



1551 Green Valley Drive, Ashland, Kentucky 41102  
o 606 928 0239 f 606 928 1239 republicservices.com

December 1, 2015

Tony Hatton  
Solid Waste Branch  
Division of Waste Management  
200 Fair Oaks  
Frankfort, KY 40601

1592  
4Q GWSW  
CMN 15-01

Received

DEC 02 2015

Reception

**RE: Green Valley Landfill General Partnership  
Green Valley Landfill, Greenup County  
Solid Waste Permit No. SW04500012  
Fourth Quarter 2015 -  
Groundwater Monitoring and Surface Water Monitoring Reports**

DIVISION OF WASTE MANAGEMENT

Mr. Hatton:

Enclosed please find one copy of the quarterly groundwater and surface water monitoring reports and the statistical evaluation report for Green Valley Landfill. No groundwater or surface water exceedances were detected. No verified statistical exceedances were identified.

Feel free to contact me at 502-403-8908 (cell) or WChlebowy@republicservices.com if you have any questions or need additional information.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based upon my inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for such violations.

Sincerely,

**GREEN VALLEY LANDFILL GENERAL PARTNERSHIP**

William L. Chlebowy, P.E.  
Environmental Manager  
Republic Services, Inc.

Enclosures

cc: Kim Cecil – Operations Manager Landfill  
Green Valley Landfill – File

# GROUNDWATER AND SURFACE WATER MONITORING SAMPLE DATA REPORTING FORM

NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET  
DEPARTMENT FOR ENVIRONMENTAL PROTECTION  
DIVISION OF WASTE MANAGEMENT  
SOLID WASTE BRANCH  
14 REILLY ROAD  
FRANKFORT, KY 40601



Facility Name Green Valley Landfill Activity Residential / Contained /CDD Landfill  
(As officially shown on DWM Permit Face)

Permit No. 045-00012 Finds/Unit No. \_\_\_\_\_ Quarter & Year 4<sup>th</sup> 2015

Please check only ONE of the following:

Characterization  Quarterly  Semi-Annual  Annual  Assessment

Please check applicable submittal:  Groundwater  Surface Water

This form is to be utilized by those sites required by regulation (Kentucky Waste Management Regulations – 401 KAR 48:300 and 45:160) or by statute (Kentucky Revised Statutes Chapter 224) to conduct groundwater and surface water monitoring under the jurisdiction of the Division of Waste Management. **You must report any indication of contamination within forty-eight (48) hours of making the determination using statistical analyses, direct comparison, or other similar techniques. Submitting the lab report is NOT considered notification.** Instructions for completing the form are attached. Do not submit the instruction pages.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for such violations.

William L. Culshaw  
SIGNATURE

12-1-15  
DATE

William L. Culshaw ; Environmental manager  
NAME AND TITLE - PLEASE PRINT

# FACILITY INFORMATION SHEET

Sampling Date: 10/20/15 County: Greenup Permit No. 045-00012

Facility Name Green Valley Landfill  
(As officially shown on DWM Permit Face)

Site Address: 100 Addington Road Ashland, Kentucky 41102  
Street City Zip

Phone No.: (606) 928-0239 Latitude 38° 23' 00" Longitude 82° 48' 58"

## OWNER INFORMATION

Facility Owner: Green Valley Environmental Corporation Phone No.: 606-928-0239

Contact Person: Bill Chlebowy, P.E. Phone No.: 502-209-3816

Contact Person Title: Environmental Manager

Mailing Address: 2157 Highway 151 Frankfort, KY 40601  
Street City Zip

## SAMPLING PERSONNEL

(IF OTHER THAN LANDFILL OR LABORATORY)

Company: Kenvirons, Inc.

