SP-7770-0[illegible]

MISSOURI DEPARTMENT OF HEALTH

JOHN ASHCROFT
GOVERNOR

ROBERT HARMON, M.D.
DIRECTOR

Site: West Lake Ll
ID #: MBD079910932
Break: 17.8
Other:
5-13-87

May 13, 1987

RECEIVED
MAY 14 1987
WASTE MANAGEMENT PROGRAM

Mr. Keith Schardein, Chief
Superfund Section
Waste Management Program
Missouri Department of Natural Resources
P.O. Box 176
Jefferson City, MO 65102

Dear Mr. ~~Schardein:~~ Keith

Re: Westlake Landfill Registry Site

Enclosed please find the documentation you requested about our source for contamination types and levels at the Westlake Landfill site. If you need more information concerning this site or have any other questions, please feel free to contact me at (314) 751-6102.

Sincerely,

Gale M. Carlson
Environmental Specialist
Bureau of Environmental Epidemiology

GMC:vlh

enclosure

40241235

SUPERFUND RECORDS

DNR 0272

Telephone: (314) 751-6400 P. O. Box 570 Jefferson City, MO 65102

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER
services provided on a nondiscriminatory basis

June 28, 1982

DOCUMENTATION RECORDS
FOR
HAZARD RANKING SYSTEM

INSTRUCTIONS: The purpose of these records is to provide a convenient way to prepare an auditable record of the data and documentation used to apply the Hazard Ranking System to a given facility. As briefly as possible summarize the information you used to assign the score for each factor (e.g., "Waste quantity = 4,230 drums plus 800 cubic yards of sludges"). The source of information should be provided for each entry and should be a bibliographic-type reference that will make the document used for a given data point easier to find. Include the location of the document and consider appending a copy of the relevant page(s) for ease in review.

FACILITY NAME: Westlake Landfill

LOCATION: _____

GROUND WATER ROUTE

1 OBSERVED RELEASE

Contaminants detected (5 maximum):

None

Rationale for attributing the contaminants to the facility:

n/a

* * *

2 ROUTE CHARACTERISTICS

Depth to Aquifer of Concern

Name/description of aquifers(s) of concern:

shallow alluvium of Missouri River

Depth(s) from the ground surface to the highest seasonal level of the saturated zone [water table(s)] of the aquifer of concern:

approximately 60 ft.

Depth from the ground surface to the lowest point of waste disposal/storage:

approximately 35 feet

Net Pr itation

Mean annual or seasonal precipitation (list months for seasonal):

approximately 36"

Mean annual lake or seasonal evaporation (list months for seasonal):

approximately 35"

Net precipitation (subtract the above figures):

+1"

Permeability of Unsaturated Zone

Soil type in unsaturated zone:

silty sands over limestone

Permeability associated with soil type:

approximately 10 -3 to 10 -5 cm/sec.

Physical State

Physical state of substances at time of disposal (or at present time for generated gases):

liquid

* * *

3 CONTAINMENT

Containment

Method(s) of waste or leachate containment evaluated:

Landfill; no liner; some ponding

Method with highest score:

above

4 WASTE CHARACTERISTICS

Toxicity and Persistence

Compound(s) evaluated:

Chlordane
TCE
Toluene

Compound with highest score:

Chlordane

Hazardous Waste Quantity

Total quantity of hazardous substances at the facility, excluding those with a containment score of 0 (Give a reasonable estimate even if quantity is above maximum):

4000 tons Pesticides
7000 tons Low-level uranium
Undetermined amounts of waste solvents

Basis of estimating and/or computing waste quantity:

"Superfund Notifications"
Interviews and Company records

* * *

Ground Water Use

Use(s) of aquifer(s) of concern within a 3-mile radius of the facility:

Commercial with municipal water available.

