahan                          |
| Signed                                | G                       | Title                                 | Date                               |



| Facility: West Lake Landfill Wel   | ID:  |
|--|--|
| Access: Accessibility: Good Fair Vicinity of well clear of weeds and/or debris: Remarks: | Poor<br>Yes No   |
|  |  |
| Concrete Pad: Any issues with concrete pad? No   | Yes If yes, then explain below.  |
| Presence of depressions or standing water around well                                    | YesNo  |
| Remarks:   |  |
| Protective Outer Casing: Material:   |  |
| Note: For ANY indication of Damaged, please provide                                      | written description  |
| Condition of Protective Casing: Good 📉   | Damaged Missing  |
| Condition of Exterior Well ID Markings: Good   | Damaged Missing  |
| Condition of Locking Cap: Good   | )<br>Damaged Missing   |
| Condition of Lock Good   | Damaged Missing  |
| Condition of Weep Hole:  Remarks: 79 2000 2000   | Damaged Missing  |
| Well Riser: Material: MT   |  |
| Note: For ANY indication of Damaged, please provide                                      | written description  |
| Condition of Riser:  | Good \( \square \) Damaged   |
| Condition of Riser Cap: Good   | Damaged Missing  |
| Measurement Reference Point: Good  | Damaged Missing  |
| Remarks:   |  |
| Dedicated Purging / Sampling Device Present?   | April Property Control of the Contro |
| Yes No If yes, what t  | ype of device? Liplowel  |
| Condition: Good Damaged  | If Damaged, please provide written description.  |
| Remarks:   |  |
| Field Certification:   | Started 4 11 11 15 Title bale  |



| Facility: West Lake Landfill Well ID: 10-80 Date: 4/913  |
|--|
| Access: Accessibility: Good Fair Poor Vicinity of well clear of weeds and/or debris:  Remarks:   |
| Concrete Pad:  Any issues with concrete pad?  No \( \sum_{\mathcal{V}} \) Yes \qquad If yes, then explain below.  Presence of depressions or standing water around well:  Yes \qquad No \( \sum_{\mathcal{V}} \)   |
| Remarks:  Protective Outer Casing: Material:   |
| Note: For ANY indication of Damaged, please provide written description  Condition of Protective Casing: Good Damaged Missing  Condition of Exterior Well ID Markings: Good Damaged Missing  |
| Condition of Locking Cap: Good Damaged Missing  Condition of Lock Good Damaged Missing   |
| Condition of Weep Hole: Good 7 Pamaged Missing  Remarks: 724 Page 1000 Color C |
| Well Riser: Material: DVC  Note: For ANY indication of Damaged, please provide written description  Condition of Riser: Good Damaged   |
| Condition of Riser Cap: Good N Damaged Missing  Measurement Reference Point: Good Damaged Missing  Remarks:  |
| Dedicated Purging / Sampling Device Present?  Yes No If yes, what type of device? Work  Condition: Good Damaged If Damaged, please provide written description.  |
| Remarks:   |
| Field Certification:  Signed  Title  Date  |



| facility: West Lake Landfill                | Well ID           | D-93   | Date: 4/9/2017                    |
|---|-------------------|--|-----------------------------------|
| ccess:                                      |                   |  |                                   |
| Accessibility: Good                         | Fair              | Poor   |                                   |
| Vicinity of well clear of weeds and/or debi | ris: Ye           | s No   |                                   |
| Remarks: Wallery access                     | orly              |  |                                   |
| oncrete Pad: Any issues with concrete pad?  | No                | YesIf ye   | es, then explain below.           |
| Presence of depressions or standing wat     | er around well:   | Yes  | No                                |
| Remarks: NA                                 |                   |  |                                   |
| rotective Outer Casing: Material:           | Steel             |  |                                   |
| Note: For ANY indication of Damaged, p      | lease provide wri | itten description  |                                   |
| Condition of Protective Casing:             | Good              | Damaged  | Missing                           |
| Condition of Exterior Well ID Markings:     | Good              | Damaged  | Missing                           |
| Condition of Locking Cap:                   | Good              | Damaged  | Missing                           |
| Condition of Lock                           | Good              | Damaged  | Missing                           |
| Condition of Weep Hole:                     | Good              | Damaged  | Missing                           |
| Remarks: Well murutly let                   | beled as "I       | -9"; relebed to h  | ne "D-93" on 4/8/2013             |
| Vell Riser: Material: PVC                   | 1101003           |  |                                   |
| Note: For ANY indication of Damaged, p      | lease provide wr  | itten description  |                                   |
| Condition of Riser:                         | Go                | ood Dar  | naged                             |
| Condition of Riser Cap: Go                  | ood               | Damaged  | Missing                           |
| Measurement Reference Point: Go             | ood <u> </u>      | Damaged  | Missing                           |
| Remarks: \(\mu\mathcal{L}\mu\mathcal{A}\)   |                   |  |                                   |
| Dedicated Purging / Sampling Device Presen  | t?                |  | 7                                 |
| Yes No                                      | If yes, what type | of device? Weters  | instyclive the property           |
| Condition: Good                             | Damaged           | If Damaged,  | please provide written descriptio |
| Remarks: NA                                 |                   | THE PROPERTY OF THE PROPERTY O |                                   |
| ield Certification:                         |                   | Quanta de la companya della companya | ulahan                            |
| Signed                                      |                   | Cris. Cleminal by  | Date                              |



| Facility: West Lake Landfill  | Well ID:              | <i>I-</i> 4          | Date: 4/12/2013              |  |
|---|-----------------------|----------------------|------------------------------|--|
| Access: Accessibility: Good   | Fair                  | Poor                 | _                            |  |
| Vicinity of well clear of weeds and/or debris:  | Yes                   | No No                |                              |  |
| Remarks: Fincing around (   | weil                  | 10-13-1              |                              |  |
| Concrete Pad: Any issues with concrete pad? No  | Yes_                  | If yes, then         | explain below.               |  |
| Presence of depressions or standing water a   | round well:           | Yes No               |                              |  |
| Remarks:  |                       |                      |                              |  |
| Protective Outer Casing: Material: S  | eu                    |                      |                              |  |
| Note: For ANY indication of Damaged, pleas  | se provide written de | scription            |                              |  |
| Condition of Protective Casing: G   | ood                   | Damaged              | Missing                      |  |
| Condition of Exterior Well ID Markings: G   | lood                  | Damaged              | Missing                      |  |
| Condition of Locking Cap:   | iood                  | Damaged              | Missing                      |  |
| Condition of Lock G   | iood 🗸                | Damaged              | Missing                      |  |
| Condition of Weep Hole: G   | iood 🗸                | Damaged              | Missing                      |  |
| Remarks: Exterior To foded -  | re-labeled 1D         | 0-4/14203. R         | eplaced lock - 4/12/201      |  |
| Well Riser: Material: PVC   |                       |                      |                              |  |
| Note: For ANY indication of Damaged, pleas  | se provide written de | scription            | + cut approx                 |  |
| Condition of Riser:   | Good                  | Damaged              | - ozaft<br>- francise        |  |
| Condition of Riser Cap: Good  | Da                    | maged                | Missing                      |  |
| Measurement Reference Point: Good   | <u>✓</u> Da           | maged                | Missing                      |  |
| Remarks: Riser height would not allow for closing of Steel protective ago. Cat 1. ser |                       |                      |                              |  |
| Dedicated Purging / Sampling Device Present?  |                       |                      |                              |  |
| YesNo If y  | es, what type of dev  | ice? Unterea About   | where & the                  |  |
| Condition: Good V   | Damaged               | If Damaged, please p | provide written description. |  |
| Remarks: WA   |                       |                      |                              |  |
| Field Certification: Signed   | Serve                 | Wendel Engine        | 4/12/2 a.s                   |  |



| Facility: West Lake Landfill               | Well ID: _            | <u>I-9</u>         | Date: 4/4/2013                  |
|--|-----------------------|--------------------|---------------------------------|
| Access:                                    |                       |                    |                                 |
| Accessibility: Good                        | Fair _                | Poor <u></u>       |                                 |
| Vicinity of well clear of weeds and/or deb | oris: Yes_            | No No              | <del></del>                     |
| Remarks: Walking acce                      | ess only              |                    |                                 |
| Concrete Pad:                              |                       |                    |                                 |
| Any issues with concrete pad?              | No                    | res If yes,        | then explain below.             |
| Presence of depressions or standing wa     | ter around well:      | Yes                | No                              |
| Remarks: U.A                               |                       |                    |                                 |
| Protective Outer Casing: Material          | Steel                 |                    |                                 |
| Note: For ANY indication of Damaged, p     | olease províde writte | n description      |                                 |
| Condition of Protective Casing:            | Good                  | Damaged            | Missing                         |
| Condition of Exterior Well ID Markings:    | Good                  | Damaged            | Missing                         |
| Condition of Locking Cap:                  | Good                  | Damaged            | Missing                         |
| Condition of Lock                          | Good                  | Damaged            | Missing                         |
| Condition of Weep Hole:                    | Good                  | Damaged            | Missing                         |
| Remarks: Wen numerally blue                | n 4/8/2003            | Relabeled to be    | 1-9" or 4/8/2013                |
| Vell Riser: Material: PUC                  |                       |                    |                                 |
| Note: For ANY indication of Damaged, p     | please provide writte | n description      |                                 |
| Condition of Riser:                        | Good                  | Damag              | ged                             |
| Condition of Riser Cap: G                  | ood                   | Damaged            | Missing                         |
| Measurement Reference Point: G             | ood                   | Damaged            | Missing                         |
| Remarks: NA                                |                       |                    |                                 |
| Dedicated Purging / Sampling Device Preser | nt?                   |                    |                                 |
| Yes No                                     | If yes, what type of  | device? Watera for | of velue + t-buy                |
| Condition: Good                            | Damaged               | If Damaged, ple    | ase provide written description |
| Remarks: <u>\U.4</u>                       |                       |                    |                                 |
| Field Certification:                       | 2                     | in Claus I Can     | e chh                           |
| Signed                                     |                       | no Cleare Ergin    | Date Date                       |



| Facility: West Lake La                       | ndfill                | Well II  | ):                     | Date: 4/4/13                             |
|--|-----------------------|--|------------------------|--|
| Access: Accessibility: Vicinity of well clea | Good                  | Fair   | Poo<br>es X No         | r  |
| Remarks:                                     |                       | Çanançın eyerin deletiri.  |                        |  |
| Concrete Pad:<br>Any issues with co          | oncrete pad?          | No <u>X</u>  | Yes                    | If yes, then explain below.              |
| Presence of depre                            | ssions or standing w  | ater around well:  | Yes                    | No <u>()</u>                             |
| Remarks:                                     | Name                  |  |                        |  |
| Protective Outer Casin                       | g: <b>M</b> ateri     | al:  |                        |  |
| Note: For ANY inc                            | dication of Damaged,  | please provide w   | ritten description     | •  |
| Condition of Prote                           | ctive Casing:         | Good X   | Damaged                | Missing                                  |
| Condition of Exter                           | ior Well ID Markings: | Good X   | Damaged                | Missing                                  |
| Condition of Locki                           | ng Cap:               | Good 💹   | Damaged                | Missing                                  |
| Condition of Lock                            |                       | Good   | Damaged                | ₩ Missing                                |
| Condition of Weep                            | Hole:                 | Good N   | Damaged<br>Mouran (ee) | Missing                                  |
| Well Riser: Mate                             | erial: Dic            | ······································   |                        |  |
|  | dication of Damaged   | please provide w   | ritten description     |  |
| Condition of Riser                           |                       |  | Good V                 | Damaged                                  |
| Condition of Riser                           | Cap:                  | Good 🗡   | Damaged                | Missing                                  |
| Measurement Ref                              | erence Point:         | Good   | Damaged                | Missing                                  |
| Remarks:                                     |                       | Canada de Calabara |                        |  |
| Dedicated Purging / Sa                       | ampling Device Prese  | ent?   |                        | 1  |
| Yes 📉  | No                    | If yes, what typ   | e of device?           | stone                                    |
| Condition:                                   | Good <u>V</u>         | Damaged _  | If Damag               | ged, please provide written description. |
| Remarks:                                     |                       |  |                        |  |
| Field Certification:                         | (Signed               | 21   | Sr. Go Guy             | 4/4/13                                   |



| Facility: West Lake Landfill                     | Well ID: <u>I-62</u>   | Date: 4/4/223  |
|--|--|--|
| Access:  |  | The state of the s |
|  | Fair Poor  | -  |
| Vicinity of well clear of weeds and/or debris:   | Yes No   |  |
| Remarks: Walling access only                     |  |  |
| Concrete Pad:                                    |  |  |
| Any issues with concrete pad? No                 | Yes If yes, then e   | explain below.   |
| Presence of depressions or standing water around | well: Yes No   |  |
| Remarks: N(4                                     |  |  |
| Protective Outer Casing: Material: Stee          | 4  |  |
| Note: For ANY indication of Damaged, please prov | ide written description  |  |
| Condition of Protective Casing: Good             | Damaged  | Missing  |
| Condition of Exterior Well ID Markings: Good     | Damaged  | Missing  |
| Condition of Locking Cap: Good                   | Damaged  | Missing  |
| Condition of Lock Good                           | Damaged  | Missing  |
| Condition of Weep Hole: Good                     | Damaged  | Missing  |
| Remarks: Replaced love on                        | 4/4/2013; Well ID on   | interso Puc ap   |
| Well Riser: Material: PJC                        |  |  |
| Note: For ANY indication of Damaged, please prov | ride written description   |  |
| Condition of Riser:                              | Good Damaged   | **************************************   |
| Condition of Riser Cap: Good                     | Damaged  | Missing  |
| Measurement Reference Point: Good                | Damaged I  | Missing  |
| Remarks: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\    | The state of the s |  |
| Dedicated Purging / Sampling Device Present?     |  |  |
| YesNo If yes, wh                                 | at type of device? Weterna foo   | + Nalve + tabing   |
| Condition: Good Damag                            | ed If Damaged, please p  | rovide written description.  |
| Remarks: NA                                      |  |  |
|  | A  |  |
| Field Certification: Signed                      | Series Chemied Engree  | U/U/2013   |



| Facility: West Lake Landfill              | Well ID                               | I-65                             | Date: 4/16/2013                             |
|---|---------------------------------------|----------------------------------|---|
| Access:                                   |                                       |                                  |   |
| Accessibility: Good                       | Fair                                  | Poor                             |   |
| Vicinity of well clear of weeds and/or de | ebris: Ye                             | s No                             |   |
| Remarks: Wallety access o Rock R          | als - Police                          | escort utilized access for truck | to block lane on St. Charke to Sample Well. |
| Concrete Pad:                             | NI-                                   | V If v                           | a the area condition to allow               |
| Any issues with concrete pad?             | No                                    | Yes If ye                        | is, then explain below.                     |
| Presence of depressions or standing w     | ater around well:                     | Yes                              | No  |
| Remarks: ULA                              | · · · · · · · · · · · · · · · · · · · |                                  |   |
| Protective Outer Casing: Materia          | al: <u>Steel</u>                      |                                  |   |
| Note: For ANY indication of Damaged,      | please provide wri                    | tten description                 |   |
| Condition of Protective Casing:           | Good                                  | Damaged                          | Missing                                     |
| Condition of Exterior Well ID Markings:   | Good                                  | Damaged                          | Missing                                     |
| Condition of Locking Cap:                 | Good                                  | Damaged                          | Missing                                     |
| Condition of Lock                         | Good                                  | Damaged                          | Missing                                     |
| Condition of Weep Hole:                   | Good                                  | Damaged                          | Missing                                     |
| Remarks: Replaced Louis                   | D- 4/16/201                           | 3                                |   |
| Well Riser: Material: <u>P</u> いこ         |                                       |                                  |   |
| Note: For ANY indication of Damaged       | please provide wri                    | tten description                 |   |
| Condition of Riser:                       | Go                                    | ood Dan                          | naged                                       |
| Condition of Riser Cap:                   | Good                                  | Damaged                          | Missing                                     |
| Measurement Reference Point:              | Good                                  | Damaged                          | Missing                                     |
| Remarks: Nin-                             |                                       |                                  |   |
| Dedicated Purging / Sampling Device Prese | ent?                                  |                                  |   |
| YesNo                                     | If yes, what type                     | of device? Water                 | The foot walve & fabring                    |
| Condition: Good                           | Damaged                               | If Damaged,                      | please provide written description.         |
| Remarks: NIA                              |                                       |                                  |   |
| Field Certification:                      | C.                                    | ior Chenral Eng                  | in Huh.                                     |
| Signed                                    | <i></i>                               | Title                            | 7/10/1085<br>Date                           |



| Facility: West Lake Landfill                     | Well ID:                                | Date: 4/5/2013                          |
|--|---|---|
| Access:  | Fair Poor                               |   |
| Accessibility: Good                              |   |   |
| Vicinity of well clear of weeds and/or debris:   | Yes No                                  | <del></del>                             |
| Remarks: <u>VLA</u>                              |   |   |
| Concrete Pad: Any issues with concrete pad? No _ | Yes                                     | If yes, then explain below.             |
| Presence of depressions or standing water arc    | ound well: Yes                          | No <u>/</u>                             |
| ł  | 4                                       |   |
| Protective Outer Casing: Material:               | <u> </u>                                |   |
| Note: For ANY indication of Damaged, please      | provide written description             |   |
| Condition of Protective Casing: Go               | od Damaged _                            | Missing                                 |
| Condition of Exterior Well ID Markings: Go       | od V Damaged                            | Missing                                 |
| Condition of Locking Cap: Go                     | od V Damaged                            | Missing                                 |
| Condition of Lock God                            | od Damaged _                            | Missing                                 |
| Condition of Weep Hole; Go                       | od Damaged                              | Missing                                 |
| Remarks: <u>Replaced loue on 4/5</u>             | 1203                                    |   |
| Well Riser: Material: PC                         |   |   |
| Note: For ANY indication of Damaged, please      | provide written description             |   |
| Condition of Riser:                              | Good                                    | Damaged                                 |
| Condition of Riser Cap: Good                     | Damaged                                 | Missing                                 |
| Measurement Reference Point: Good                | Damaged                                 | Missing                                 |
| Remarks: N.A                                     |   |   |
| Dedicated Purging / Sampling Device Present?     | *************************************** |   |
| Yes No If yes                                    | s, what type of device?                 | ina foot value of tability              |
| Condition: Good V Da                             | maged If Damag                          | ed, please provide written description. |
| Remarks: N/A                                     |   |   |
| Field Cortification:                             | Seria alumnas 6                         | Caire Wholens                           |
| Field Certification: Signed                      | Title                                   | ngue 4/5/2013 Date                      |