Contact Person: Bill Knarr Phone No.: (502) 695-4357

Mailing Address: 452 Versailles Road Frankfort, KY 40601  
Street City Zip

## LABORATORY RECORD #1

Laboratory: Pace Analytical Services, Inc. Lab ID No.: \_\_\_\_\_

Contact Person: Chris Boyle Phone No.: (317) 243-8304

Mailing Address: 7726 Moller Road Indianapolis, IN 46268  
Street City Zip

## LABORATORY RECORD #2

Laboratory: \_\_\_\_\_ Lab ID No.: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone No.: ( ) \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City Zip

Division of Waste Management  
 Solid Waste Branch  
 14 Reilly Road  
 Frankfort, KY 40601 (502) 564-6716

RESIDENTIAL/CONTAINED-QUARTERLY  
 Facility: Green Valley Landfill  
 Permit Number: 045-00012

FINDS/UNIT: \_\_\_\_\_  
 LAB ID: \_\_\_\_\_

For Official Use Only

## SURFACE WATER SAMPLE ANALYSES (w)

Monitoring Point (KPDES Discharge Number, or "UPSTREAM", or "DOWNSTREAM")						SW-4							
Sample Sequence #						1							
If sample is a Blank, specify Type (F)ield, (T)rip, (M)ethod, or (E)quipment						NA							
Sample Date and Time (Month/Day/Year hour:minutes)						10/20/2015	09:30						
Duplicate ("Y" or "N")1						N							
Split ("Y" or "N")2						N							
Facility Sample ID Number (if applicable)						SW-4							
Laboratory Sample ID Number (if applicable)						50130709001							
Date of Analysis (Month/Day/Year)						10/20/15 - 11/05/15							
CAS RN3		CONSTITUENT	T D4	UNIT OF MEASURE	METHOD	DETECTED VALUE OR PQL5	F L A G S	DETECTED VALUE OR PQL5	F L A G S	DETECTED VALUE OR PQL5	F L A G S	DETECTED VALUE OR PQL5	F L A G S
A200-00-0	0	Flow	T										
16887-00-6	2	Chloride(s)	T	mg/L	EPA 9056	12.2							
14808-79-8	0	Sulfate	T	mg/L	EPA 9056	612							
7439-89-6	0	Iron	T	mg/L	EPA 6010	0.48							
7440-23-5	0	Sodium	T	mg/L	EPA 6010	11.2							
S0268	0	Organic Carbon	T	mg/L	SM 5310C	2.1							
S0097	0	BOD	T										

- 1Respond "Y" if the sample was a duplicate of another sample in this report.
- 2Respond "Y" if the sample was split and analyzed by separate laboratories.
- 3Chemical Abstracts Service Registry Number or unique identifier number assigned by agency.
- 4"T" = Total; "D" = Dissolved
- 5"<" indicates a non-detect; do not use "ND" or "BDL"  
Value then shown is Practical Quantification Limit
- 6Facility has either/or option on Organic Carbon and  
(BOD) Biological Oxygen Demand = Both are not required

- STANDARD FLAGS:**
- J = Estimated value
  - B = Analyte found in blank
  - A = Average value
  - N = Presumptive ID
  - D = Concentration from analysis  
of a secondary dilution factor
  - X = Exceeds Regulatory Limit



**Comments:**

1. There was no flow reported from SW-1A, SW-2, SW-3, SW-5 or SW-6 on the scheduled date of sampling (10/20/2015).
2. TR = Total Recoverable



**KENVIRONS, INC.**  
**POND / SURFACE WATER LOG**

FACILITY	GREEN VALLEY	PROJECT NO.	2011033
LOCATION	GREENUP CO, KY	DATE	10/20/15
SAMPLE ID	Sw-1A	SAMPLER(S)	BFV III / ZRZ
WEATHER	clear	Z#	

**CALIBRATION DATA**

PH	4.0		7.0		10.0	
CONDUCTIVITY (US)					TEMP (° C)	

**FIELD DATA**

SAMPLE DATA			
COLOR		PH (S. U.)	
ODOR		TEMP (° C)	
APPEARANCE		CONDUCTIVITY (US)	
TIME	0946	FLOW (GPM)	No Flow

NUMBER AND TYPE OF CONTAINERS \_\_\_\_\_

ANNUAL   
  SEMI-ANNUAL   
  QUARTERLY   
  MONTHLY   
  OTHER

SPLIT SAMPLE   
  YES   
  NO   
 IF YES, WITH WHOM \_\_\_\_\_

COMMENTS \_\_\_\_\_

SAMPLER(S)