| Facility: West Lake Landfill                   | Well ID:             | I-67                | Date: 4/5/2013                    |
|--|----------------------|---------------------|-----------------------------------|
| Access:  |                      | . / -               |                                   |
| Accessibility: Good                            | Fair                 | Poor _              | ·                                 |
| Vicinity of well clear of weeds and/or deb     | ris: Yes             | No                  | Address                           |
| Remarks: N.A                                   |                      |                     |                                   |
| Concrete Pad:<br>Any issues with concrete pad? | No _                 | Yes If yes          | , then explain below.             |
| Presence of depressions or standing wa         | ter around well:     | Yes                 | No                                |
| Remarks: NLA                                   |                      |                     |                                   |
| Protective Outer Casing: Material              | Heel                 |                     |                                   |
| Note: For ANY indication of Damaged, p         | lease provide writt  | en description      |                                   |
| Condition of Protective Casing:                | Good                 | Damaged             | Missing                           |
| Condition of Exterior Well ID Markings:        | Good 🗸               | Damaged             | Missing                           |
| Condition of Locking Cap:                      | Good                 | Damaged             | Missing                           |
| Condition of Lock                              | Good 🗸               | Damaged             | Missing                           |
| Condition of Weep Hole:                        | Good                 | Damaged             | Missing                           |
| Remarks: Replaced                              | love on 4/5          | ros                 |                                   |
| Well Riser: Material: VC                       |                      |                     |                                   |
| Note: For ANY indication of Damaged, p         | olease provide writt | en description      |                                   |
| Condition of Riser:                            | Goo                  | od Dama             | aged                              |
| Condition of Riser Cap: G                      | ood                  | Damaged             | Missing                           |
| Measurement Reference Point: G                 | ood V                | Damaged             | Missing                           |
| Remarks: N(A                                   |                      |                     |                                   |
| Dedicated Purging / Sampling Device Preser     | it?                  |                     |                                   |
| Yes No   | If yes, what type    | of device? Waterm 1 | por value 2 tabing                |
| Condition: Good V                              | Damaged              | If Damaged, pl      | ease provide written description. |
| Remarks: NIA                                   |                      |                     |                                   |
| Field Carliffordian H -                        | C                    | To Many 1 G         | ul-la-                            |
| Field Certification: Signed                    |                      | nior Chemial Engue  | 9/5/243<br>Date                   |



| Facility: West Lake Landfill            | Well ID:                          | -68                                     | Date: 4/4/20,3             |
|---|-----------------------------------|---|----------------------------|
| Access:                                 |                                   |   |                            |
| Accessibility: Good                     | Fair                              | Poor                                    |                            |
| Vicinity of well clear of weeds and/or  | debris: Yes                       | No                                      |                            |
| Remarks: NV                             |                                   |   | -                          |
| Concrete Pad:                           |                                   |   |                            |
| Any issues with concrete pad?           | No Yes                            | If yes, then e                          | xplain below.              |
| Presence of depressions or standing     | water around well:                | YesNo                                   |                            |
| Remarks: WA                             |                                   |   |                            |
| Protective Outer Casing: Mate           | rial: Steel                       |   |                            |
| Note: For ANY indication of Damage      | d, please provide written descri  | iption                                  |                            |
| Condition of Protective Casing:         | Good D                            | amaged                                  | Missing                    |
| Condition of Exterior Well ID Marking   | s: Good D.                        | amaged                                  | Missing                    |
| Condition of Locking Cap:               | Good D                            | amaged                                  | Missing                    |
| Condition of Lock                       | Good D.                           | amaged                                  | Missing                    |
| Condition of Weep Hole:                 | Good D.                           | amaged                                  | Missing                    |
| Remarks: Replaced lo                    | • •                               |   |                            |
| Well Riser: Material: <u>Qu</u>         |                                   |   |                            |
| Note: For ANY indication of Damage      | d, please provide written descri  | iption                                  |                            |
| Condition of Riser:                     | Good 📈                            | Damaged                                 | <u></u>                    |
| Condition of Riser Cap:                 | Good Dama                         | gedN                                    | fissing                    |
| Measurement Reference Point:            | Good Dama                         | gedN                                    | lissing                    |
| Remarks: 🔲 🖟                            |                                   | *************************************** |                            |
| Dedicated Purging / Sampling Device Pre | sent?                             | 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-  |                            |
| YesNo                                   | If yes, what type of device       | ? <u>NIA</u>                            |                            |
| Condition: Good NA                      | Damaged <u>XIA</u>                | If Damaged, please pr                   | ovide written description. |
| Remarks: Installed                      | Wowterna foot value &<br>Senior l | telling on                              | 1/9/2013                   |
| Field Certification:                    | Lenio- a                          | Chemical Graice.                        | 4/9/2012                   |
| Signed                                  | Title                             |   | Date                       |



| Facility: West Lake Landfill Well ID: I-73 Date: 4/11/2013              |
|---|
| Access: Accessibility: Good Fair Poor                                   |
| Vicinity of well clear of weeds and/or debris: Yes No<br>Remarks:       |
| Concrete Pad:   |
| Any issues with concrete pad? No Yes If yes, then explain below.        |
| Presence of depressions or standing water around well:  Yes No          |
| Remarks: LUA  |
| Protective Outer Casing: Material: Stee                                 |
| Note: For ANY indication of Damaged, please provide written description |
| Condition of Protective Casing: Good Damaged Missing                    |
| Condition of Exterior Well ID Markings: Good Damaged Missing            |
| Condition of Locking Cap: Good Damaged Missing                          |
| Condition of Lock Good Damaged Missing                                  |
| Condition of Weep Hole: Good Damaged Missing                            |
| Remarks: Replaced lock or Hullas  |
| Well Riser: Material: PJC   |
| Note: For ANY indication of Damaged, please provide written description |
| Condition of Riser: Good Damaged  |
| Condition of Riser Cap: Good Damaged Missing                            |
| Measurement Reference Point: Good Damaged Missing                       |
| Remarks: NA   |
| Dedicated Purging / Sampling Device Present?                            |
| Yes No If yes, what type of device? Waterafust valve : +1-big_          |
| Condition: Good Damaged If Damaged, please provide written description. |
| Remarks: NLA  |
| Field Certification: Al Series Cherrical Enginee 4/11/2013              |



| Facility: West Lake Landfill                   | Well ID:                      | Date: 4/3/2013                             |
|--|-------------------------------|--|
| Access: Accessibility: Good                    | Fair P                        | oor  |
| Vicinity of well clear of weeds and/or debris: | YesN                          | lo   |
| Remarks:   ALA                                 |                               | **************************************     |
| Concrete Pad: Any issues with concrete pad? No | Yes                           | If yes, then explain below.                |
| Presence of depressions or standing water ar   | ound well: Yes_               | No   |
| Remarks: N( 4                                  |                               |  |
| Protective Outer Casing: Material: <u>5</u>    | teel                          |  |
| Note: For ANY indication of Damaged, please    | e provide written description |  |
| Condition of Protective Casing: Go             | od Damage                     | d Missing                                  |
| Condition of Exterior Well ID Markings: Go     | od Damage                     | d Missing                                  |
| Condition of Locking Cap: Go                   | ood Damage                    | d Missing                                  |
| Condition of Lock Go                           | ood Damage                    | d Missing                                  |
| Condition of Weep Hole: Go                     | ood Damage                    | d Missing                                  |
| Remarks: Replaced lock o                       | - 4/3/2013                    |  |
| Well Riser: Material: PVC - 2 im               | a doente                      |  |
| Note: For ANY indication of Damaged, pleas     | e provide written description |  |
| Condition of Riser:                            | Good                          | Damaged                                    |
| Condition of Riser Cap: Good                   | Damaged                       | Missing                                    |
| Measurement Reference Point: Good              | Damaged                       | Missing                                    |
| Remarks: Na                                    |                               | -  |
| Dedicated Purging / Sampling Device Present?   |                               |  |
| YesNoif ye                                     | s, what type of device?       | NIA  |
| Condition: Good NIA D                          | amaged <u>Nto</u> If Dar      | naged, please provide written description. |
| Remarks: Institut Watern                       |                               |  |
| Field Certification: Signed                    | Jenio- aen.                   | ad Engree 4/3/2013 Date                    |



| Facility: West Lake La              | andfill              |  | Well ID: _    | LR-103                                  | Date:               | 4/3/2013                               |
|-------------------------------------|----------------------|--|---------------|---|---------------------|--|
| Access:                             |                      | ~                                      |               | *************************************** |                     |  |
| Accessibility:                      | Good                 |  | Fair _        | Poor                                    |                     |  |
| ·                                   | ar of weeds and/or   |  |               | . No _                                  |                     |  |
| Remarks:                            | Cleared tra          | e brandu                               | es from       | wen on 4/3                              | /ra/3               |  |
| Concrete Pad:<br>Any issues with co | oncrete pad?         | No                                     | Y             | es 🖊 li                                 | yes, then explain b | elow.                                  |
| Presence of depre                   | essions or standing  | water aroun                            | d well:       | Yes                                     | No 🗸                | _                                      |
| Remarks:                            | Pad hursed w         | der grav                               | w, if pro     | sent                                    |                     |  |
| Protective Outer Casin              | ig: Mate             | erial: Hee                             | 1             |   |                     |  |
| Note: For ANY in                    | dication of Damage   | ed, please pro                         | ovide written | description                             |                     |  |
| Condition of Prote                  | ective Casing:       | Good                                   |               | Damaged _                               | Miss                | sing                                   |
| Condition of Exter                  | rior Well ID Marking | js: Good                               |               | Damaged _                               | Miss                | sing                                   |
| Condition of Locki                  | ing Cap:             | Good                                   |               | Damaged _                               | Miss                | sing                                   |
| Condition of Lock                   |                      | Good                                   |               | Damaged _                               | Miss                | sing                                   |
| Condition of Wee                    | p Hole:              | Good                                   |               | Damaged _                               | Miss                | sing                                   |
| Remarks:                            | Replaced lo          | ul on 1                                | 4/3/200       |   |                     |  |
| Well Riser: Mat                     | erial: PUC           |  |               |   |                     | ###################################### |
| Note: For ANY in                    | dication of Damage   | ed, please pr                          | ovide writter | description                             |                     |  |
| Condition of Riser                  | r:                   |  | Good          |   | Damaged             | _                                      |
| Condition of Riser                  | r Cap:               | Good                                   |               | Damaged                                 | Missing             |  |
| Measurement Re                      | ference Point:       | Good                                   | _             | Damaged                                 | Missing             |  |
| Remarks:                            | NIA                  | ······································ |               |   |                     |  |
| Dedicated Purging / S               | ampling Device Pre   | esent?                                 | · · ·         |   |                     |  |
| Yes                                 | No                   | If yes, w                              | vhat type of  | device? Va                              | erra foot value 1   | hby                                    |
| Condition;                          | Good                 | Dama                                   | ged           | If Damage                               | d, please provide w | ritten description.                    |
| Remarks;                            | NA                   | <del> </del>                           |               |   |                     |  |
| Field Certification:                | 12                   | >                                      |               | 4/3/2013                                | 4                   | 1/2/2013                               |
| $\mathcal{C}$                       | Signed               |  | En            | Title'                                  | Caréo               | até                                    |



|   |               |                | Date: <u>ל/ץ/ אסכ</u>  |
|---|---------------|----------------|--|
| cess: Accessibility: Good                                   | Fair          | Poo            | Balli Marka Andrea Communication Communicati |
| Vicinity of well clear of weeds and/or debris:  Remarks:    |               | No No          |  |
| oncrete Pad: Any issues with concrete pad? No               |               | Yes            | If yes, then explain below.  |
| Presence of depressions or standing water arou              | ınd well:     | Yes            | No _/  |
| Remarks: Pad burned it prese                                |               |                |  |
| otective Outer Casing: Material: ,\$\frac{1}{2}\end{align*} |               |                |  |
| Note: For ANY indication of Damaged, please                 | orovide writt | en description |  |
| Condition of Protective Casing: Goo                         | d             | Damaged        | Missing  |
| Condition of Exterior Well ID Markings: Goo                 | d 🗸           | Damaged        | Missing  |
| Condition of Locking Cap: Goo                               | d             | Damaged        | Missing  |
| Condition of Lock Goo                                       | d             | Damaged        | Missing  |
| Condition of Weep Hole: Goo                                 | d 🖊           | Damaged        | Missing  |
| Remarks: Replaced lock on                                   | 4/4/201       | 3              |  |
| ell Riser: Material: ρψς                                    |               |                |  |
| Note: For ANY indication of Damaged, please                 | provide writt | en description |  |
| Condition of Riser:   | God           | od             | Damaged  |
| Condition of Riser Cap: Good                                |               | Damaged        | Missing  |
| Measurement Reference Point: Good _                         |               | Damaged        | Missing  |
| Remarks: Kul  |               |                |  |
| edicated Purging / Sampling Device Present?                 |               |                |  |
| Yes No If yes   | , what type o | of device? No  | terra Bot value & tibiy  |
| Condition: Good Dar   | naged         | If Dama        | ged, please provide written description.   |
| Remarks: <u>\U</u>  |               |                |  |
| eld Certification:  | Ser           | no Clenica     | Orgice 4/4/2028  |



| Facility: West Lake Landfill Well ID: LR-105 Date: 4/3/2013                                   |
|---|
| Access:   |
| Accessibility: Good Fair Poor   |
| Vicinity of well clear of weeds and/or debris: Yes No   |
| Remarks: Note:  |
| Concrete Pad:   |
| Any issues with concrete pad? No Ves Yes If yes, then explain below.                          |
| Presence of depressions or standing water around well:  Yes No                                |
| Remarks: Well is in voter dranagevey. Scrounded by voter                                      |
| Protective Outer Casing: Material: Steel  |
| Note: For ANY indication of Damaged, please provide written description                       |
| Condition of Protective Casing: Good Damaged Missing  |
| Condition of Exterior Well ID Markings: Good Damaged Missing                                  |
| Condition of Locking Cap: Good Damaged Missing  |
| Condition of Lock Good Damaged Missing  |
| Condition of Weep Hole: Good Damaged Missing  |
| Remarks: Replaced lock on 4/3/2313  |
| Vell Riser: Material: A) C  |
| Note: For ANY indication of Damaged, please provide written description                       |
| Condition of Riser: Good Damaged  |
| Condition of Riser Cap: Good Damaged Missing  |
| Measurement Reference Point: Good Damaged Missing   |
| Remarks: NA   |
| edicated Purging / Sampling Device Present?   |
| YesNo/ If yes, what type of device?   |
| Condition: Good <u>M.A.</u> Damaged <u>M.A.</u> If Damaged, please provide written descriptio |
| Remarks: Instelled Watern Value and tubing on 4/3/2013  |
| ield Certification: R Invo Chemical Engine 4/3/2013   |
| Signed Title Date   |



| Facility: West Lake Landfill  | Well ID: MV-10Z  | Date: 4/7/2013               |
|---|--|------------------------------|
| Access: Accessibility: Good  Vicinity of well clear of weeds and/or debris:  Remarks:  N(A            | Fair Poor No No  |                              |
| Concrete Pad: Any issues with concrete pad?  Presence of depressions or standing water arou           |  | explain below.               |
| Remarks: <u>KUA</u> Protective Outer Casing: Material:  Note: For ANY indication of Damaged, please p |  |                              |
| Condition of Protective Casing: Good  | d Damaged  | Missing                      |
| Condition of Locking Cap: Good  | d Damaged  | Missing                      |
| Condition of Lock Good  Condition of Weep Hole: Good  Remarks: Replaced lock on                       | d Damaged  | Missing                      |
| Woll Biogram Material: B.Ve   |  |                              |
| Condition of Riser:  Condition of Riser Cap:  Good  | Good Damaged  Damaged  | Missing                      |
| Measurement Reference Point: Good   | Damaged  | Missing                      |
|   | what type of device? Voters foot please  naged If Damaged, please  on 4 1/1013 - Ven functions | provide written description. |
| Field Certification: Signed   | Series Cremical Cigies   | e 4/5/200<br>Date            |



| Facility: West Lake Landfill  | Well ID: MU-(03                         | Date: 4/5/2013                    |
|---|---|-----------------------------------|
| Access:  Accessibility:  Good  Vicinity of well clear of weeds and/or deb | Fair Poor                               | ,                                 |
| Remarks: N. CT  | *************************************** |                                   |
| Concrete Pad: Any issues with concrete pad?                               | No Yes If yes,                          | then explain below.               |
| Presence of depressions or standing wat                                   | ter around well: Yes                    | No                                |
| Remarks: WA   | _                                       |                                   |
| Protective Outer Casing: Material   | Street                                  |                                   |
| Note: For ANY indication of Damaged, p                                    | please provide written description      |                                   |
| Condition of Protective Casing:   | Good Damaged                            | Missing                           |
| Condition of Exterior Well ID Markings:                                   | Good Damaged                            | Missing                           |
| Condition of Locking Cap:   | Good Damaged                            | Missing                           |
| Condition of Lock   | Good Damaged                            | Missing                           |
| Condition of Weep Hole:   | Good Damaged                            | Missing                           |
| Remarks: (20) HA Replac   | ed lock on 4/5/20.3                     |                                   |
| Well Riser: Material: PJC   |   |                                   |
| Note: For ANY indication of Damaged, p                                    | please provide written description      |                                   |
| Condition of Riser:   | Good Dama                               | ged                               |
| Condition of Riser Cap: G   | ood Damaged                             | Missing                           |
| Measurement Reference Point: G  | ood Damaged                             | Missing                           |
| Remarks: No   |   |                                   |
| Dedicated Purging / Sampling Device Preser                                | it?                                     |                                   |
| YesNo   | If yes, what type of device?            | ·                                 |
| Condition: Good NIA   | Damaged W.A If Damaged, ple             | ease provide written description. |
| Remarks: NUA  | *************************************** |                                   |
| Field Certification:  | Envir General England                   | 4/4/1012                          |
| Signed  | Title                                   | Date                              |



| acility: West Lake Landfill                | Well ID: MU-104                         | Date: 4/5/2013                                 |
|--|---|--|
| ccess: Accessibility: Good                 | Fair Poor                               |  |
| Vicinity of well clear of weeds and/o      | or debris: Yes No                       | MALANCA AND AND AND AND AND AND AND AND AND AN |
| Remarks: <u>MA</u>                         |   |  |
| oncrete Pad: Any issues with concrete pad? | No Yes V If yes                         | s, then explain below.                         |
| Presence of depressions or standing        | ng water around well: Yes               | No   |
| Remarks: Pad burned if                     | present - dissing out pad will cou      | se water to pand around                        |
| rotective Outer Casing: Ma                 | iterial: Steel                          |  |
| Note: For ANY indication of Damas          | ged, please provide written description |  |
| Condition of Protective Casing:            | Good Damaged                            | Missing  |
| Condition of Exterior Well ID Markin       | ngs: Good Damaged                       | Missing  |
| Condition of Locking Cap:                  | Good Damaged                            | Missing  |
| Condition of Lock                          | Good Damaged                            | Missing  |
| Condition of Weep Hole:                    | Good Damaged                            | Missing  |
| Remarks: Replaced lon                      | le on 4/5/2013                          |  |
| Vell Riser: Material: PVC                  |   |  |
| Note: For ANY indication of Dama           | ged, please provide written description |  |
| Condition of Riser:                        | Good <u>V</u> Dam                       | aged   |
| Condition of Riser Cap:                    | Good Damaged                            | Missing  |
| Measurement Reference Point:               | Good Damaged                            | Missing  |
| Remarks: \\\                               |   |  |
| Pedicated Purging / Sampling Device P      | resent?                                 |  |
| YesNo                                      | If yes, what type of device?            | foot value & tubing                            |
| Condition: Good                            | Damaged If Damaged, p                   | olease provide written description             |
| Remarks: NA                                |   |  |
| ield Certification:                        | Series Oberard Enga                     | ee 4/Khan                                      |
| Signed                                     | Title                                   | Date   |



| Facility: West Lake Landfill Well ID: MW-\204 Date: 4/12/13                      |
|--|
| Access:  |
| Accessibility: Good K Fair Poor  |
| Vicinity of well clear of weeds and/or debris: Yes X No                          |
| Remarks: Y\/\tag{\tag{\tag{\tag{\tag{\tag{\tag{                                  |
| Concrete Pad:  Any issues with concrete pad?  No Yes If yes, then explain below. |
| Presence of depressions or standing water around well: Yes No X                  |
| Remarks: M   |
| Protective Outer Casing: Material: 5 - 66  |
| Note: For ANY indication of Damaged, please provide written description          |
| Condition of Protective Casing: Good Damaged Missing                             |
| Condition of Exterior Well ID Markings: Good Damaged Missing                     |
| Condition of Locking Cap: Good X Damaged Missing                                 |
| Condition of Lock Good X Damaged Missing   |
| Condition of Weep Hole: Good X Damaged Missing                                   |
| Remarks: Replaced Lock   |
| Well Riser: Material: 2 - inch pv (  |
| Note: For ANY indication of Damaged, please provide written description          |
| Condition of Riser: Good Damaged   |
| Condition of Riser Cap: Good X Damaged Missing                                   |
| Measurement Reference Point: Good X Damaged Missing                              |
| Remarks: M/H   |
| Dedicated Purging / Sampling Device Present?                                     |
| Yes_X No If yes, what type of device?  |
| Condition: Good Damaged If Damaged, please provide written description.          |
| Remarks: N/A   |
| Field Certification: Math Attack Project Geologist 4/12/13                       |
| Field Certification: Y gelt Geologist 1/2/13 Signed Title Date                   |



| Facility: West Lake Landfill                    | Well ID: <u>PZ-100-KS</u>                     | Date: 4/15/2013             |
|---|---|-----------------------------|
| Access:   |   |                             |
| Accessibility: Good                             | Fair Poor                                     | -                           |
| Vicinity of well clear of weeds and/or debris:  | Yes No  | :                           |
| Remarks: N4                                     |   |                             |
| Concrete Pad: Any issues with concrete pad? No  | Yes If yes, then e                            | xplain below.               |
| Presence of depressions or standing water aroun | d well: YesNo                                 | <u> </u>                    |
| Remarks: LLA                                    |   |                             |
| Protective Outer Casing: Material: he           | et  |                             |
| Note: For ANY indication of Damaged, please pr  | ovide written description                     |                             |
| Condition of Protective Casing: Good            | Damaged                                       | Missing                     |
| Condition of Exterior Well ID Markings: Good    | Damaged                                       | Missing                     |
| Condition of Locking Cap: Good                  | Damaged                                       | Missing                     |
| Condition of Lock Good                          | Damaged                                       | Missing                     |
| Condition of Weep Hole: Good                    | Damaged                                       | Missing                     |
| Remarks: Replaced love on                       | • /   |                             |
| Well Riser: Material: PJC                       |   |                             |
| Note: For ANY indication of Damaged, please pr  | ovide written description                     |                             |
| Condition of Riser:                             | Good Damaged                                  | WARRAGE A BOOK A            |
| Condition of Riser Cap: Good                    | Damaged                                       | Missing                     |
| Measurement Reference Point: Good               | Damaged                                       | Missing                     |
| Remarks: <b>XIA</b>                             |   |                             |
| Dedicated Purging / Sampling Device Present?    |   |                             |
| YesNoIf yes, \                                  | what type of device? <b>\( \mathcal{U}</b> \) |                             |
| Condition: Good <u>IVIA</u> Dama                | aged  | rovide written description. |
| Remarks: <u>U14</u>                             |   |                             |
| Field Certification:                            | Spaint Montal Engine                          | 4/18han                     |
| Signed  | Jenier Clemnal Enguee                         | Date                        |



| Facility: West Lake Landfill Well ID: P2-100-50 Date: 4/5/7                                     |
|---|
| Access: Accessibility: Good Fair Poor  Vicinity of well clear of weeds and/or debris: Yes No No |
| Remarks: N A  |
| Concrete Pad:  Any issues with concrete pad?  No Yes If yes, then explain below.                |
| Presence of depressions or standing water around well:  Yes No                                  |
| Remarks: NA   |
| Protective Outer Casing: Material: Steel  |
| Note: For ANY indication of Damaged, please provide written description                         |
| Condition of Protective Casing: Good Damaged Missing  |
| Condition of Exterior Well ID Markings: Good X Damaged Missing                                  |
| Condition of Locking Cap: Good X Damaged Missing  |
| Condition of Lock Good X Damaged Missing  |
| Condition of Weep Hole: Good Damaged Missing  |
| Remarks: Keplaced Lock  |
| Well Riser: Material: Z-inch VVI  |
| Note: For ANY indication of Damaged, please provide written description                         |
| Condition of Riser: Good X Damaged  |
| Condition of Riser Cap: GoodX Damaged Missing   |
| Measurement Reference Point: Good X Damaged Missing   |
| Remarks: MA   |
| Dedicated Purging / Sampling Device Present?  |
| Yes X No If yes, what type of device? Bladdi Parp   |
| Condition: Good X Damaged If Damaged, please provide written description.                       |
| Remarks: MA   |
| Field Certification: Mut Statut Project Geologist 4/5/3   |



| Facility: West Lake Landfill Well ID: P2-100-55 Date: 4/5/13                                     |
|--|
| Access: Accessibility: Good X Fair Poor  Vicinity of well clear of weeds and/or debris: Yes X No |
| Remarks: NA  |
| Concrete Pad: Any issues with concrete pad? No Yes If yes, then explain below.                   |
| Presence of depressions or standing water around well: Yes No                                    |
| Remarks: N A   |
| Protective Outer Casing: Material: \$ CC   |
| Note: For ANY indication of Damaged, please provide written description                          |
| Condition of Protective Casing: Good Damaged Missing   |
| Condition of Exterior Well ID Markings: Good Damaged Missing                                     |
| Condition of Locking Cap: Good 🔭 Damaged Missing   |
| Condition of Lock Good Damaged Missing   |
| Condition of Weep Hole: Good X Damaged Missing   |
| Remarks: Replaced Lock   |
| Well Riser: Material: 2 - ίου γνς  |
| Note: For ANY indication of Damaged, please provide written description                          |
| Condition of Riser: Good Damaged   |
| Condition of Riser Cap: Good Damaged Missing   |
| Measurement Reference Point: Good Damaged Missing  |
| Remarks: MA  |
| Dedicated Purging / Sampling Device Present?   |
| Yes X No If yes, what type of device?  |
| Condition: Good X Damaged If Damaged, please provide written description.                        |
| Remarks: NA  |
| M H all D i l C i i i i i i i i i i i i i i i i i  |
| Field Certification:    Matt Istuma   Project Geologist   1/5/15     Signed   Title   Date       |



| Facility: West Lake Landfill Well ID: P2-102-S5 Date: 41113  |
|--|
| Access: Accessibility: Good Fair Poor  Vicinity of well clear of weeds and/or debris: Yes No No Remarks:   |
|  |
| Concrete Pad:  Any issues with concrete pad?  No Yes If yes, then explain below.   |
| Presence of depressions or standing water around well: Yes No \( \frac{1}{2} \)  |
| Remarks:   |
| Protective Outer Casing: Material: ####################################  |
| Note: For ANY indication of Damaged, please provide written description  |
| Condition of Protective Casing: Good Damaged Missing   |
| Condition of Exterior Well ID Markings: Good Damaged Missing   |
| Condition of Locking Cap: Good N Damaged Missing   |
| Condition of Lock Good Damaged Missing   |
| Condition of Weep Hole: Good N Damaged Missing  Remarks: Japhan Condition of Weep Hole: Good Missing M |
| Well Riser: Material:  |
| Note: For ANY indication of Damaged, please provide written description  |
| Condition of Riser: Good $\overline{\mathcal{N}}$ Damaged  |
| Condition of Riser Cap: Good Damaged Missing   |
| Measurement Reference Point: Good Damaged Missing  |
| Remarks:   |
| Dedicated Purging / Sampling Device Present?   |
| Yes No If yes, what type of device? With No  |
| Condition: Good Damaged If Damaged, please provide written description   |
| Remarks:   |
| Field Certification: Community Signed Title Date   |



| Facility: West Lake Landfill  | Well ID: <u>PZ-102-5</u>      | 5 Date: 4/4/13                             |
|---|-------------------------------|--|
| Access: Accessibility: Good  Vicinity of well clear of weeds and/or debris: | Fair Po                       | oor  |
| Remarks:  |                               |  |
| Concrete Pad: Any issues with concrete pad? No                              | χ) Yes                        | If yes, then explain below.                |
| Presence of depressions or standing water are                               | ound well: Yes_               | No <u>X</u>                                |
| Remarks:  |                               |  |
| Protective Outer Casing: Material:  | 57001                         |  |
| Note: For ANY indication of Damaged, please                                 | e provide written description |  |
| Condition of Protective Casing: Go  | od N Damaged                  | Missing                                    |
| Condition of Exterior Well ID Markings: Go                                  | ood Damaged                   | Missing                                    |
| Condition of Locking Cap: Go  | od 🔀 Damaged                  | Missing                                    |
| Condition of Lock Go  | od Damaged                    | Missing                                    |
| Condition of Weep Hole: Go  | dod newanth                   | Missing                                    |
| Well Riser: Material: DUC   |                               |  |
| Note: For ANY indication of Damaged, please                                 | e provide written description |  |
| Condition of Riser:   | Good <u>N</u>                 | Damaged                                    |
| Condition of Riser Cap: Good  | Damaged                       | Missing                                    |
| Measurement Reference Point: Good   | Damaged                       | Missing                                    |
| Remarks:  |                               |  |
| Dedicated Purging / Sampling Device Present?                                |                               |  |
| Yes No If ye  | es, what type of device?      | laterra                                    |
| Condition: Good Da  | amaged If Dam                 | naged, please provide written description. |
| Remarks:  |                               |  |
| Field Certification: Signed   | Sr. Geoldu<br>Title           | P 4/4/13 Date                              |



| Facility: West Lake Landfill Well ID: P7 - 103R-55 Date: 443   |
|--|
| Access: Accessibility: Good Fair Poor  |
| Vicinity of well clear of weeds and/or debris: Yes No  |
| Remarks:   |
| Concrete Pad:  Any issues with concrete pad?  No Yes If yes, then explain below.   |
| Presence of depressions or standing water around well:  Yes No   |
| Remarks:   |
| Protective Outer Casing: Material: 5   |
| Note: For ANY indication of Damaged, please provide written description  |
| Condition of Protective Casing: Good $\frac{y}{\Delta}$ Damaged Missing  |
| Condition of Exterior Well ID Markings: Good Damaged Missing   |
| Condition of Locking Cap: Good Damaged Missing   |
| Condition of Lock Good Damaged Missing   |
| Condition of Weep Hole: Good Damaged Missing  Remarks: The Large Use of Anguery Performance Condition of Weep Hole: Good Damaged Missing   |
| Well Riser: Material: DVC  |
| Note: For ANY indication of Damaged, please provide written description  |
| Condition of Riser: Good Damaged   |
| Condition of Riser Cap: Good 🔨 Damaged Missing   |
| Measurement Reference Point: Good X Damaged Missing  |
| Remarks:   |
| Dedicated Purging / Sampling Device Present?   |
| Yes  |
| Condition: Good Damaged If Damaged, please provide written descriptio  |
| Remarks:   |
| Field Certification: Signed South State Signed South State South S |



| Facility: West Lake Landfill Well ID: P3-108-55 Date: 45/13                              |
|--|
| Access:  |
| Accessibility: Good X Fair Poor  |
| Vicinity of well clear of weeds and/or debris: Yes No                                    |
| Remarks:   |
| Concrete Pad:  |
| Any issues with concrete pad? No Yes If yes, then explain below.                         |
| Presence of depressions or standing water around well: Yes $\stackrel{\mathcal{V}}{}$ No |
| Remarks: construction all around, pooling of wall cuil                                   |
| Protective Outer Casing: Material: Steel   |
| Note: For ANY indication of Damaged, please provide written description                  |
| Condition of Protective Casing: Good Damaged Missing                                     |
| Condition of Exterior Well ID Markings: Good $\frac{\chi}{\sqrt{1}}$ Damaged Missing     |
| Condition of Locking Cap: Good Damaged Missing   |
| Condition of Lock Good Damaged 🔬 Missing   |
| Condition of Weep Hole: Good Nissing   |
| Remarks: supposed lovely of however Coth   |
| Well Riser: Material:  |
| Note: For ANY indication of Damaged, please provide written description                  |
| Condition of Riser: Good <u>M</u> Damaged  |
| Condition of Riser Cap: Good Damaged Missing   |
| Measurement Reference Point: Good Damaged Missing  |
| Remarks:   |
| Dedicated Purging / Sampling Device Present?   |
| Yes No If yes, what type of device?  |
| Condition: Good Damaged If Damaged, please provide written description.                  |
| Remarks:   |
| Field Certification: Sr. God 4/5/13 Signed Title Date                                    |



| Facility: West Lake Lan              | dfill                       | Well ID: Pa          | 2-104-165          | Date: 4////2013                         |
|--------------------------------------|-----------------------------|----------------------|--------------------|---|
| Access:                              |                             |                      |                    |   |
| Accessibility:                       | Good V                      | Fair                 | Poor               | <del></del>                             |
| Vicinity of well clear               | of weeds and/or debris:     | Yes_                 | No                 |   |
| Remarks:                             | N/A                         |                      |                    |   |
| Concrete Pad:<br>Any issues with con | crete pad? No               | Yes_                 | If yes, then       | explain below.                          |
| Presence of depres                   | sions or standing water arc | ound well:           | YesN               | o                                       |
| Remarks: $\sum$                      | ed is under HOPE            |                      |                    |   |
| Protective Outer Casing              | : Material: S+              | el                   |                    |   |
| Note: For ANY indi                   | cation of Damaged, please   |                      |                    |   |
| Condition of Protect                 | tive Casing: Go             | od                   | Damaged            | Missing                                 |
| Condition of Exterio                 | r Well ID Markings: Go      | od                   | Damaged            | Missing                                 |
| Condition of Locking                 | g Cap: Go                   | od                   | Damaged            | Missing                                 |
| Condition of Lock                    | Go                          | od V                 | Damaged            | Missing                                 |
| Condition of Weep                    | Hole: Go                    | od                   | Damaged            | Missing                                 |
| Remarks:                             | HA Replaced loc             | a on 4/11/2          |                    |   |
| Well Riser: Mater                    | ial: PVC                    |                      |                    |   |
| Note: For ANY indi                   | cation of Damaged, please   | provide written de   | scription          |   |
| Condition of Riser:                  |                             | Good                 | Damaged            |   |
| Condition of Riser (                 | Cap: Good                   | Dar                  | maged              | Missing                                 |
| Measurement Refe                     | rence Point: Good           | Dar                  | maged              | Missing                                 |
| Remarks: _                           | NIA                         |                      |                    | , |
| Dedicated Purging / San              | npling Device Present?      |                      |                    |   |
| Yes                                  | No If ye                    | s, what type of devi | ce? NIA            |   |
| Condition:                           | Good N.A Da                 | maged NIA            | If Damaged, please | provide written description.            |
| Remarks:                             | WA                          |                      |                    |   |
|                                      | <u></u>                     | <u> </u>             | 11 . L .           | uld                                     |
| Field Certification:                 | Signed                      | - KNION              | Chennel Fague      | 4/11/203                                |