SIGNATURE

*Bob P. Kenna*

DATE 10/20/15

KENVIRONS, INC.  
POND / SURFACE WATER LOG

FACILITY	GREEN VALLEY	PROJECT NO.	2011033
LOCATION	GREENUP CO, KY	DATE	10/20/15
SAMPLE ID	SW-2	SAMPLER(S)	BFX # 1222
WEATHER	Clear	Z#	—

CALIBRATION DATA

PH	4.0	7.0	10.0
CONDUCTIVITY (US)			TEMP (°C)

FIELD DATA

SAMPLE DATA			
COLOR		PH (S. U.)	
ODOR		TEMP (°C)	
APPEARANCE		CONDUCTIVITY (US)	
TIME	0810	FLOW (GPM)	No Flow

NUMBER AND TYPE OF CONTAINERS \_\_\_\_\_

ANNUAL   
  SEMI-ANNUAL   
  QUARTERLY   
  MONTHLY   
  OTHER

SPLIT SAMPLE   
  YES   
  NO   
 IF YES,  
 WITH  
 WHOM \_\_\_\_\_

COMMENTS \_\_\_\_\_

SAMPLER(S)  
SIGNATURE

*BOD P. KEM*

DATE 10/20/15

KENVIRONS, INC.  
POND / SURFACE WATER LOG

FACILITY	GREEN VALLEY	PROJECT NO.	2011033
LOCATION	GREENUP CO, KY	DATE	10/20/15
SAMPLE ID	Sw-3	SAMPLER(S)	BFK III / ZRZ
WEATHER	Clear	Z#	

CALIBRATION DATA

PH	4.0	7.0	10.0
CONDUCTIVITY (US)			TEMP (°C)

FIELD DATA

SAMPLE DATA			
COLOR		PH (S. U.)	
ODOR		TEMP (°C)	
APPEARANCE		CONDUCTIVITY (US)	
TIME	0920	FLOW (GPM)	No Flow

NUMBER AND TYPE OF CONTAINERS \_\_\_\_\_

ANNUAL   
  SEMI-ANNUAL   
  QUARTERLY   
  MONTHLY   
  OTHER

SPLIT SAMPLE   
  YES   
  NO   
 IF YES, WITH WHOM \_\_\_\_\_

COMMENTS \_\_\_\_\_

SAMPLER(S)  
SIGNATURE

B-01 P. K. M

DATE 10/20/15

KENVIRONS, INC.  
POND / SURFACE WATER LOG

FACILITY	GREEN VALLEY	PROJECT NO.	2011033
LOCATION	GREENUP CO, KY	DATE	10/20/15
SAMPLE ID	Sw-#5	SAMPLER(S)	BFK III / ERZ
WEATHER	Clear	Z#	

CALIBRATION DATA

PH	4.0	7.0	10.0
CONDUCTIVITY (US)			TEMP (°C)

FIELD DATA

SAMPLE DATA			
COLOR		PH (S. U.)	
ODOR		TEMP (°C)	
APPEARANCE		CONDUCTIVITY (US)	
TIME	0940	FLOW (GPM)	No flow

NUMBER AND TYPE OF CONTAINERS \_\_\_\_\_

ANNUAL   
  SEMI-ANNUAL   
  QUARTERLY   
  MONTHLY   
  OTHER

SPLIT SAMPLE   
  YES   
  NO   
 IF YES, WITH WHOM: \_\_\_\_\_

COMMENTS \_\_\_\_\_

SAMPLER(S)  
SIGNATURE

B. J. F. K. in

DATE 10/20/15

**KENVIRONS, INC.**  
**POND / SURFACE WATER LOG**

FACILITY	GREEN VALLEY	PROJECT NO.	2011033
LOCATION	GREENUP CO, KY	DATE	10/20/15
SAMPLE ID	Sw-6	SAMPLER(S)	RFK III / ZRZ
WEATHER	Clear 40°	Z#	

**CALIBRATION DATA**

PH	4.0	7.0	10.0
CONDUCTIVITY (US)			TEMP (°C)