| Facility: West Lake Landfill Well ID: P2-104-50 Date: 41113                      |
|--|
| Access:  |
| Accessibility: Good K Fair Poor  |
| Vicinity of well clear of weeds and/or debris: Yes No                            |
| Remarks: rell surrounded by HDPE Inter   |
| Concrete Pad:  |
| Any issues with concrete pad? No Yes If yes, then explain below.                 |
| Presence of depressions or standing water around well:  Yes No                   |
| Remarks: Pwd covered by lines  |
| Protective Outer Casing: Material: Ster  |
| Note: For ANY indication of Damaged, please provide written description          |
| Condition of Protective Casing: Good Damaged Missing                             |
| Condition of Exterior Well ID Markings: Good Damaged Missing                     |
| Condition of Locking Cap: Good X Damaged Missing                                 |
| Condition of Lock Good Damaged Missing   |
| Condition of Weep Hole: Good 🔀 Damaged Missing                                   |
| Remarks: Replaced Lock; weep hole covered by lines                               |
| Well Riser: Material: 2-mh pvc   |
| Note: For ANY indication of Damaged, please provide written description          |
| Condition of Riser: Good Damaged   |
| Condition of Riser Cap: Good Damaged Missing                                     |
| Measurement Reference Point: Good Damaged Missing                                |
| Remarks: NA  |
| Dedicated Purging / Sampling Device Present?                                     |
| Yes No If yes, what type of device? Daller Puru                                  |
| Condition: Good <u>X</u> Damaged If Damaged, please provide written description. |
| Remarks: NA  |
| Matt Home Point (al. 1) While  |
| Field Certification: Project Geologist 41112  Signed Title Date                  |



| Facility: West Lake Landfill Well ID: P2-104- Date: 411 17   |
|--|
| Access:  Accessibility:  Good  Fair  Poor  Vicinity of well clear of weeds and/or debris:  Yes  No |
| Remarks: Well surrounded by 170PE linear   |
| Concrete Pad:  Any issues with concrete pad?  No X Yes If yes, then explain below.                 |
| Presence of depressions or standing water around well:  Yes No X                                   |
| Remarks: Phy buriek under liner  |
| Protective Outer Casing: Material: SFEE  |
| Note: For ANY indication of Damaged, please provide written description                            |
| Condition of Protective Casing: Good Damaged Missing   |
| Condition of Exterior Well ID Markings: Good × Damaged Missing                                     |
| Condition of Locking Cap: Good X Damaged Missing   |
| Condition of Lock Good X Damaged Missing   |
| Condition of Weep Hole: Good Damaged Missing   |
| Remarks: Replaced Lock. Weep hole covered by lines   |
| Well Riser: Material: 2-เกษโ pvc   |
| Note: For ANY indication of Damaged, please provide written description                            |
| Condition of Riser: Good Damaged   |
| Condition of Riser Cap: Good Damaged Missing   |
| Measurement Reference Point: Good Damaged Missing  |
| Remarks: N A   |
| Dedicated Purging / Sampling Device Present?   |
| Yes X No If yes, what type of device? Dlader Pang  |
| Condition: Good <u>X</u> Damaged If Damaged, please provide written description.                   |
| Remarks: NA  |
| Field Certification: Mut Start Project Geologist 41113 Signed Fitle Date                           |



| Facility: West Lake Landfill Well ID: P2-105-55 Date: 4/4/13              |
|---|
| Access:   |
| Accessibility: Good Fair Poor   |
| Vicinity of well clear of weeds and/or debris: Yes X No                   |
| Remarks: Well Surrounded by HOPE liner                                    |
| Concrete Pad:   |
| Any issues with concrete pad? No X Yes If yes, then explain below.        |
| Presence of depressions or standing water around well: Yes No _X          |
| Remarks: Well Surrounded by HDPE liner                                    |
| Protective Outer Casing: Material: 5 ce                                   |
| Note: For ANY indication of Damaged, please provide written description   |
| Condition of Protective Casing: Good Damaged Missing                      |
| Condition of Exterior Well ID Markings: Good X Damaged Missing            |
| Condition of Locking Cap: Good X Damaged Missing                          |
| Condition of Lock Good X Damaged Missing                                  |
| Condition of Weep Hole: Good X Damaged X Missing                          |
| Remarks: Weep hole covered by HDPE liner, Replaced Lock                   |
| Well Riser: Material: 1 - in, h η V (                                     |
| Note: For ANY indication of Damaged, please provide written description   |
| Condition of Riser: Good Damaged  |
| Condition of Riser Cap: Good Damaged Missing                              |
| Measurement Reference Point: Good X Damaged Missing                       |
| Remarks: NA   |
| Dedicated Purging / Sampling Device Present?                              |
| Yes X No If yes, what type of device? Blinki Punp                         |
| Condition: Good X Damaged If Damaged, please provide written description. |
| Remarks: N A  |
| Ma le OF D  |
| Field Certification: Math Attack Project Geologi, † 4/4/1) Signed Pate    |



| Facility: West Lake Landfill  | Well ID: P2-106-K5 Date: 4/15/13                   |
|---|--|
| Access: Accessibility: Good X  Vicinity of well clear of weeds and/or debris: | Fair Poor  |
| Remarks:  | NA   |
| Concrete Pad: Any issues with concrete pad? No                                | Yes If yes, then explain below.                    |
| Presence of depressions or standing water around                              | well: YesNoX                                       |
| Remarks:  | MA   |
| Protective Outer Casing: Material: 5  | teel   |
| Note: For ANY indication of Damaged, please prov                              | vide written description                           |
| Condition of Protective Casing: Good  | Damaged Missing                                    |
| Condition of Exterior Well ID Markings: Good                                  | X Damaged Missing                                  |
| Condition of Locking Cap: Good  | X Damaged Missing                                  |
| Condition of Lock Good  | Damaged Missing                                    |
| Condition of Weep Hole: Good  | X Damaged Missing                                  |
| Remarks: Replac   | ed Lott  |
| Well Riser: Material: 2 - in t  | PVL  |
| Note: For ANY indication of Damaged, please pro                               | vide written description                           |
| Condition of Riser:   | Good Damaged                                       |
| Condition of Riser Cap: Good  | Damaged Missing                                    |
| Measurement Reference Point: Good   | Damaged Missing                                    |
| Remarks:  | NR   |
| Dedicated Purging / Sampling Device Present?                                  |  |
| Yes NoX If yes, wt  | nat type of device?                                |
| Condition: Good <u></u> <b>/∖∤</b> Damag                                      | ed If Damaged, please provide written description. |
| Remarks: M  | ·IA  |
| Field Certification: Muth Stand   | Project Goologist 4/15/13                          |
| Signed  | Title Date   |



| Facility: West Lake Landfill Well ID: P2-106-50 Date: 4/9/13              |
|---|
| Access:   |
| Accessibility: Good X Fair Poor   |
| Vicinity of well clear of weeds and/or debris: Yes No                     |
| Remarks: MA   |
| Concrete Pad:   |
| Any issues with concrete pad? No X Yes If yes, then explain below.        |
| Presence of depressions or standing water around well: Yes NoX            |
| Remarks: MA   |
| Protective Outer Casing: Material: 5 Feel                                 |
| Note: For ANY indication of Damaged, please provide written description   |
| Condition of Protective Casing: Good X Damaged Missing                    |
| Condition of Exterior Well ID Markings: Good Damaged Missing              |
| Condition of Locking Cap: Good Damaged Missing                            |
| Condition of Lock Good Damaged Missing                                    |
| Condition of Weep Hole: Good X Damaged Missing                            |
| Remarks: Roplaced Luck  |
| Well Riser: Material: 2 - เดง h pv (                                      |
| Note: For ANY indication of Damaged, please provide written description   |
| Condition of Riser: Good X Damaged  |
| Condition of Riser Cap: Good X Damaged Missing                            |
| Measurement Reference Point: Good X Damaged Missing                       |
| Remarks: NA   |
| Dedicated Purging / Sampling Device Present?                              |
| Yes X No If yes, what type of device? Bladder Punp                        |
| Condition: Good X Damaged If Damaged, please provide written description. |
| Remarks: N\A  |
|   |
| Field Certification: Project Geologist 4913                               |



| Facility: West Lake Landfill                             |                            | Well ID:        | PZ-106   | - 55                                    | Date: 4917                               |              |
|--|----------------------------|-----------------|--|---|--|--------------|
| Access:<br>Accessibility:<br>Vicinity of well clear of w | Good X eeds and/or debris: |                 |  | or                                      | -  |              |
| Remarks:   |                            |                 | v/A  |   |  |              |
| Concrete Pad:<br>Any issues with concrete                | pad? No _                  | <u> </u>        | es   | If yes, then e                          | explain below.                           |              |
| Presence of depressions                                  | or standing water aroเ     | nd well:        | Yes  | No                                      | <u>X</u>                                 |              |
| Remarks:   |                            | 1 1             | NIA  |   |  |              |
| Protective Outer Casing:                                 | Material:                  | tcel            |  |   |  |              |
| Note: For ANY indication                                 | ո of Damaged, please բ     | orovide written | description  |   |  |              |
| Condition of Protective C                                | casing: Goo                | _ <u>X_</u> i   | Damaged  |   | Missing                                  | <del>.</del> |
| Condition of Exterior We                                 | II ID Markings: Goo        | d               | Damaged  |   | Missing                                  | <u></u>      |
| Condition of Locking Ca                                  | o; Goo                     | d _X_           | Damaged  |   | Missing                                  | -            |
| Condition of Lock  | Goo                        | d <u>X</u>      | Damaged  |   | Missing                                  | _            |
| Condition of Weep Hole:                                  | Goo                        | <u> </u>        | Damaged  |   | Missing                                  | •••          |
| Remarks:   | Replaced                   |                 |  |   |  |              |
| Well Riser: Material:_                                   | 2-inch                     | ρνι             | · · · · · · · · · · · · · · · · · · ·  |   |  |              |
| Note: For ANY indicatio                                  | n of Damaged, please [     | orovide written | description  |   |  |              |
| Condition of Riser:                                      |                            | Good            | <u>X</u>   | Damaged                                 | <del></del>                              |              |
| Condition of Riser Cap:                                  | Good _                     | <u> </u>        | Damaged  |   | Vissing                                  |              |
| Measurement Reference                                    | Point: Good _              | ×               | Damaged  |   | Missing                                  |              |
| Remarks:   | N                          | Α               | At a line of the state of the s | *************************************** |  |              |
| Dedicated Purging / Samplin                              | g Device Present?          |                 |  | 1 ,                                     | Anna a a a a a a a a a a a a a a a a a a |              |
| YesXN  | lo If yes,                 | what type of c  | levice?  | Sladder I                               | > mp                                     | <del>-</del> |
| Condition: Goo   | d X Dan                    | naged           | If Dama  | iged, please p                          | rovide written descriptio                | n.           |
| Remarks:   |                            | 4/N             |  |   |  |              |
| Field Certification:                                     | the Stewart th             | Pr              | oject Geo  | losit                                   | 4/9/12                                   |              |
|  | igned                      |                 | Title  | - J                                     | Date                                     |              |



| Facility: West Lake Landfill                 | Well ID: P2-107-55 Date: 4/11/2013                      |
|--|---|
| Access: Accessibility: Good                  | Fair Poor   |
| Vicinity of well clear of weeds and/or debri | is: Yes No  |
| Remarks: NW                                  |   |
| Concrete Pad: Any issues with concrete pad?  | No Yes If yes, then explain below.                      |
| Presence of depressions or standing water    | er around well: Yes No                                  |
| Remarks: ground; settle                      | ing around pad.   |
| Protective Outer Casing: Material:           | Hael  |
| Note: For ANY indication of Damaged, pl      | ease provide written description                        |
| Condition of Protective Casing:              | Good Damaged Missing                                    |
| Condition of Exterior Well ID Markings:      | Good Damaged Missing                                    |
| Condition of Locking Cap:                    | Good Damaged Missing                                    |
| Condition of Lock                            | Good Damaged Missing                                    |
| Condition of Weep Hole:                      | Good Damaged Missing                                    |
| Remarks: Replaced love on                    | 4/11/2013   |
| Well Riser: Material: PUC                    |   |
| Note: For ANY indication of Damaged, pl      | ease provide written description                        |
| Condition of Riser:                          | Good Damaged  |
| Condition of Riser Cap: Go                   | od Damaged Missing                                      |
| Measurement Reference Point: Go              | od Damaged Missing                                      |
| Remarks: NA                                  |   |
| Dedicated Purging / Sampling Device Present  | ?   |
| YesNo  | If yes, what type of device? Water for value ; noty     |
| Condition: Good                              | Damaged If Damaged, please provide written description. |
| Remarks: WA                                  |   |
| Field Certification: Signed                  | Series Cremmed Enguée 4/11/2013 Title Date              |



| Facility: West Lake Landfill Well ID: PZ-109-55 Date: 4/11/13  |
|--|
| Access:  |
| Accessibility: Good FairX Poor   |
| Vicinity of well clear of weeds and/or debris:  Yes No   |
| Remarks: Well Surrounded by baker tanks  |
| Concrete Pad:  |
| Any issues with concrete pad?  No Yes If yes, then explain below.  |
| Presence of depressions or standing water around well:  YesNoX   |
| Remarks: NA  |
| Protective Outer Casing: Material: 5+20  |
| Note: For ANY indication of Damaged, please provide written description  |
| Condition of Protective Casing: Good Damaged Missing   |
| Condition of Exterior Well ID Markings: Good Damaged Missing   |
| Condition of Locking Cap: Good Damaged Missing   |
| Condition of Lock Good Damaged Missing   |
| Condition of Weep Hole: Good 🔀 Damaged Missing   |
| Remarks: Replaced Lock   |
| Well Riser: Material: 2-inuh Vvc   |
| Note: For ANY indication of Damaged, please provide written description  |
| Condition of Riser: Good Damaged   |
| Condition of Riser Cap: Good Damaged Missing   |
| Measurement Reference Point: Good Damaged Missing  |
| Remarks: N A   |
| Dedicated Purging / Sampling Device Present?   |
| Yes No If yes, what type of device?  |
| Condition: Good Damaged If Damaged, please provide written description.  |
| Remarks: NA  |
| L MALL CONTRACTOR OF THE CONTR |
| Field Certification:    Field Certification:   Project (see 1915)   Hill   Date  |



| Facility: West Lake Landfill Well ID: P2-110 - 53 Date: Y 4 13                   |
|--|
| Access: Accessibility: Good X Fair Poor  |
|  |
| Vicinity of well clear of weeds and/or debris: Yes No                            |
| Remarks: Well surrounded by baker tanks  |
| Concrete Pad:  Any issues with concrete pad?  No Yes If yes, then explain below. |
| Presence of depressions or standing water around well:  Yes No X                 |
| Remarks: VIT   |
| Protective Outer Casing: Material: Steel   |
| Note: For ANY indication of Damaged, please provide written description          |
| Condition of Protective Casing: Good Damaged Missing                             |
| Condition of Exterior Well ID Markings: Good Damaged Missing                     |
| Condition of Locking Cap: Good Damaged Missing                                   |
| Condition of Lock Good Damaged Missing   |
| Condition of Weep Hole: Good Damaged Missing                                     |
| Remarks: Replaced Lock   |
| Well Riser: Material: 2 - in υ ρυς   |
| Note: For ANY indication of Damaged, please provide written description          |
| Condition of Riser: Good Damaged   |
| Condition of Riser Cap: Good 🔀 🕥 Damaged Missing 🔀                               |
| Measurement Reference Point: Good <u>X</u> Damaged Missing                       |
| Remarks: My Att Rise- cap missing; Replaced riser cap on 4/12/1                  |
| Dedicated Purging / Sampling Device Present?                                     |
| Yes X No If yes, what type of device? Bladder Pump                               |
| Condition: Good Damaged If Damaged, please provide written description.          |
| Remarks: NA  |
| Field Certification: Mut Stown Project Geologist 41410 Signed Title Date         |



| Facility: West Lake Landfill Well ID: P2-111-K5 Date: 4/9/12   |
|--|
| Access: Accessibility: Good X Fair Poor  Vicinity of well clear of weeds and/or debris: Yes X No  Remarks:    NA   Main   M      |
| Concrete Pad:  Any issues with concrete pad?  No X Yes If yes, then explain below.  Presence of depressions or standing water around well:  Yes No X   |
| Remarks: N/A   |
| Protective Outer Casing: Material: 5+66 \  Note: For ANY indication of Damaged, please provide written description   |
| Condition of Protective Casing: Good X Damaged Missing   |
| Condition of Exterior Well ID Markings: Good Condition of Exterior |
| Condition of Locking Cap: Good X Damaged Missing   |
| Condition of Lock Good Damaged Missing   |
| Condition of Weep Hole: Good <u></u> Damaged Missing   |
| Remarks: Replaced Lock   |
| Well Riser: Material: 2-inch pv(   |
| Note: For ANY indication of Damaged, please provide written description  |
| Condition of Riser: Good Damaged   |
| Condition of Riser Cap: Good X Damaged Missing   |
| Measurement Reference Point: Good Damaged Missing  |
| Remarks: MA  |
| Dedicated Purging / Sampling Device Present?   |
| YesNoXIf yes, what type of device?N A  |
| Condition: Good NA Damaged Y/A If Damaged, please provide written description.   |
| Remarks: NA  |
| Field Certification: Matt between Project Geologist 4/911) Signed Project Geologist 4/911) Date  |