**FIELD DATA**

SAMPLE DATA			
COLOR		PH (S. U.)	
ODOR		TEMP (°C)	
APPEARANCE		CONDUCTIVITY (US)	
TIME	0805	FLOW (GPM)	Po Flow

NUMBER AND TYPE OF CONTAINERS \_\_\_\_\_

ANNUAL   
  SEMI-ANNUAL   
  QUARTERLY   
  MONTHLY   
  OTHER

SPLIT SAMPLE   
  YES   
  NO   
 IF YES, WITH WHOM \_\_\_\_\_

COMMENTS \_\_\_\_\_

SAMPLER(S)  
SIGNATURE

BOP F. KEM

DATE 10/20/15

# GROUNDWATER AND SURFACE WATER MONITORING SAMPLE DATA REPORTING FORM

NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET  
DEPARTMENT FOR ENVIRONMENTAL PROTECTION  
DIVISION OF WASTE MANAGEMENT  
SOLID WASTE BRANCH  
14 REILLY ROAD  
FRANKFORT, KY 40601

**RECEIVED**  
DEC - 2 2015  
DIVISION OF WASTE MANAGEMENT  
SOLID WASTE BRANCH

Facility Name Green Valley Landfill Activity Contained Landfill  
(As officially shown on DWM Permit Face)

Permit No. 045-00012 Finds/Unit No. \_\_\_\_\_ Quarter & Year 4th 2015

*Please check only ONE of the following:*

Characterization  Quarterly  Semi-Annual  Annual  Assessment

*Please check applicable submittal:*  Groundwater  Surface Water

This form is to be utilized by those sites required by regulation (Kentucky Waste Management Regulations - 401 KAR 48:300 and 45:160) or by statute (Kentucky Revised Statutes Chapter 224) to conduct groundwater and surface water monitoring under the jurisdiction of the Division of Waste Management. **You must report any indication of contamination within forty-eight (48) hours of making the determination using statistical analyses, direct comparison, or other similar techniques. Submitting the lab report is NOT considered notification.** Instructions for completing the form are attached. Do not submit the instruction pages.

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for such violations.

Will Lally 12-1-15  
SIGNATURE DATE

William L. Culberson, Environmental Manager  
NAME AND TITLE - PLEASE PRINT

## FACILITY INFORMATION SHEET

Sampling Date: 10/20/2015 County: Greenup Permit No. 045-00012  
Facility Name Green Valley Landfill  
(As officially shown on DWM Permit Face)  
Site Address: 100 Addington Road Ashland, Kentucky 41102  
Street City Zip  
Phone No.: (606) 928-0239 Latitude 38° 23' 00" Longitude 82° 48' 58"

### OWNER INFORMATION

Facility Owner: Green Valley Environmental Corporation Phone No.: 606-928-0239  
Contact Person: Bill Chlebowy, P.E. Phone No.: 502-209-3816  
Contact Person Title: Environmental Manager  
Mailing Address: 2157 Highway 151 Frankfort, KY 40601  
Street City Zip

### SAMPLING PERSONNEL

(IF OTHER THAN LANDFILL OR LABORATORY)

Company: Kenvirons, Inc.  
Contact Person: Bill Knarr Phone No.: (502) 695-4357  
Mailing Address: 452 Versailles Road Frankfort, KY 40601  
Street City Zip

### LABORATORY RECORD #1

Laboratory: Pace Analytical Services, Inc. Lab ID No.: \_\_\_\_\_  
Contact Person: Chris Boyle Phone No.: (317) 228-3134  
Mailing Address: 7726 Moller Road Indianapolis, IN 46268  
Street City Zip

### LABORATORY RECORD #2

Laboratory: Keystone Laboratories, Inc. Lab ID No.: \_\_\_\_\_  
Contact Person: Sue Thompson Phone No.: (800)-858-5227  
Mailing Address: 600 East 17th Street South Newton, IA 50208  
Street City Zip

Division of Waste Management  
 Solid Waste Branch  
 14 Reilly Road  
 Frankfort, KY 40601 (502) 564-6716

RESIDENTIAL/CONTAINED-QUARTERLY  
 Facility: Green Valley Landfill  
 Permit Number: 045-00012

FINDS/UNIT:

LAB ID:

For Official Use Only

## GROUNDWATER SAMPLE ANALYSES

AKGWA NUMBER1, Facility Well/Spring Number						NA		NA		8000-8086		8000-2931	
Facility's Local Well or Spring Number (e.g. MW-1, MW-2, etc.)						Dup		FB		MW-1		MW-1A	
Sample Sequence #						1		1		1		1	
If sample is a Blank, specify Type (F)ield, (T)rip, (M)ethod, or (E)quipment						NA		NA		NA		NA	
Sample Date and Time (Month/Day/Year hour:minutes)						10/20/2015 08:00		10/20/2015 08:00		10/20/2015 10:45		10/20/2015 11:15	
Duplicate ("Y" or "N")2						Yes		No		No		No	
Split ("Y" or "N")3						No		No		No		No	
Facility Sample ID Number (if applicable)						Dup		FB		MW-1		MW-1A	
Laboratory Sample ID Number (if applicable)						50130404005		50130404006		50130404001		50130404002	
Date of Analysis (Month/Day/Year)						10/22/15 - 11/02/15		10/22/15 - 11/02/15		10/20/15 - 11/03/15		10/20/15 - 11/02/15	
Gradient with respect to Monitored Unit (UP, DOWN, SIDE, UNKNOWN)						UNKNOWN		UNKNOWN		SIDE		SIDE	
CAS RN4		CONSTITUENT	T D5	UNIT OF MEASURE	METHOD	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S
S0906	0	Static Water Level Elevation	T	ft/msl						612.27		614.99	
S0907	0	Temperature	T	deg C						14.72		12.48	
16887-00-6	2	Chloride(s)	T	mg/L	EPA 9056	14.6		<0.25	U	1.2		3.3	
S0130	0	Chemical Oxygen Demand	T	mg/L	EPA 410.4	<10.0	U	<10.0	U	31.1		<10.0	U
S0266	0	Total Dissolved Solids	T	mg/L	SM 2540C	234		<10.0	U	48.0		238	
S0268	1	Total Organic Carbon	T	mg/L	SM 5310C	1.1		<1.0	U	7.8		<1.0	U
S0145	1	Specific Conductance Field	T	umhos/cm						72		378	

- 1AKGWA # is 0000-0000 for any type of blank.  
 2Respond "Y" if the sample was a duplicate of another sample in this report.  
 3Respond "Y" if the sample was split and analyzed by separate laboratories.  
 4Chemical Abstracts Service Registry Number or unique identifier number assigned by agency.  
 5"T" = Total; "D" = Dissolved  
 6 "<"? indicates a non-detect; do not use "ND" or "BDL". Value then shown is Practical Quantification Limit.

**STANDARD FLAGS:**

- J = Estimated value  
 B = Analyte found in blank  
 A = Average value  
 N = Presumptive ID  
 D = Concentration from analysis of a secondary dilution factor









Division of Waste Management  
Solid Waste Branch  
14 Reilly Road  
Frankfort, KY 40601 (502) 564-6716

RESIDENTIAL/CONTAINED-QUARTERLY  
Facility: Green Valley Landfill  
Permit Number: 045-00012