| Facility: West Lake Landfill Well ID: 12-111-50 Date: 4417                        |
|---|
| Access: Accessíbility: Good X Fair Poor   |
| Vicinity of well clear of weeds and/or debris: Yes No                             |
| Concrete Pad:  Any issues with concrete pad?  No X Yes If yes, then explain below |
| 7 my 155de5 with concrete page.   |
| Presence of depressions or standing water around well:  Yes No X                  |
| Remarks: N/A  |
| Protective Outer Casing: Material: 5 - ce   |
| Note: For ANY indication of Damaged, please provide written description           |
| Condition of Protective Casing: Good Damaged Missing                              |
| Condition of Exterior Well ID Markings: Good $oldsymbol{\lambda}$ Damaged Missing |
| Condition of Locking Cap: Good X Damaged Missing                                  |
| Condition of Lock Good X Damaged Missing  |
| Condition of Weep Hole: Good X Damaged Missing                                    |
| Remarks: Replaced Lock  |
| Well Riser: Material: 2- (non pvc   |
| Note: For ANY indication of Damaged, please provide written description           |
| Condition of Riser: Good Damaged  |
| Condition of Riser Cap: Good Damaged Missing                                      |
| Measurement Reference Point: Good 🗶 Damaged Missing                               |
| Remarks: NA   |
| Dedicated Purging / Sampling Device Present?                                      |
| Yes No If yes, what type of device? Bladder Pump                                  |
| Condition: Good X Damaged If Damaged, please provide written description.         |
| Remarks: NA   |
| Field Certification: Mut thousand Project Geologist 4/4/13                        |



| Facility: West Lake Landfill Well ID: 12-112-18 Date: 417-18   |
|--|
| Access: Accessibility: Good Fair Poor  Vicinity of well clear of weeds and/or debris: Yes No             |
| Remarks:   |
| Concrete Pad:  Any issues with concrete pad?  No Yes If yes, then explain below.                         |
| Presence of depressions or standing water around well: Yes No  |
| Remarks:   |
| Protective Outer Casing: Material: Allwww Fool   |
| Note: For ANY indication of Damaged, please provide written description                                  |
| Condition of Protective Casing: Good Damaged Missing   |
| Condition of Exterior Well ID Markings: Good Damaged Missing   |
| Condition of Locking Cap: Good Damaged Missing   |
| Condition of Lock Good Damaged 💆 Missing   |
| Condition of Weep Hole: Good N Damaged Missing  Remarks: 10 flood W Will Will Will Will Will Will Will W |
| Well Riser: Material: 100  |
| Note: For ANY indication of Damaged, please provide written description                                  |
| Condition of Riser: Good Damaged   |
| Condition of Riser Cap: Good Damaged Missing   |
| Measurement Reference Point: Good Damaged Missing  |
| Remarks: studies tool to close will, trans PVC to close well   |
| Dedicated Purging / Sampling Device Present?   |
| Yes No If yes, what type of device?  |
| Condition: Good Damaged If Damaged, please provide written description.                                  |
| Remarks:   |
| Field Certification: St. Gold 4/10/18 Signed Title Date  |



| Facility: West Lake Landfill Well ID: PG-113-AD Date: 4/11/13                                     |
|---|
| Access: Accessibility: Good YO Fair Poor  Vicinity of well clear of weeds and/or debris: Yes Y No |
| Remarks:  |
| Concrete Pad:   |
| Any issues with concrete pad? No Yes If yes, then explain below.                                  |
| Presence of depressions or standing water around well: YesNo                                      |
| Remarks:  |
| Protective Outer Casing: Material:  |
| Note: For ANY indication of Damaged, please provide written description                           |
| Condition of Protective Casing: Good Damaged Missing  |
| Condition of Exterior Well ID Markings: Good Damaged Missing                                      |
| Condition of Locking Cap: Good Damaged Missing  |
| Condition of Lock Good Damaged Missing  |
| Condition of Weep Hole: Good N Damaged Missing  |
| Well Riser: Material: D))   |
| Note: For ANY indication of Damaged, please provide written description                           |
| Condition of Riser: Good Damaged  |
| Condition of Riser Cap: Good Damaged Missing  |
| Measurement Reference Point: Good Damaged Missing   |
| Remarks:  |
| Dedicated Purging / Sampling Device Present?  |
| Yes No If yes, what type of device? weters  |
| Condition: Good 📈 Damaged If Damaged, please provide written description.                         |
| Remarks:  |
| Field Certification: SNOgen Surgery 4/11/3  |
| Signed Title Date   |



| Facility: West Lake Landfill Well ID: 13-45 Date: 4/13/13   |
|---|
| Access: Accessibility: Good  Fair Poor  Vicinity of well clear of weeds and/or debris: Yes No                                 |
| Remarks:  |
| Concrete Pad:  Any issues with concrete pad?  No Yes If yes, then explain below.  |
| Presence of depressions or standing water around well: W Yes No W No                            |
| Protective Outer Casing: Material:  |
| Note: For ANY indication of Damaged, please provide written description   |
| Condition of Protective Casing: Good N Damaged Missing  |
| Condition of Exterior Well ID Markings: Good Damaged Missing  |
| Condition of Locking Cap: Good Damaged Missing  |
| Condition of Lock Good Damaged 💯 Missing  |
| Condition of Weep Hole: Good Damaged Missing  Remarks: September Option Williams Condition of Weep Hole: Good Damaged Missing |
| Well Riser: Material:   |
| Note: For ANY indication of Damaged, please provide written description   |
| Condition of Riser: Good N Damaged  |
| Condition of Riser Cap: Good 1 Damaged Missing  |
| Measurement Reference Point: Good Damaged Missing   |
| Remarks:  |
| Dedicated Purging / Sampling Device Present?  |
| Yes No If yes, what type of device?   |
| Condition: Good $\cancel{N}$ Damaged If Damaged, please provide written description.  |
| Remarks:  |
| Field Certification: Signed Signed Title Date   |



| Facility: West Lake Landfill Well ID: PZ-113- S Date: 4/11/2013         |
|---|
| Access:   |
| Accessibility: Good Fair Poor   |
| Vicinity of well clear of weeds and/or debris: Yes No                   |
| Remarks: NIA  |
| Concrete Pad:   |
| Any issues with concrete pad? No Yes If yes, then explain below.        |
| Presence of depressions or standing water around well:  Yes No          |
| Remarks: UA   |
| Protective Outer Casing: Material: Ptul                                 |
| Note: For ANY indication of Damaged, please provide written description |
| Condition of Protective Casing: Good Damaged Missing                    |
| Condition of Exterior Well ID Markings: Good Damaged Missing            |
| Condition of Locking Cap: Good Damaged Missing                          |
| Condition of Lock Good Damaged Missing                                  |
| Condition of Weep Hole: Good Damaged Missing                            |
| Remarks: Cha Replaced lock on 4/11/2013                                 |
| Well Riser: Material: <u>ผู</u> ่เ                                      |
| Note: For ANY indication of Damaged, please provide written description |
| Condition of Riser: Good Damaged  |
| Condition of Riser Cap: Good Damaged Missing                            |
| Measurement Reference Point: Good Damaged Missing                       |
| Remarks: N/A  |
| Dedicated Purging / Sampling Device Present?                            |
| YesNo If yes, what type of device? Water foot Value & tuby              |
| Condition: Good Damaged If Damaged, please provide written description. |
| Remarks: N/3  |
|   |
| Field Certification: Signed Signed Title Date                           |



| Facility: West Lake Landfill   | Well ID: P2-114- AS Date: 4/5/13                     |  |  |
|--|--|--|--|
| Access: Accessibility: Good Vicinity of well clear of weeds and/or debris: | Fair Poor<br>YesX No                                 |  |  |
| Remarks:   | NA   |  |  |
| Concrete Pad: Any issues with concrete pad? No                             | Yes If yes, then explain below.                      |  |  |
| Presence of depressions or standing water aroun-                           |  |  |  |
| Protective Outer Casing: Material:   | Stee   |  |  |
| Note: For ANY indication of Damaged, please pro                            | ovide written description                            |  |  |
| Condition of Protective Casing: Good                                       | V  |  |  |
| Condition of Exterior Well ID Markings: Good                               | Damaged Missing                                      |  |  |
| Condition of Locking Cap: Good   | Damaged Missing                                      |  |  |
| Condition of Lock Good   | X Damaged Missing                                    |  |  |
| Condition of Weep Hole: Good   | Damaged Missing                                      |  |  |
| Remarks: Replaced Lock   |  |  |  |
| Well Riser: Material: 2-inch   | 0VC  |  |  |
| Note: For ANY indication of Damaged, please pr                             | ovide written description                            |  |  |
| Condition of Riser:  | Good X Damaged                                       |  |  |
| Condition of Riser Cap: Good   | X Damaged Missing                                    |  |  |
| Measurement Reference Point: Good  | X Damaged Missing                                    |  |  |
| Remarks:   | / <b>/</b> A   |  |  |
| Dedicated Purging / Sampling Device Present?                               |  |  |  |
| Yes X No If yes, v   | what type of device? Blanker Pump                    |  |  |
| Condition: Good X Dama   | aged If Damaged, please provide written description. |  |  |
| Remarks: NA  |  |  |  |
| Field Certification: Matt Stupens Signed                                   | Project Geologist 4/5/13 Date                        |  |  |



| Facility: West Lake Landfill Well ID: P2-115-55 Date: Y 5 13                 |  |  |  |
|--|--|--|--|
| Access: Accessibility: Good X Fair Poor                                      |  |  |  |
| Vicinity of well clear of weeds and/or debris: Yes No                        |  |  |  |
| Remarks: NA  |  |  |  |
| Concrete Pad:  |  |  |  |
| Any issues with concrete pad? No Yes If yes, then explain below.             |  |  |  |
| Presence of depressions or standing water around well:  YesNo                |  |  |  |
| Remarks: NA  |  |  |  |
| Protective Outer Casing: Material: 5+ce                                      |  |  |  |
| Note: For ANY indication of Damaged, please provide written description      |  |  |  |
| Condition of Protective Casing: Good Damaged Missing                         |  |  |  |
| Condition of Exterior Well ID Markings: Good Damaged Missing                 |  |  |  |
| Condition of Locking Cap: Good Damaged Missing                               |  |  |  |
| Condition of Lock Good X Damaged Missing                                     |  |  |  |
| Condition of Weep Hole: Good X Damaged Missing                               |  |  |  |
| Remarks: Replaced Lock   |  |  |  |
| Well Riser: Material: ? - いん ゆい  |  |  |  |
| Note: For ANY indication of Damaged, please provide written description      |  |  |  |
| Condition of Riser: Good X Damaged   |  |  |  |
| Condition of Riser Cap: Good Damaged Missing                                 |  |  |  |
| Measurement Reference Point: Good Damaged Missinġ                            |  |  |  |
| Remarks: $N R$   |  |  |  |
| Dedicated Purging / Sampling Device Present?                                 |  |  |  |
| Yes 7 No If yes, what type of device? Bladder Punp                           |  |  |  |
| Condition: Good Damaged If Damaged, please provide written description.      |  |  |  |
| Remarks: N/A   |  |  |  |
| MAT NATURE DISTRICTION WINDS   |  |  |  |
| Field Certification: Matt Attwork Project Geologist 4/513  Signed Title Date |  |  |  |



| Facility: West Lake Landfill Well ID: P2-116-55 Date: 4/12/13  |
|--|
| Access: Accessibility: Good Fair Poor  Vicinity of well clear of weeds and/or debris:  Remarks:  N   |
| Concrete Pad:  Any issues with concrete pad?  No X Yes If yes, then explain below.  Presence of depressions or standing water around well:  Yes No X   |
| Remarks: NA  |
| Protective Outer Casing: Material: S + ce \  Note: For ANY indication of Damaged, please provide written description  **X**  **The content of the content of |
| Condition of Protective Casing: Good X Damaged Missing  Condition of Exterior Well ID Markings: Good Damaged Missing   |
| Condition of Locking Cap: Good X Damaged Missing   |
| Condition of Lock Good X Damaged Missing   |
| Condition of Weep Hole: Good X Damaged Missing Remarks: Replaced Lock  |
| Well Riser: Material: 2 ~ i へい がく  Note: For ANY indication of Damaged, please provide written description  Condition of Riser: Good Damaged   |
| Condition of Riser Cap: Good Damaged Missing   |
| Measurement Reference Point: Good X Damaged Missing Remarks:   |
| Dedicated Purging / Sampling Device Present?   |
| Yes X No If yes, what type of device? Dividing Punp  Condition: Good X Damaged If Damaged, please provide written description.   |
| Remarks:   |
| Field Certification: Mythe New Project Geologist 4/12/13 Signed Title Date   |



| Facility: West Lake Landfill                   | Well ID: 17-200-55  | Date: 4/5/13                      |
|--|---|-----------------------------------|
| Access:  | The second se |                                   |
| Accessibility: Good $\nearrow$                 | Fair Poor   |                                   |
| Vicinity of well clear of weeds and/or debris: | Yes No No   | мали                              |
| Remarks:                                       |   | Wordshift P                       |
| Concrete Pad:                                  | V   |                                   |
| Any issues with concrete pad? No               | Yes If yes,   | then explain below.               |
| Presence of depressions or standing water a    | round well: Yes   | No <u>X</u>                       |
| Remarks:                                       | *   |                                   |
| Protective Outer Casing: Material:             | 51601   |                                   |
|  | a provide witten de   |                                   |
| Note: For ANY indication of Damaged, pleas     | e provide written description   |                                   |
| Condition of Protective Casing: G              | ood Damaged   | Missing                           |
| Condition of Exterior Well ID Markings: G      | ood Damaged   | Missing                           |
| Condition of Locking Cap: G                    | ood Damaged   | Missing                           |
| Condition of Lock G                            | ood Damaged   | Missing                           |
|  | ood Damaged   | Missing                           |
| Remarks: <u>NIXXXX Vos</u>                     | Lea married for the   |                                   |
| Well Riser: Material: DV                       |   |                                   |
| Note: For ANY indication of Damaged, pleas     | se provide written description  |                                   |
| Condition of Riser:                            | Good 📈 Damaç  | ged                               |
| Condition of Riser Cap: Good                   | <u>M</u> Damaged  | Missing                           |
| Measurement Reference Point: Good              | N Damaged   | Missing                           |
| Remarks:                                       |   |                                   |
| Dedicated Purging / Sampling Device Present?   | Δ   |                                   |
| Yes No If y                                    | es, what type of device? uture  | <i>N</i>                          |
| Condition: Good D                              | amaged If Damaged, ple  | ease provide written description. |
| Remarks:                                       |   |                                   |
|  |   |                                   |
| Field Certification: 1000 2004                 | ST, GROBIN  | 4/3/13                            |
| Signed   | Title   | Date                              |



| Facility: West Lake Landfill Well ID: P2-201A-51 Date: 4/8/1)                            |
|--|
| Access:  Accessibility:  Good  Yes  Vicinity of well clear of weeds and/or debris:  ACLA |
| Remarks:   |
| Concrete Pad:  Any issues with concrete pad?  No Yes If yes, then explain below.         |
| Presence of depressions or standing water around well:  YesNo                            |
| Remarks: N/A   |
| Protective Outer Casing: Material: 5 - Le Swrounded by HOPE                              |
| Note: For ANY indication of Damaged, please provide written description                  |
| Condition of Protective Casing: Good X Damaged Missing                                   |
| Condition of Exterior Well ID Markings: Good Damaged Missing                             |
| Condition of Locking Cap: Good 🔀 Damaged Missing   |
| Condition of Lock Good X Damaged Missing   |
| Condition of Weep Hole: Good X Damaged Missing   |
| Remarks: Replaced Lock   |
| Well Riser: Material: 2 ιος ορν ο  |
| Note: For ANY indication of Damaged, please provide written description                  |
| Condition of Riser: Good Damaged   |
| Condition of Riser Cap: Good 🔀 Damaged Missing   |
| Measurement Reference Point: Good 🔀 Damaged Missing                                      |
| Remarks: WA  |
| Dedicated Purging / Sampling Device Present?   |
| Yes X No If yes, what type of device? Blaker Pump  |
| Condition: Good Damaged If Damaged, please provide written description.                  |
| Remarks:   |
| M.H 1/4/2 D. 1 / 1 / 1/6/12  |
| Field Certification: Project Geologist 4/9115  Signed Title Date                         |



| Accessibility: Good X Fair Poor  Vicinity of well clear of weeds and/or debris: Yes No   | Facility: West Lake Landfill                | Well ID:                | PZ-202-Ss        | Date: 4/12/13                    |
|--|---|-------------------------|------------------|----------------------------------|
| Concrete Pad: Any issues with concrete pad?  No  |   | -                       |                  |                                  |
| Any issues with concrete pad?  No Yes If yes, then explain below.  Presence of depressions or standing water around well:  Remarks:  NA  Protective Outer Casing:  Note: For ANY indication of Damaged, please provide written description  Condition of Protective Casing:  Condition of Exterior Well ID Markings:  Good X Damaged Missing  Condition of Locking Cap:  Condition of Locking Cap:  Condition of Weep Hole:  Good X Damaged Missing  Condition of Weep Hole:  Good X Damaged Missing  Remarks:  Replace Lock  Well Riser:  Material:  Note: For ANY indication of Damaged, please provide written description  Condition of Riser:  Good X Damaged Missing  Bamaged Missing  Condition of Riser:  Remarks:  Good X Damaged Missing  Damaged Missing  Measurement Reference Point:  Good X Damaged Missing  Measurement Reference Point:  Field Certification:  Project Geol At Y 1212  | Remarks:                                    |                         | JA               |                                  |
| Remarks:    Note: For ANY indication of Damaged, please provide written description   Condition of Protective Casing:   Good   X   Damaged   Missing     Condition of Exterior Well ID Markings:   Good   X   Damaged   Missing     Condition of Locking Cap:   Good   X   Damaged   Missing     Condition of Locking Cap:   Good   X   Damaged   Missing     Condition of Lock   Good   X   Damaged   Missing     Condition of Weep Hole:   Good   X   Damaged   Missing     Remarks:   Replace   Leck     Well Riser:   Material:   2  | Concrete Pad: Any issues with concrete pad? | NoX                     | Yes If yes, the  | nen explain below.               |
| Protective Outer Casing: Material: 5700 Note: For ANY indication of Damaged, please provide written description  Condition of Protective Casing: Good X Damaged Missing Condition of Exterior Well ID Markings: Good X Damaged Missing Condition of Locking Cap: Good X Damaged Missing Condition of Lock Good X Damaged Missing Condition of Weep Hole: Good X Damaged Missing Remarks: Replaced Lock  Well Riser: Material: 2 1000 Note: For ANY indication of Damaged, please provide written description  Condition of Riser Cap: Good X Damaged Missing Measurement Reference Point: Good X Damaged Missing Remarks: NA  Dedicated Purging / Sampling Device Present?  Yes X No If yes, what type of device? Black Purp *  Condition: Good X Damaged If Damaged, please provide written description.  Remarks: NA  Field Certification: Project Cee and Y 1213  | Presence of depressions or standing v       | vater around well:      | Yes              | No X                             |
| Note: For ANY indication of Damaged, please provide written description  Condition of Protective Casing: Good X Damaged Missing  Condition of Exterior Well ID Markings: Good X Damaged Missing  Condition of Locking Cap: Good X Damaged Missing  Condition of Lock Good X Damaged Missing  Condition of Weep Hole: Good X Damaged Missing  Remarks: Replace Lock  Well Riser: Material: 2 INT PVL  Note: For ANY indication of Damaged, please provide written description  Condition of Riser: Good X Damaged Missing  Measurement Reference Point: Good X Damaged Missing  Measurement Reference Point: Good X Damaged Missing  Remarks: NA  Dedicated Purging / Sampling Device Present?  Yes X No If yes, what type of device? If Damaged, please provide written description.  Remarks: NA  Field Certification: Missing Project Geol east Y 12/12  | Remarks:                                    | NA                      |                  | ····                             |
| Condition of Protective Casing: Good X Damaged Missing  Condition of Exterior Well ID Markings: Good X Damaged Missing  Condition of Locking Cap: Good X Damaged Missing  Condition of Lock Good X Damaged Missing  Condition of Weep Hole: Good X Damaged Missing  Remarks: Replace Leck  Well Riser: Material: 2 100 PV(  Note: For ANY indication of Damaged, please provide written description  Condition of Riser: Good X Damaged Missing  Measurement Reference Point: Good X Damaged Missing  Measurement Reference Point: Good X Damaged Missing  Remarks: NA  Dedicated Purging / Sampling Device Present?  Yes X No If yes, what type of device? If Damaged, please provide written description.  Remarks: NA  Field Certification: Missing If Damaged, please provide written description.   | Protective Outer Casing: Mater              | ial: stee               |                  |                                  |
| Condition of Exterior Well ID Markings: Good X Damaged Missing Condition of Locking Cap: Good X Damaged Missing Condition of Lock Good X Damaged Missing Condition of Lock Good X Damaged Missing Missing Missing Condition of Weep Hole: Good X Damaged Missing Missing Condition of Weep Hole: Good X Damaged Missing Condition of Riser: Material: 2 - 171  | Note: For ANY indication of Damaged         | , please provide writte | en description   |                                  |
| Condition of Locking Cap:  Condition of Lock  Condition of Lock  Condition of Weep Hole:  Remarks:  Remarks:  Condition of Damaged, please provide written description  Condition of Riser:  Condition of Riser:  Condition of Riser Cap:  Good  Damaged  Missing  Measurement Reference Point:  Good  Damaged  Missing  Missing  Remarks:  NA  Dedicated Purging / Sampling Device Present?  Yes X  No  If yes, what type of device?  Condition:  | Condition of Protective Casing:             | Good X                  | Damaged          | Missing                          |
| Condition of Lock  Good X Damaged Missing  Remarks: Replace Lock  Well Riser: Material: 2 - 101 h pv (  Note: For ANY indication of Damaged, please provide written description  Condition of Riser: Good X Damaged Missing  Measurement Reference Point: Good X Damaged Missing  Remarks: N/A  Dedicated Purging / Sampling Device Present?  Yes X No If yes, what type of device? Damaged, please provide written description.  Remarks: N/A  Field Certification: Missing If Damaged, please provide written description.   | Condition of Exterior Well ID Markings      | : Good <u>'</u> X       | Damaged          | Missing                          |
| Condition of Weep Hole:  Remarks:  Remarks:  Replaced Lock  Well Riser:  Material:  Condition of Damaged, please provide written description  Condition of Riser:  Condition of Riser Cap:  Good  Damaged  Missing  Measurement Reference Point:  Good  Damaged  Missing  Remarks:  NA  Dedicated Purging / Sampling Device Present?  Yes X  No  If yes, what type of device?  Condition:  Good  The Damaged, please provide written description.  Remarks:  NA  Project Geolegist  Y 12 13  | Condition of Locking Cap:                   | Good 🔀                  | Damaged          | Missing                          |
| Remarks: Replaced Lock  Well Riser: Material: 2 - 171 h  | Condition of Lock                           | Good X                  | Damaged          | Missing                          |
| Well Riser: Material: 2 - 10 b pv (  Note: For ANY indication of Damaged, please provide written description  Condition of Riser: Good Damaged Missing  Measurement Reference Point: Good Damaged Missing  Remarks: NA  Dedicated Purging / Sampling Device Present?  Yes X No If yes, what type of device? Damaged, please provide written description.  Remarks: NA  Field Certification: Material: 2 - 10 b pv (  Damaged Missing M | Condition of Weep Hole:                     | Good X                  | Damaged          | Missing                          |
| Note: For ANY indication of Damaged, please provide written description  Condition of Riser:  Condition of Riser Cap:  Good  Damaged  Missing  Measurement Reference Point:  Good  Damaged  Missing  Remarks:  NA  Dedicated Purging / Sampling Device Present?  Yes X No If yes, what type of device?  Condition:  Good X Damaged  If Damaged, please provide written description.  Remarks:  NA  Project Geol eq 17  | Remarks: Replu                              | ed Lock                 |                  |                                  |
| Condition of Riser:  Condition of Riser Cap:  Condition of Riser Cap:  Good  Damaged  Missing  Measurement Reference Point:  Good  Damaged  Missing  Remarks:  NA  Dedicated Purging / Sampling Device Present?  Yes X  No  If yes, what type of device?  Condition:  Good  X  Damaged  If Damaged, please provide written description.  Remarks:  Project Geol 6417  YIZIJ  | Well Riser: Material: 2                     | wip bac                 |                  |                                  |
| Condition of Riser Cap: Good   | Note: For ANY indication of Damaged         | l, please provide writt | en description   |                                  |
| Measurement Reference Point: Good X Damaged Missing  Remarks: N/A  Dedicated Purging / Sampling Device Present?  Yes X No If yes, what type of device? Blake Pump **  Condition: Good X Damaged If Damaged, please provide written description.  Remarks: Project Geolegist Y 1213   | Condition of Riser:                         | Goo                     | od X Damag       | ed                               |
| Remarks: N/A  Dedicated Purging / Sampling Device Present?  Yes X No If yes, what type of device? Blok Nor Pump *  Condition: Good X Damaged If Damaged, please provide written description.  Remarks: N/A  Field Certification: Project Geolegist Y/12/12   | Condition of Riser Cap:                     | Good X                  | Damaged          | Missing                          |
| Pedicated Purging / Sampling Device Present?  Yes X No If yes, what type of device? Blad OF Pump  Condition: Good X Damaged If Damaged, please provide written description.  Remarks: Project Geolegist 4/12/12  | Measurement Reference Point:                | Good X                  | Damaged          | Missing                          |
| Yes X No If yes, what type of device? Bladds Pump *  Condition: Good X Damaged If Damaged, please provide written description.  Remarks: NA  Field Certification: Project Geologist 4/12/13  | Remarks:                                    | N/A                     |                  |                                  |
| Condition: Good X Damaged If Damaged, please provide written description.  Remarks: NA  Field Certification: Project Geologist 4/12/13   | Dedicated Purging / Sampling Device Pres    | ent?                    | (%               |                                  |
| Remarks: N/A  Field Certification: Mith Struct Project Geologist 4/12/12   | YesXNo                                      | If yes, what type o     | of device? Blank | or brub *                        |
| Field Certification: Mitt Struct Project Geologist 4/12/12   | Condition: Good X                           | Damaged                 | If Damaged, plea | ase provide written description. |
| Field Certification: Mith Horison Project Geologist 4/12/13  | Remarks:                                    | <u> </u>                |                  |                                  |
| Signed Title J Date  |   | Lur                     | Project Geologis | 4/12/12                          |



| Facility: West Lake Landfill Well ID: Pみつろづ Date: 1/5/13  |
|---|
| Access: Accessibility: Good \( \frac{\frac{1}{N}}{N} \) Fair Poor Vicinity of well clear of weeds and/or debris: Yes \( \frac{\frac{1}{N}}{N} \) No  Remarks:       |
| Concrete Pad: Any issues with concrete pad?  No \( \int\) Yes If yes, then explain below.  Presence of depressions or standing water around well:  Yes No \( \int\) |
| Protective Outer Casing: Material:  |
| Note: For ANY indication of Damaged, please provide written description  Condition of Protective Casing: Good Damaged Missing                                       |
| Condition of Exterior Well ID Markings: Good N Damaged Missing Condition of Locking Cap: Good Damaged Missing   |
| Condition of Lock Good Damaged Missing  Condition of Weep Hole: Good Damaged Missing  |
| Well Riser: Material: DOC   |
| Note: For ANY indication of Damaged, please provide written description   |
| Condition of Riser: Good <u>X</u> Damaged<br>Condition of Riser Cap: Good <u>V</u> Damaged Missing  |
| Measurement Reference Point: Good Damaged Missing   |
| Dedicated Purging / Sampling Device Present?  Yes No If yes, what type of device?   |
| Condition: Good \( \sum \) Damaged If Damaged, please provide written description.  Remarks:  |
| Field Certification: St. Geological VIII3 Signed Title Date   |



| Facility: West Lake Landfill  | Well ID:          | PZ-ZOVA-SS       | Date: 4/8/20                           | 17          |
|---|-------------------|------------------|--|-------------|
| Access:     Accessibility: Good  Vicinity of well clear of weeds and/or debris: | Fair<br>Yes       | Poor No          |  |             |
| Remarks: <u>\U</u>  |                   |                  | 77 77 77 77 77 77 77 77 77 77 77 77 77 |             |
| Concrete Pad: Any issues with concrete pad? No                                  |                   | YesIf ye         | es, then explain below.                |             |
| Presence of depressions or standing water a                                     | round well:       | Yes              | No _                                   |             |
| Remarks: <u>ぬい</u>  |                   |                  |  |             |
| Protective Outer Casing: Material: _S   | feel + Con        | erere            |  |             |
| Note: For ANY indication of Damaged, pleas                                      | se provide writte | en description   |  |             |
| Condition of Protective Casing: G   | ood 🗸             | Damaged          | Missing                                |             |
| Condition of Exterior Well ID Markings: G                                       | iood 🗸            | Damaged          | Missing                                | <del></del> |
| Condition of Locking Cap: G   | iood 🖊            | Damaged          | Missing                                |             |
| Condition of Lock G   | iood              | Damaged          | Missing                                |             |
| Condition of Weep Hole: G   | ood               | Damaged          | Missing                                | /           |
| Remarks: Us weep hole -   | flush m           | ount well ; re   | placed lock on 4/8                     | lus         |
| Well Riser: Material: PUC   |                   |                  |  |             |
| Note: For ANY indication of Damaged, pleas                                      | se provide writt  | en description   |  |             |
| Condition of Riser:   | Goo               | od <u> </u>      | maged                                  |             |
| Condition of Riser Cap: Good  | <u> </u>          | Damaged          | Missing                                |             |
| Measurement Reference Point: Good   |                   | Damaged          | Missing                                |             |
| Remarks: NIA  |                   |                  |  |             |
| Dedicated Purging / Sampling Device Present?                                    |                   |                  |  |             |
| Yes No If ye  | es, what type o   | of device? Haten | a for value & Thomp                    | <b></b>     |
| Condition: Good D   | amaged            | If Damaged,      | please provide written descr           | iption.     |
| Remarks: WA   |                   | ,                |  |             |
| Field Certification: Signed   | Sen               | ria Manad An     | græe 4/8/2013                          |             |



| Facility: West Lake Landfill                   | Wel  | HD: PZ-204-SS         | Date: 4/8/2013                     |
|--|--|-----------------------|------------------------------------|
| Access:  |  |                       |                                    |
| Accessibility: Good _                          | Fair   | Poor                  |                                    |
| Vicinity of well clear of weeds and/or         | debris:  | YesNo                 |                                    |
| Remarks: W4                                    |  |                       |                                    |
| Concrete Pad:<br>Any issues with concrete pad? | No   | Yes If ye             | s, then explain below.             |
| Presence of depressions or standing            | water around wel   | I: Yes                | No                                 |
| Remarks: KIA                                   | Para Anna Maria Mari |                       |                                    |
| Protective Outer Casing: Mate                  | rial: Steel +  | Concrete              |                                    |
| Note: For ANY indication of Damage             | d, please provide  | written description   |                                    |
| Condition of Protective Casing:                | Good   | Damaged               | Missing                            |
| Condition of Exterior Well ID Marking          | s: Good <u>L</u>   | Damaged               | Missing                            |
| Condition of Locking Cap:                      | Good   | Damaged               | Missing                            |
| Condition of Lock                              | Good   | Damaged               | Missing                            |
| Condition of Weep Hole:                        | Good   | Damaged               | Missing                            |
| Remarks: No verp hole                          | - flish man  | at wern; installed    | new lock on 4/8/200                |
| Vell Riser: Material: PUC                      |  |                       |                                    |
| Note: For ANY indication of Damage             | d, please provide  | written description   |                                    |
| Condition of Riser:                            |  | Good Dam              | naged                              |
| Condition of Riser Cap:                        | Good   | Damaged               | Missing                            |
| Measurement Reference Point:                   | Good   | Damaged               | Missing                            |
| Remarks: NIA-                                  |  |                       |                                    |
| Dedicated Purging / Sampling Device Pre        | sent?  |                       | <del>)</del>                       |
| YesNo  | If yes, what t   | ype of device? Varene | foot Value & taking                |
| Condition: Good                                | Damaged  | If Damaged, p         | please provide written description |
| Remarks: <u>V[4</u>                            | · · · · · · · · · · · · · · · · · · ·  |                       |                                    |
| Field Certification:                           | ₾.   | m. Clausel & in       | 4/8/200                            |
| Signed   | <u> </u>   | n Cleural Engles      | Date                               |



| Facility: West Lake Landfill                   | Well ID: M-235              | <u>₩</u> D:         | ate: 4/6/13                            |
|--|-----------------------------|---------------------|--|
| Access:  |                             |                     | 1                                      |
| Accessibility: Good N                          | Fair Po                     | or                  |  |
| Vicinity of well clear of weeds and/or debris: | Yes_ <u>V</u> No            | )                   |  |
| Remarks:                                       |                             |                     |  |
| Concrete Pad:                                  |                             |                     |  |
| Any issues with concrete pad? No               | Yes <u>X</u>                | If yes, then expl   | ain below.                             |
| Presence of depressions or standing water are  | ound well: Yes X            | ) No                |  |
| Remarks: Post Gunnos Apo                       | peal, longe lady            | presents to         | Virlagoritan                           |
| Protective Outer Casing: Material:             | PER SIN                     |                     | ······································ |
| Note: For ANY indication of Damaged, please    | provide written description |                     |  |
| Condition of Protective Casing: God            | od <u>X</u> Damaged         |                     | Missing                                |
| Condition of Exterior Well ID Markings: God    | od Damaged                  |                     | Missing                                |
| Condition of Locking Cap: God                  | od 🔑 Damaged                |                     | Missing                                |
| Condition of Lock God                          | od Damaged                  | <u>X</u>            | Missing                                |
| Condition of Weep Hole: Go                     | od <u></u> Damaged          | ·                   | Missing                                |
| Remarks: 5 aprox 1000c 1                       | /Anower look                |                     |  |
| Well Riser: Material: PV                       |                             |                     |  |
| Note: For ANY indication of Damaged, please    | provide written description |                     |  |
| Condition of Riser:                            | Good M                      | Damaged             |  |
| Condition of Riser Cap: Good                   | Damaged                     | Miss                | ing                                    |
| Measurement Reference Point: Good _            | Damaged                     | Miss                | ing                                    |
| Remarks:                                       |                             |                     |  |
| Dedicated Purging / Sampling Device Present?   |                             |                     |  |
|  | s, what type of device?     | bride               |  |
| Condition: Good X                              | maged If Dama               | aged, please provid | de written description.                |
| Remarks:                                       | ·····                       |                     |  |
|  |                             |                     |  |
| Field Certification:                           | Son Goodha                  | <u> </u>            | 4/4/3                                  |
| ✓ Signed V                                     | Title                       |                     | Date                                   |