FINDS/UNIT: \_\_\_\_\_

LAB ID: \_\_\_\_\_

For Official Use Only

## GROUNDWATER SAMPLE ANALYSES

AKGWA NUMBER1, Facility Well/Spring Number						8000-2932		8005-7101		8005-7102		8005-7103	
Facility's Local Well or Spring Number (e.g. MW-1, MW-2, etc.)						MW-1B		MW-28C		MW-28D		MW-28E	
Sample Sequence #						1		1		1		1	
If sample is a Blank, specify Type (F)ield, (T)rip, (M)ethod, or (E)quipment						NA		NA		NA		NA	
Sample Date and Time (Month/Day/Year hour:minutes)						10/20/2015	11:40	10/20/2015	13:35	10/20/2015	12:55	10/20/2015	13:15
Duplicate ("Y" or "N")2						No		No		No		No	
Split ("Y" or "N")3						No		No		No		No	
Facility Sample ID Number (if applicable)						MW-1B		MW-28C		MW-28D		MW-28E	
Laboratory Sample ID Number (if applicable)						50130404003		50130404009		50130404007		50130404008	
Date of Analysis (Month/Day/Year)						10/20/15 - 11/02/15		10/20/15 - 11/02/15		10/20/15 - 11/02/15		10/20/15 - 11/02/15	
Gradient with respect to Monitored Unit (UP, DOWN, SIDE, UNKNOWN)						SIDE		DOWN		DOWN		DOWN	
CAS RN4		CONSTITUENT	T D5	UNIT OF MEASURE	METHOD	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S
S0906	0	Static Water Level Elevation	T	ft/msl		612.14		669.78		669.88		667.44	
S0907	0	Temperature	T	deg C		12.75		16.99		16.05		16.35	
16887-00-6	2	Chloride(s)	T	mg/L	EPA 9056	37.9		20.3		28.5		1.6	
S0130	0	Chemical Oxygen Demand	T	mg/L	EPA 410.4	<10.0	U	<10.0	U	<10.0	U	<10.0	U
S0266	0	Total Dissolved Solids	T	mg/L	SM 2540C	380		302		475		166	
S0268	1	Total Organic Carbon	T	mg/L	SM 5310C	<1.0	U	1.8		1.3		<1.0	U
S0145	1	Specific Conductance Field	T	umhos/cm		658		457		700		292	

- 1AKGWA # is 0000-0000 for any type of blank.  
2Respond "Y" if the sample was a duplicate of another sample in this report.  
3Respond "Y" if the sample was split and analyzed by separate laboratories.  
4Chemical Abstracts Service Registry Number or unique identifier number assigned by agency.  
5"T" = Total; "D" = Dissolved  
6 "<"? indicates a non-detect; do not use "ND" or "BDL". Value then shown is Practical Quantification Limit.

STANDARD FLAGS:  
J = Estimated value  
B = Analyte found in blank  
A = Average value  
N = Presumptive ID  
D = Concentration from analysis of a secondary dilution factor









Division of Waste Management  
 Solid Waste Branch  
 14 Reilly Road  
 Frankfort, KY 40601 (502) 564-6716

RESIDENTIAL/CONTAINED-QUARTERLY  
 Facility: Green Valley Landfill  
 Permit Number: 045-00012

FINDS/UNIT: \_\_\_\_\_

LAB ID: \_\_\_\_\_

For Official Use Only

## GROUNDWATER SAMPLE ANALYSES

AKGWA NUMBER <sup>1</sup> , Facility Well/Spring Number				8000-8085									
Facility's Local Well or Spring Number (e.g. MW-1, MW-2, etc.)				MW-3									
Sample Sequence #				1									
If sample is a Blank, specify Type (F)ield, (T)rip, (M)ethod, or (E)quipment				NA									
Sample Date and Time (Month/Day/Year hour:minutes)				10/20/2015	12:28								
Duplicate ("Y" or "N") <sup>2</sup>				No									
Split ("Y" or "N") <sup>3</sup>				No									
Facility Sample ID Number (if applicable)				MW-3									
Laboratory Sample ID Number (if applicable)				50130404004									
Date of Analysis (Month/Day/Year)				10/20/15 - 11/02/15									
Gradient with respect to Monitored Unit (UP, DOWN, SIDE, UNKNOWN)				DOWN									
CAS RN4		CONSTITUENT	T D5	UNIT OF MEASURE	METHOD	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S	DETECTED VALUE OR PQL6	F L A G S
S0906	0	Static Water Level Elevation	T	ft/msl		625.29							
S0907	0	Temperature	T	deg C		15.70							
16887-00-6	2	Chloride(s)	T	mg/L	EPA 9056	18.9							
S0130	0	Chemical Oxygen Demand	T	mg/L	EPA 410.4	<10.0	U						
S0266	0	Total Dissolved Solids	T	mg/L	SM 2540C	227							
S0268	1	Total Organic Carbon	T	mg/L	SM 5310C	1.2							
S0145	1	Specific Conductance Field	T	umhos/cm		343							

1AKGWA # is 0000-0000 for any type of blank.