| Facility: West Lake Landfill Well ID: P2-205-55 Date: 4/8/13                                    |
|---|
| Access: Accessibility: Good X Fair Poor Vicinity of well clear of weeds and/or debris: Yes X No |
| Remarks:  |
| Concrete Pad:  Any issues with concrete pad?  No Yes If yes, then explain below.                |
| Presence of depressions or standing water around well: YesNoX                                   |
| Remarks: NA   |
| Protective Outer Casing: Material: Stiel  |
| Note: For ANY indication of Damaged, please provide written description                         |
| Condition of Protective Casing: Good Damaged Missing  |
| Condition of Exterior Well ID Markings: Good Damaged Missing                                    |
| Condition of Locking Cap: Good Damaged Missing  |
| Condition of Lock Good — Damaged Missing  |
| Condition of Weep Hole: Good X Damaged Missing  |
| Remarks: Replaced Lock  |
| Well Riser: Material: ていん かく  |
| Note: For ANY indication of Damaged, please provide written description                         |
| Condition of Riser: Good Y Damaged  |
| Condition of Riser Cap: Good X Damaged Missing  |
| Measurement Reference Point: Good X Damaged Missing   |
| Remarks: V/A  |
| Dedicated Purging / Sampling Device Present?  |
| Yes X No If yes, what type of device? Bladder Pump  |
| Condition: Good Damaged If Damaged, please provide written description.                         |
| Remarks: N/A  |
| Field Certification: Mat Latinato Project Geologist 4/8/12  Signed Title Date                   |



| Facility: West Lake Landfill                |  | Well ID: <u>f</u>                     | 5-30E-22      | Date: 4/8/8                           |
|---|--|---------------------------------------|---------------|---------------------------------------|
| Access:                                     | 3  |                                       |               |                                       |
| Accessibility:                              | Good V   | Fair                                  | Poor          |                                       |
| Vicinity of well clear of wee               | ds and/or debris:  | Yes _                                 | ) No          | · · · · · · · · · · · · · · · · · · · |
| Remarks:                                    | Transport of the Control of the Cont | ·····                                 |               |                                       |
| Concrete Pad:<br>Any issues with concrete p | ad? No)  | <u> </u>                              | esIf yes      | s, then explain below.                |
| Presence of depressions o                   | r standing water arou  | nd well:                              | Yes           | No $\nearrow$                         |
| Remarks:                                    |  | <u> </u>                              |               |                                       |
| Protective Outer Casing:                    | Material:>   | XOX                                   |               |                                       |
| Note: For ANY indication of                 | of Damaged, please p   | rovide written                        | description   | ,                                     |
| Condition of Protective Cas                 | sing: Good   | 1 <u>N</u>                            | Damaged       | Missing                               |
| Condition of Exterior Well                  | D Markings: Good   | <u> </u>                              | Damaged       | Missing                               |
| Condition of Locking Cap:                   | Good   | 1 🕢                                   | Damaged       | Missing                               |
| Condition of Lock                           | Good   | 1                                     | Damaged       | Missing                               |
| Condition of Weep Hole:                     | Land look  | 7/ 6                                  | Damaged       | Missing                               |
| Well Riser: Material:                       | DIC.   | *                                     |               |                                       |
| Note: For ANY indication                    | of Damaged, please p   | rovide written                        | description   |                                       |
| Condition of Riser:                         |  | Good                                  | <u>N</u> Dam  | naged                                 |
| Condition of Riser Cap:                     | Good   | <u>N</u>                              | Damaged       | Missing                               |
| Measurement Reference F                     | oint: Good   | <u> </u>                              | Damaged       | Missing                               |
| Remarks:                                    | - TOWNSHIP OF THE PARTY OF THE  |                                       |               |                                       |
| Dedicated Purging / Sampling                | Device Present?  | · · · · · · · · · · · · · · · · · · · |               |                                       |
| YesNo                                       |  | what type of                          | device? 400   | nel                                   |
| Condition: Good                             | Dam  | aged                                  | If Damaged, p | blease provide written description.   |
| Remarks:                                    |  | ····                                  |               |                                       |
|   | XX) no   |                                       | _ 2           |                                       |
| Field Certification:                        | ned ned  | •                                     | Sr Coo But    | 4/6/B                                 |



| Facility: West Lake Landfill Well ID: P2-200 - A5 Date: 4/3/13                                  |
|---|
| Access: Accessibility: Good  Fair Poor Vicinity of well clear of weeds and/or debris:  Remarks: |
| Concrete Pad:   |
| Any issues with concrete pad?  No Yes If yes, then explain below.                               |
| Presence of depressions or standing water around well:  Yes                                     |
| Remarks:  |
| Protective Outer Casing: Material: 5  |
| Note: For ANY indication of Damaged, please provide written description                         |
| Condition of Protective Casing: Good 0 Damaged Missing  |
| Condition of Exterior Well ID Markings: Good Damaged Missing                                    |
| Condition of Locking Cap: Good Damaged Missing  |
| Condition of Lock Good Damaged Missing  |
| Condition of Weep Hole: Good Missing  |
| Remarks: Deployed Joseph ou Amountain Lorda   |
| Well Riser: Material: DV  |
| Note: For ANY indication of Damaged, please provide written description                         |
| Condition of Riser: Good Damaged  |
| Condition of Riser Cap: Good V Damaged Missing  |
| Measurement Reference Point: Good Damaged Missing   |
| Remarks: PUC transmod to ollow proto-tie cooling to close                                       |
| Dedicated Purging / Sampling Device Present?  |
| Yes No If yes, what type of device?   |
| Condition: Good Damaged If Damaged, please provide written description.                         |
| Remarks:  |
| Field Certification:  St. Co. Am. U/3/13  Title Date  |



| acility: West Lake Landfill                  |                       | Well ID: <u>P</u> 2 | -208-53         | Date: 4/11/2013                 |
|--|-----------------------|---------------------|-----------------|---------------------------------|
| ccess:                                       | <del></del>           |                     |                 |                                 |
| Accessibility: G                             | Good F                | air <u> </u>        | Poor            |                                 |
| Vicinity of well clear of weeds              | and/or debris:        | Yes_                | No              | ····                            |
| Remarks: L.A                                 |                       |                     |                 |                                 |
| oncrete Pad:<br>Any issues with concrete pac | l? No                 | Yes_                | If yes          | s, then explain below.          |
| Presence of depressions or s                 | standing water around | well:               | Yes             | No                              |
| Remarks: NA                                  | -                     |                     |                 |                                 |
| rotective Outer Casing:                      | Material: Yeel        |                     |                 |                                 |
| Note: For ANY indication of                  | Damaged, please prov  | vide written des    | scription       |                                 |
| Condition of Protective Casir                | ng: Good _            |                     | Damaged         | Missing                         |
| Condition of Exterior Well ID                | Markings: Good _      |                     | Damaged         | Missing                         |
| Condition of Locking Cap:                    | Good                  |                     | Damaged         | Missing                         |
| Condition of Lock                            | Good                  |                     | Damaged         | Missing                         |
| Condition of Weep Hole:                      | Good                  | 1/                  | Damaged         | Missing                         |
| Remarks:                                     | Replaced lock         | 0~ 4/11/2           | Lo13            |                                 |
| Vell Riser: Material:                        | PUC                   |                     |                 |                                 |
| Note: For ANY indication of                  | Damaged, please prov  | /ide written de:    | scription       |                                 |
| Condition of Riser:                          | ,                     | Good                | Dam             | aged                            |
| Condition of Riser Cap:                      | Good 🛩                | Day                 | naged           |                                 |
| ·  | <del></del>           |                     |                 | Missing                         |
| Measurement Reference Pol                    |                       | Dar                 | maged           | Missing                         |
| Remarks: MLA                                 | <u> </u>              |                     |                 |                                 |
| Dedicated Purging / Sampling De              | vice Present?         |                     |                 |                                 |
| Yes No                                       | If yes, wh            | at type of devi     | ce? <u>V</u> VA |                                 |
| Condition: Good _                            | NLA Damage            | ed NA               | If Damaged, p   | lease provide written descripti |
| Remarks: WA                                  |                       | WATER AND A LA      |                 |                                 |
| A.   |                       | Ω:                  | Chemical Eng.   | - 11.1                          |
| Field Certification: Signe                   | ed                    | Titl                | e e             | -4c - 4/1/2017<br>Date          |

HERST & ASSOCIATES, INC.\*

| Facility: West Lake Landfill Well ID: \$\infty \overline{30} \overline{15}\$ Date: 4\overline{313}\$ |
|--|
| Access:  |
| Accessibility: Good V Fair Poor  |
| Vicinity of well clear of weeds and/or debris: Yes Yes No  |
| Remarks:   |
| Concrete Pad:  Any issues with concrete pad?  No Yes If yes, then explain below.                     |
|  |
| Presence of depressions or standing water around well:  Yes No                                       |
| Remarks:   |
| Protective Outer Casing: Material:   |
| Note: For ANY indication of Damaged, please provide written description                              |
| Condition of Protective Casing: Good Damaged Missing   |
| Condition of Exterior Well ID Markings: Good Damaged Missing   |
| Condition of Locking Cap: Good Damaged Missing   |
| Condition of Lock Good Damaged Missing   |
| Condition of Weep Hole: Good   |
| Remarks: Taplowood loods whow Amourain Gods  |
| Well Riser: Material: W  |
| Note: For ANY indication of Damaged, please provide written description                              |
| Condition of Riser: Good Damaged   |
| Condition of Riser Cap: Good Damaged Missing   |
| Measurement Reference Point: Good Damaged Missing  |
| Remarks:   |
| Dedicated Purging / Sampling Device Present?   |
| Yes No If yes, what type of device? Loclescel.   |
| Condition: Good Damaged If Damaged, please provide written description.                              |
| Remarks:   |
| Field Certification: So-Good Pury 4/3/19   |
| Signed Title Date  |



| Facility: West Lake Landfill                   | Well ID: 103-303-45 Date: 4/3/13                      |
|--|---|
| Access:  |   |
| Accessibility: Good <u>V</u>                   | Fair Poor   |
| Vicinity of well clear of weeds and/or debris: | Yes No  |
| Remarks:                                       |   |
| Concrete Pad: Any issues with concrete pad? No | YesIf yes, then explain below.                        |
| Presence of depressions or standing water arou | nd well: Yes No                                       |
| Remarks:                                       |   |
| Protective Outer Casing: Material:             | leal  |
| Note: For ANY indication of Damaged, please p  | provide written description                           |
| Condition of Protective Casing: Good           | d Damaged Missing                                     |
| Condition of Exterior Well ID Markings: Good   | <u> </u>  |
| Condition of Locking Cap: Good                 | d X Damaged Missing                                   |
| Condition of Lock Good                         | d Damaged ∬ Missing                                   |
| Condition of Weep Hole: Goo                    | d Damaged Missing                                     |
| Remarks: Japloco (lock                         |   |
| Well Riser: Material: PIC                      |   |
| Note: For ANY indication of Damaged, please    | provide written description                           |
| Condition of Riser:                            | Good <u>V</u> Damaged                                 |
| Condition of Riser Cap: Good                   | Damaged Missing                                       |
| Measurement Reference Point: Good              | Damaged Missing                                       |
| Remarks:                                       |   |
| Dedicated Purging / Sampling Device Present?   |   |
| Yes No If yes,                                 | what type of device?                                  |
| Condition: Good Dan                            | naged If Damaged, please provide written description. |
| Remarks:                                       |   |
| Field Certification:                           | 56-201 Elvey 4/3/13                                   |
| Signed   | Title Date  |



| acility: West Lake              | Landfill               | Well ID                               | P2-303-A         | <b>)</b> 5 Dat       | e: 4/4/2013            |
|---------------------------------|------------------------|---------------------------------------|------------------|----------------------|------------------------|
| Access:                         |                        |                                       |                  |                      |                        |
| Accessibility:                  | Good                   | Fair                                  | Po               | or                   |                        |
| Vicinity of well of             | lear of weeds and/or   | debris: Yes                           | S No             |                      |                        |
| Remarks:                        | NIA                    |                                       |                  |                      |                        |
| oncrete Pad:<br>Any issues with | concrete pad?          | No _                                  | Yes              | If yes, then explai  | n below.               |
| Presence of de                  | pressions or standing  | water around well:                    | Yes              | No _ <b>r</b>        |                        |
| Remarks:                        | <u>Nu</u>              |                                       |                  |                      |                        |
| rotective Outer Ca              | sing: Mate             | erial: <u>Heal</u>                    |                  |                      |                        |
| Note: For ANY                   | indication of Damage   | ed, please provide writ               | ten description  |                      |                        |
| Condition of Pro                | otective Casing:       | Good                                  | Damaged          |                      | Missing                |
| Condition of Ex                 | terior Well ID Marking | gs: Good                              | _ Damaged        |                      | Missing                |
| Condition of Lo                 | cking Cap:             | Good                                  | Damaged          |                      | Missing                |
| Condition of Lo                 | ck                     | Good                                  | Damaged          |                      | Missing                |
| Condition of Wo                 | зер Hole:              | Good                                  | Damaged          | N                    | Missing                |
| Remarks:                        | Replaced los           | uc on 4/4/20                          |                  | w                    |                        |
| Well Riser: N                   | laterial: PUC          |                                       |                  |                      |                        |
| Note: For ANY                   | indication of Damage   | ed, please provide wri                | tten description |                      |                        |
| Condition of Ris                | ser:                   | Go                                    | od               | Damaged              |                        |
| Condition of Ri                 | ser Cap:               | Good                                  | Damaged          | Missi                | ng                     |
| Measurement F                   | Reference Point:       | Good                                  | Damaged          | Missi                | ng                     |
| Remarks:                        | <u> Ula</u>            | · · · · · · · · · · · · · · · · · · · |                  |                      | ·                      |
| Dedicated Purging /             | Sampling Device Pro    | esent?                                |                  |                      |                        |
| Yes                             | No V                   | If yes, what type                     | of device?       | A                    |                        |
| Condition:                      | Good NA                | Damaged                               | NA If Dama       | aged, please provide | e written description. |
| Remarks:                        | Removed Work           | ma pup power t                        | · serolity d     | ne to low we         | ter when thick         |
| Field Certification:            | De )                   | · ·                                   | Senios Clean     | Tal Entrice          | 4/4/2312               |
|                                 | Signed                 |                                       | Title            |                      | Date                   |



| Facility: West Lake Landfill                          | Well ID: <u>PZ-304-AI</u>      | Date: 4/4/2013                          |
|---|--------------------------------|---|
| Access: Accessibility: Good                           | Fair V Poor                    |   |
| Vicinity of well clear of weeds and/or debris:        | Yes No _                       |   |
| Remarks: <u>X14</u>                                   |                                |   |
| Concrete Pad: Any issues with concrete pad? No        | Yes I                          | f yes, then explain below.              |
| Presence of depressions or standing water             | around well: Yes               | No                                      |
| Remarks: N(A  |                                |   |
| Protective Outer Casing: Material: N                  | Feel                           |   |
| Note: For ANY indication of Damaged, plea             | se provide written description |   |
| Condition of Protective Casing:                       | Good                           | Missing                                 |
| Condition of Exterior Well ID Markings: (             | Good Damaged _                 | Missing                                 |
| Condition of Locking Cap:                             | Good Damaged _                 | Missing                                 |
| Condition of Lock                                     | Good Damaged _                 | Missing                                 |
| Condition of Weep Hole:                               | Good Damaged _                 | Missing                                 |
| Remarks: Replaced love                                | on 4/4/2013                    | PP-000-mile                             |
| Well Riser: Material: N                               |                                |   |
| Note: For ANY indication of Damaged, plea             | se provide written description |   |
| Condition of Riser:                                   | Good                           | Damaged                                 |
| Condition of Riser Cap: Good                          | Damaged                        | Missing                                 |
| Measurement Reference Point: Good                     | Damaged                        | Missing                                 |
| Remarks: N(A  |                                |   |
| Dedicated Purging / Sampling Device Present?          |                                |   |
| YesNoIf   | yes, what type of device?      | erra foot value Étubing                 |
| Condition: Good                                       | Damaged If Damage              | ed, please provide written description. |
| Remarks: <u>\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \</u> |                                |   |
| Field Certification: Signed                           | Series Chans                   | ed brace 4/4/2013                       |



| Facility: West Lake Landfill                | Well ID:                                | PZ-304-AS          | Date: 4/4/2013                        |
|---|---|--------------------|---------------------------------------|
| Access: Accessibility: Good                 | Fair                                    | Poor               |                                       |
|   | *************************************** |                    |                                       |
| Vicinity of well clear of weeds and/or del  | oris: Ye                                | s No               |                                       |
| Remarks: NA                                 |   |                    | ·                                     |
| Concrete Pad: Any issues with concrete pad? | No                                      | Yes If yes         | , then explain below.                 |
| Presence of depressions or standing wa      | ter around well:                        | Yes                | No                                    |
| Remarks: NA                                 |   |                    |                                       |
| Protective Outer Casing: Materia            | : Heef                                  |                    |                                       |
| Note: For ANY indication of Damaged,        |   |                    |                                       |
| Condition of Protective Casing:             | Good                                    | Damaged            | Missing                               |
| Condition of Exterior Well ID Markings:     | Good                                    | Damaged            | Missing                               |
| Condition of Locking Cap:                   | Good                                    | Damaged            | Missing                               |
| Condition of Lock                           | Good                                    | Damaged            | Missing                               |
| Condition of Weep Hole:                     | Good                                    | Damaged            | Missing                               |
| Remarks: Locking cap hinge.                 | broken; ripl                            | laced lock on 4    | 14/2013                               |
| Well Riser: Material: //C                   |   |                    |                                       |
| Note: For ANY indication of Damaged,        | please provide wri                      | tten description   |                                       |
| Condition of Riser:                         | Go                                      | ood Dama           | aged                                  |
| Condition of Riser Cap:                     | Good                                    | Damaged            | Missing                               |
| Measurement Reference Point: G              | Good                                    | Damaged            | Missing                               |
| Remarks: NA                                 |   |                    |                                       |
| Dedicated Purging / Sampling Device Prese   | nt?                                     |                    | , , , , , , , , , , , , , , , , , , , |
| Yes No                                      | If yes, what type                       | of device? Waterna | fout value + resky                    |
| Condition: Good                             | Damaged                                 | If Damaged, p      | lease provide written description.    |
| Remarks: KLA                                |   |                    |                                       |
| Field Certification:                        |   | Fenior aniel a     | que 4/4/2019                          |
| Signed                                      | •                                       | Title              | Date                                  |



| Facility: West Lake Landfill                   | F                    | Well ID: _    | PZ-305-A.       | Date: 4/5/233                      |
|--|----------------------|---------------|-----------------|------------------------------------|
| Access:  |                      |               |                 |                                    |
| Accessibility: Good                            |                      | Fair          | Poor            |                                    |
| Vicinity of well clear of weeds and            | /or debris:          | Yes_          | No _            |                                    |
| Remarks: WA                                    |                      |               |                 |                                    |
| Concrete Pad:<br>Any issues with concrete pad? | No                   |               | Yes`If          | yes, then explain below.           |
| Presence of depressions or stand               | ing water arou       | nd well:      | Yes             | No V                               |
| Remarks: Pad under                             | of -ex               | Casety .      | pad vil cause   | water to pand around               |
| Protective Outer Casing: N                     | laterial: <u>Ste</u> | <u> </u>      |                 |                                    |
| Note: For ANY indication of Dam.               | aged, please p       | rovide writte | n description   |                                    |
| Condition of Protective Casing:                | Good                 |               | Damaged         | Missing                            |
| Condition of Exterior Well ID Mark             | kings: Good          |               | Damaged _       | Missing                            |
| Condition of Locking Cap:                      | Good                 | 1             | Damaged         | Missing                            |
| Condition of Lock                              | Good                 |               | Damaged         | Missing                            |
| Condition of Weep Hole:                        | Good                 |               | Damaged         | Missing                            |
| Remarks: Replaced                              | louc on              | 4/4/20        | 13              |                                    |
| Well Riser: Material: PUC                      |                      |               |                 |                                    |
| Note: For ANY indication of Dam                | aged, please p       | rovide writte | en description  |                                    |
| Condition of Riser:                            |                      | Goo           | d <u>/</u> D    | amaged                             |
| Condition of Riser Cap:                        | Good                 |               | Damaged         | Missing                            |
| Measurement Reference Point:                   | Good                 |               | Damaged         | Missing                            |
| Remarks: \(\int\text{UA}\)                     |                      |               |                 |                                    |
| Dedicated Purging / Sampling Device            | Present?             |               |                 |                                    |
| Yes No   | If yes,              | what type o   | f device? Wet   | ence foot value & tabing           |
| Condition: Good                                | Dam                  | aged          | If Damage       | d, please provide written descript |
| Remarks: Volve t                               | troing ins           | rlles o       | 4/4/2013        |                                    |
| Field Certification:                           | 5                    | و مراكب       | Chemical Engine | 4/5/2013                           |
| Signed   |                      | 000.00        | Title           | Date                               |



| Facility: West Lake Landfill                   | Well ID: <b>S-5</b>             | Date: 4/11/2a/3  |
|--|---------------------------------|--|
| Access: Accessibility: Good                    | Fair Poor                       |  |
| Vicinity of well clear of weeds and/or debris  | : Yes / No                      |  |
| Remarks: Hul instale Pencea                    | area -                          |  |
| Concrete Pad: Any issues with concrete pad?  N | o _ V Yes If yes, the           | n explain below.   |
| Presence of depressions or standing water      | around well: Yes                | No 🖊   |
| Remarks: NA                                    |                                 |  |
| Protective Outer Casing: Material:             | Steel                           |  |
| Note: For ANY indication of Damaged, ple       | ase provide written description |  |
| Condition of Protective Casing:                | Good Damaged                    | Missing  |
| Condition of Exterior Well ID Markings:        | Good Damaged                    | Missing  |
| Condition of Locking Cap:                      | Good Damaged                    | Missing  |
| Condition of Lock                              | Good Damaged                    | Missing  |
| Condition of Weep Hole:                        | Good Damaged                    | Missing  |
| Remarks: Replaced long                         | on 4/11/2013                    |  |
| Well Riser: Material: PVC                      |                                 | 4444   |
| Note: For ANY indication of Damaged, ple       | ase provide written description |  |
| Condition of Riser:                            | Good _ Damaged                  | STORY Andread American State of Control of C |
| Condition of Riser Cap: Goo                    | d Damaged                       | Missing  |
| Measurement Reference Point: Goo               | d Damaged                       | Missing  |
| Remarks: <u>ULA</u>                            |                                 |  |
| Dedicated Purging / Sampling Device Present?   |                                 | 1  |
| Yes No I                                       | yes, what type of device?       | value Établig  |
| Condition: Good                                | Damaged If Damaged, please      | e provide written description.   |
| Remarks: N4                                    |                                 |  |
| Field Certification:                           | Seria Creates Agrice            | 4/11/2013  |



| Facility: West Lake Landfill                   | Well ID:             | S-8              | Date: 4/4/2013                    |
|--|----------------------|------------------|-----------------------------------|
| Access:  |                      | D                |                                   |
| Accessibility: Good                            | Fair                 | Poor             | MHH.A. 1.4.                       |
| Vicinity of well clear of weeds and/or debr    | is: Yes              | No               | ····                              |
| Remarks: N(A                                   |                      |                  |                                   |
| Concrete Pad:<br>Any issues with concrete pad? | No Y                 | esif yes,        | then explain below.               |
| Presence of depressions or standing water      | er around well:      | Yes              | No                                |
| Remarks: VIA                                   |                      |                  |                                   |
| Protective Outer Casing: Material:             | Dee/                 |                  |                                   |
| Note: For ANY indication of Damaged, pl        | ease provide written | description      |                                   |
| Condition of Protective Casing:                | Good V               | Damaged          | Missing                           |
| Condition of Exterior Well ID Markings:        | Good                 | Damaged          | Missing                           |
| Condition of Locking Cap:                      | Good                 | Damaged          | Missing                           |
| Condition of Lock                              | Good                 | Damaged          | Missing                           |
| Condition of Weep Hole:                        | Good                 | Damaged          | Missing                           |
| Remarks: Raplaced love on                      | 4/4/2013; Wel        | ID on interes    | Pik cop                           |
| Well Riser: Material: Pปั                      |                      |                  |                                   |
| Note: For ANY indication of Damaged, p         | ease provide written | description      |                                   |
| Condition of Ríser:                            | Good                 | Damag            | ged                               |
| Condition of Riser Cap: Go                     | ood $ u$             | Damaged          | Missing                           |
| Measurement Reference Point: Go                | od 🗸                 | Damaged          | Missing                           |
| Remarks: NUA                                   |                      |                  |                                   |
| Dedicated Purging / Sampling Device Present    | ?                    |                  |                                   |
| YesNo  | If yes, what type of | device? Uaterra  | foot value & tubing               |
| Condition: Good                                | Damaged              |                  | ease provide written description. |
| Remarks: W.la                                  |                      |                  |                                   |
|  |                      | A                |                                   |
| Field Certification:                           | Seni                 | or Chemical Eng. | er 4/4/2018                       |
| Signed   |                      | inte             | Date'                             |



| Facility: West Lake Landfill                   | Well ID:                    | Date: 4413                       |
|--|-----------------------------|----------------------------------|
| Access:  | Fair A Poor                 |                                  |
| Accessibility: Good                            | M P001                      |                                  |
| Vicinity of well clear of weeds and/or debris: | Yes No                      | ,                                |
| Remarks:                                       |                             |                                  |
| Concrete Pad: Any issues with concrete pad? No | Yes If yes, the             | en explain below.                |
| Presence of depressions or standing water-aro  |                             | No D                             |
| Remarks:                                       |                             |                                  |
| Protective Outer Casing: Material: (           | <u>Nest</u>                 |                                  |
| Note: For ANY indication of Damaged, please    | provide written description |                                  |
|  | $\mathcal{N}$               | NATA A Para                      |
| Condition of Protective Casing: Goo            | Damaged                     | Missing                          |
| Condition of Exterior Well ID Markings: Goo    | od Damaged                  | Missing                          |
| Condition of Locking Cap: God                  | od N Damaged                | Missing                          |
| Condition of Lock God                          | od Damaged 🗴                | Missing                          |
| Condition of Weep Hole: Goo                    | Damaged Damaged             | Missing                          |
| Well Riser: Material:                          |                             |                                  |
| Note: For ANY indication of Damaged, please    |                             |                                  |
|  | M                           |                                  |
| Condition of Riser:                            | Good / Damage               | d                                |
| Condition of Riser Cap: Good                   | Damaged                     | Missing                          |
| Measurement Reference Point: Good              | Damaged                     | Missing                          |
| Remarks:                                       |                             |                                  |
| Dedicated Purging / Sampling Device Present?   |                             |                                  |
| Yes No No If yes                               | what type of device?        |                                  |
| Condition: Good <u>V</u> Dai                   | maged If Damaged, pleas     | se provide written description.  |
| Remarks:                                       |                             |                                  |
|  |                             |                                  |
| Field Certification: Signed Signed             | St Goe Dup<br>Title         | <u>(၂</u> 4/ <u>၂</u> 2)<br>Date |





| Facility: West Lake Landfill Well ID:                       | S-53 Date: 4/12/2013                              |   |
|---|---|---|
| Access:   |   | 퓍 |
| Accessibility: Good Fair                                    | Poor  |   |
| Vicinity of well clear of weeds and/or debris: Yes_         | No  |   |
| Remarks: NA   |   |   |
| Concrete Pad: Any issues with concrete pad? NoY             | es If yes, then explain below.                    |   |
| Presence of depressions or standing water around well:      | YesNo   |   |
| Remarks: Pad buried, if pesent - digg                       | ing out pad Will course water to point a          | M |
| Protective Outer Casing: Material: Steel                    |   |   |
| Note: For ANY indication of Damaged, please provide written | n description                                     | ļ |
| Condition of Protective Casing: Good                        | Damaged Missing                                   |   |
| Condition of Exterior Well ID Markings: Good                | Damaged Missing                                   |   |
| Condition of Locking Cap: Good                              | Damaged Missing                                   |   |
| Condition of Lock Good                                      | Damaged Missing                                   |   |
| Condition of Weep Hole: Good                                | Damaged Missing                                   |   |
| Remarks: Replaced look on 4/12/2013                         |   |   |
| Well Riser: Material: PUC                                   |   | 一 |
| Note: For ANY indication of Damaged, please provide writte  | n description                                     |   |
| Condition of Riser: Good                                    | d Damaged   |   |
| Condition of Riser Cap: Good                                | Damaged Missing                                   |   |
| Measurement Reference Point: Good                           | Damaged Missing                                   |   |
| Remarks: <b>LLA</b>   |   |   |
| Dedicated Purging / Sampling Device Present?                |   |   |
| Yes No If yes, what type of                                 | device? <u>W4</u>                                 |   |
| Condition: Good NtA Damaged Nt                              | 4 If Damaged, please provide written description. | - |
| Remarks: NtA  |   |   |
| Field Certification:  | nior Chemical Enginee 4/12/2013                   |   |



| Facility: West Lake Landfill                | Well ID: S-6(                           | Date: 4/5/2013                            |
|---|---|---|
| Access:                                     |   |   |
| Accessibility: Good                         | Fair Po                                 | or  |
| Vicinity of well clear of weeds and/o       | r debris: Yes / No                      | -   |
| Remarks: NA                                 |   |   |
| Concrete Pad: Any issues with concrete pad? | No Yes                                  | If yes, then explain below.               |
| Presence of depressions or standing         | g water around well: Yes                | No 🗸                                      |
| Remarks: <u>Pad burbed</u>                  | it possesses                            |   |
| Protective Outer Casing: Mat                | erial: See                              |   |
| Note: For ANY indication of Damag           | ed, please provide written description  |   |
| Condition of Protective Casing:             | Good Damaged                            | Missing                                   |
| Condition of Exterior Well ID Markin        | gs: Good Damaged                        | Missing Missing                           |
| Condition of Locking Cap:                   | Good Damaged                            | Missing                                   |
| Condition of Lock                           | Good Damaged                            | Missing                                   |
| Condition of Weep Hole: 70                  | Good Damaged                            | Missing                                   |
| Remarks: HA Ro                              | planed love 0-4/5/2013                  |   |
| Well Riser: Material:                       |   |   |
| Note: For ANY indication of Damag           | jed, please provide written description |   |
| Condition of Riser:                         | Good                                    | Damaged                                   |
| Condition of Riser Cap:                     | Good Damaged                            | Missing                                   |
| Measurement Reference Point:                | Good Damaged                            | Missing                                   |
| Remarks: <u>JtA</u>                         |   |   |
| Dedicated Purging / Sampling Device P       | resent?                                 |   |
| Yes No                                      | If yes, what type of device?            | A   |
| Condition: Good NA                          | Damaged WA If Dama                      | aged, please provide written description. |
| Remarks: <u>Installed</u>                   | Moterna foot whole + taking             | on 4/5/200                                |
| Field Certification:                        | Jenn-Chenser                            | d have YIDAR                              |
| Signed                                      | Title                                   | Date                                      |



| Facility: West Lake Landfill                | Well ID: _           | 5-82                 | Date: 4/4/2013                   |
|---|----------------------|----------------------|----------------------------------|
| Access:                                     |                      |                      |                                  |
| Accessibility: Good                         | Fair                 | Poor 🗸               | <del></del>                      |
| Vicinity of well clear of weeds and/or deb  | _                    | No                   | _                                |
| Remarks: Walking and                        | s) only              |                      |                                  |
| Concrete Pad: Any issues with concrete pad? | No                   | Yeslf yes, t         | hen explain below.               |
| Presence of depressions or standing wat     | er around well:      | Yes                  | No                               |
| Remarks: Nu                                 |                      |                      |                                  |
| Protective Outer Casing: Material:          |                      |                      |                                  |
| Note: For ANY indication of Damaged, p      | lease provide writte | n description        |                                  |
| Condition of Protective Casing:             | Good                 | Damaged              | Missing                          |
| Condition of Exterior Well ID Markings:     | Good                 | Damaged              | Missing                          |
| Condition of Locking Cap:                   | Good                 | Damaged              | Missing                          |
| Condition of Lock                           | Good                 | Damaged              | Missing                          |
| Condition of Weep Hole:                     | Good                 | Damaged              | Missing                          |
| Remarks: <u>Roplaced low</u>                | ic on 4/a/ro         |                      |                                  |
| Well Riser: Material: $\rho_{\mathcal{K}}$  |                      |                      |                                  |
| Note: For ANY indication of Damaged, p      | lease provide writte | en description       |                                  |
| Condition of Riser:                         | Good                 | d Damag              | ed                               |
| Condition of Riser Cap: G                   | ood                  | Damaged              | Missing                          |
| Measurement Reference Point: G              | ood <u> </u>         | Damaged              | Missing                          |
| Remarks: <u>\l4</u>                         |                      |                      |                                  |
| Dedicated Purging / Sampling Device Presen  | t?                   |                      |                                  |
| YesNo                                       | If yes, what type o  | f device? Waters for | + Value & Abax                   |
| Condition: Good                             | Damaged              | If Damaged, plea     | ase provide written description. |
| Remarks: NA                                 |                      |                      |                                  |
| Field Certification:                        | 5                    | inio Created Engin   | a ylaboir                        |
| Signed                                      |                      | Title                | Date                             |



| Facility: West Lake Landfill   |  | Well ID:   | )-84                                    | Date: 4 IIB  |  |
|--------------------------------|--|--|---|--|--|
| Access:                        | $\overline{\nabla}$                    |  |   |  |  |
|                                | Good                                   | Fair   | Poor _                                  | - The state of the |  |
| Vicinity of well clear of weed | s and/or debrìs: د                     | Yes N  | No                                      |  |  |
| Remarks:                       | ************************************** |  |   |  |  |
| Concrete Pad:                  |  | 1  |   |  |  |
| Any issues with concrete pa    | id? No <u>[</u>                        | Yes_   | If yes                                  | , then explain below.  |  |
| Presence of depressions or     | standing water aroun                   | d well:  | Yes                                     | No <u>X</u>  |  |
| Remarks:                       |  |  |   |  |  |
| Protective Outer Casing:       | Material:                              |  |   |  |  |
| Note: For ANY indication o     | f Damaged, please pro                  | ovide written de   | scription                               |  |  |
| Condition of Protective Cas    | ing: Good                              |  | Damaged                                 | Missing  |  |
| Condition of Exterior Well II  | D Markings: Good                       | 2  | Damaged                                 | Missing  |  |
| Condition of Locking Cap:      | Good                                   | <b>X</b>   | Damaged                                 | Missing  |  |
| Condition of Lock              | Good                                   |  | Damaged N                               | Missing  | <del></del>                            |
| Condition of Weep Hole:        | Good Park                              | The state of the s | Damaged                                 | Missing  |  |
| Well Riser: Material:          |  |  |   |  |  |
| Note: For ANY indication of    | f Domagad, places pr                   |  | occintion                               |  |  |
| Note, For ANY indication c     | i Damayeu, piease pr                   | ovide written de   | scription                               |  |  |
| Condition of Riser:            | \ \                                    | Good   | Dam                                     | aged   |  |
| Condition of Riser Cap:        | Good                                   | Da   | maged                                   | Missing  |  |
| Measurement Reference P        | oint: Good                             | Da Da  | maged                                   | Missing  |  |
| Remarks:                       |  |  |   |  |  |
| Dedicated Purging / Sampling D | evice Present?                         |  |   |  | ······································ |
| YesNo                          |  | vhat type of dev   | rice? Wh                                | NON  |  |
| Condition: Good                |  | ged  | If Damaged, p                           | lease provide written descrip  | otion.                                 |
| Remarks:                       |  |  | *************************************** |  |  |
|                                | ·                                      |  |   |  |  |
| Field Certification:           | Medol                                  |  | RELIN                                   | 4/11/13  |  |
| Sign                           | ned ∦                                  | Tir  | tle (                                   | Date <sup>r</sup>  |  |