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**STANDARD FLAGS:**

J = Estimated value

B = Analyte found in blank

A = Average value

N = Presumptive ID

D = Concentration from analysis

of a secondary dilution factor











452 Versailles Road  
Frankfort, Kentucky 40601  
Office: 502-695-4357  
Fax: 502-695-4363

# CHAIN-OF-CUSTODY / ANALYTICAL REQUEST DOCUMENT

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

KENVIRONS

<b>Section A</b> Required Client Information:		<b>Section B</b> Required Project Information:		<b>Section C</b> Invoice Information:		Page: <u>1</u> of <u>1</u>	
Company: <b>Kenvirons, Inc.</b>		Report To: <b>Bill Knarr</b>		Attention: <b>Bill Knarr</b>		<b>REGULATORY AGENCY</b> <input type="checkbox"/> NPDES <input type="checkbox"/> GROUND WATER <input type="checkbox"/> DRINKING WATER <input type="checkbox"/> UST <input type="checkbox"/> RCRA <input type="checkbox"/> OTHER	
Address: <b>452 Versailles Road</b> <b>Frankfort, KY 40601</b>		Copy To:		Company Name: <b>Kenvirons, Inc.</b>			
Email To: <b>bknarr@kenvirons.com</b>		Purchase Order No.: <b>2007006</b>		Address: <b>452 Versailles Rd.</b> <b>Frankfort, KY</b>		Site Location: <b>KY</b>	
Phone: (502)695-4357 Fax: (502)695-4363		Project Name: <b>Green Valley Landfill Groundwater</b>		Quote Reference:			
Requested Due Date/TAT: <b>Standard</b>		Project Number: <b>2007006</b>		Project Manager: <b>Chris Boyle</b>		STATE: <b>KY</b>	
				Profile #: <b>4634</b>			

ITEM #	SAMPLE ID (A-Z, 0-9 / -) Sample IDs MUST BE UNIQUE	DATE	TIME	FLOW	TEMPERATURE	PH	SPECIFIC CONDUCTIVITY	TURBIDITY OR DISSOLVED OXYGEN (CIRCLE)	MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	# OF CONTAINERS	Preservatives										Analysis Test Y/N	Residual Chlorine (Y/N)	Project No. / Lab I.D.		
												Unpreserved	H <sub>2</sub> SO <sub>4</sub>	HNO <sub>3</sub>	HCl	NaOH	Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub>	Methanol	Other	Tox	PCB				COND TOX	CLIPDS
1	MW-1	10/20/15	1045	—	14.72	5.91	72	4.02	GW	G	4	1	2	1											001	
2	MW-1A	10/20/15	1115	—	12.48	6.73	378	2.48	GW	G	4	1	2	1											002	
3	MW-1B	10/20/15	1140	—	11.75	7.35	658	2.77	GW	G	4	1	2	1											003	
4	MW-3	10/20/15	1228	—	15.70	6.15	343	2.27	GW	G	4	1	2	1											004	
5	Dep	10/20/15	—	—	—	—	—	—	GW	G	4	1	2	1											005	
6	FG	10/20/15	—	—	—	—	—	—	WT	G	4	1	2	1											006	
7	MW-2BD	10/20/15	1255	—	16.05	5.99	700	1.74	GW	G	4	1	2	1											007	
8	MW-2BE	10/20/15	1315	—	16.35	6.42	292	2.11	GW	G	4	1	2	1											008	
9	MW-2BC	10/20/15	1335	—	16.99	5.40	457	2.24	GW	G	4	1	2	1											009	
10																										
11																										
12																										

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS
	<b>BOO P KITA</b>	10/20/15	1600	Sent via FedEx	10/20/15	1600	
	<b>FedEx</b>			<i>[Signature]</i>	10/24/15	0925	13 7 7 7

SAMPLER NAME AND SIGNATURE		Temp in °C	Received on Ice (Y/N)	Custody Sealed Cooler (Y/N)	Samples Intact (Y/N)
PRINT Name of SAMPLER: <b>Bill F. Knarr, III</b>	DATE Signed (MM/DD/YY): <b>10/20/15</b>				
SIGNATURE of SAMPLER: <b>BOO P KITA</b>					