Distance to Nearest Well

Location of nearest well drawing from aquifer of concern or occupied building not served by a public water supply:

Not used for drinking water

Distance to above well or building:

n/a

Population Served by Ground Water Wells Within a 3-Mile Radius

Identified water-supply well(s) drawing from aquifer(s) of concern within a 3-mile radius and populations served by each:

n/a

Computation of land area irrigated by supply well(s) drawing from aquifer(s) of concern within a 3-mile radius, and conversion to population (1.5 people per acre):

n/a

Total population served by ground water within a 3-mile radius:

None

SURFACE WATER ROUTE

1 OBSERVED RELEASE

Contaminants detected in surface water at the facility or downhill from it (5 maximum):

None

Rationale for attributing the contaminants to the facility:

n/a

* * *

2 ROUTE CHARACTERISTICS

Facility Slope and Intervening Terrain

Average slope of facility in percent:

greater than 8% slope

Name/description of nearest downslope surface water:

Missouri River

Average slope of terrain between facility and above-cited surface water body in percent:

between 3 and 5% slope

Is the facility located either totally or partially in surface water?

No

Is the facility completely surrounded by areas of higher elevation?

No

1-Year 24-Hour Rainfall in Inches

between 2.5-30 inches

Distance to Nearest Downslope Surface Water

between 1 and 2 miles

Physical State of Waste

liquids

* * *

3 CONTAINMENT

Containment

Method(s) of waste or leachate containment evaluated:

Landfill, diversion system unsound

Method with highest score:

above

4 WASTE CHARACTERISTICS

Toxicity and Persistence

Compound(s) evaluated

See groundwater

Compound with highest score:

see groundwater

Hazardous Waste Quantity

Total quantity of hazardous substances at the facility, excluding those with a containment score of 0 (Give a reasonable estimate even if quantity is above maximum):

see groundwater

Basis of estimating and/or computing waste quantity:

see groundwater

* * *

5 TARGETS

Surface Water Use

Use(s) of surface water within 3 miles downstream of the hazardous substance:

Recreation

Is the[illegible]idal influence?

No

Distance to a Sensitive Environment

Distance to 5-acre (minimum) coastal wetland, if 2 miles or less:

n/a

Distance to 5-acre (minimum) fresh-water wetland, if 1 mile or less:

n/a

Distance to critical habitat of an endangered species or national wildlife refuge, if 1 mile or less:

n/a

Population Served by Surface Water

Location(s) of water-supply intake(s) within 3 miles (free-flowing bodies) or 1 mile (static water bodies) downstream of the hazardous substance and population served by each intake:

None

Computa. . of land area irrigated by above-cited intake(s) conversion to population (1.5 people per acre):

n/a

Total population served:

None

Name/description of nearest of above water bodies:

Missouri River

Distance to above-cited intakes, measured in stream miles.

n/a

1 OBSERVED RELEASE

Contaminants detected:

None

Date and location of detection of contaminants

n/a

Methods used to detect the contaminants:

n/a

Rationale for attributing the contaminants to the site:

n/a

* * *

2 WASTE CHARACTERISTICS

Reactivity and Incompatibility

Most reactive compound:

n/a

Most incompatible pair of compounds:

n/a

Toxicity

Most toxic compound:

n/a

Hazardous Waste Quantity

Total quantity of hazardous waste:

n/a

Basis of estimating and/or computing waste quantity:

n/a

* * *

3 TARGETS

Population Within 4-Mile Radius

Circle radius used, give population, and indicate how determined:

0 to 4 mi 0 to 1 mi 0 to 1/2 mi 0 to 1/4 mi

n/a

Distance to a Sensitive Environment

Distance to 5-acre (minimum) coastal wetland, if 2 miles or less:

n/a

Distance to 5-acre (minimum) fresh-water wetland, if 1 mile or less:

n/a

Distan[illegible] critical habitat of an endangered species, if [illegible]e or less:

n/a

Land Use

Distance to commercial/industrial area, if 1 mile or less:

n/a

Distance to national or state park, forest, or wildlife reserve, if 2 miles or less:

n/a

Distance to residential area, if 2 miles or less:

n/a

Distance to agricultural land in production within past 5 years, if 1 mile or less:

n/a

Distance to prime agricultural land in production within past 5 years, if 2 miles or less:

n/a

Is a historic or landmark site (National Register or Historic Places and National Natural Landmarks) within the view of the site?

n/a

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT

SITE NUMBER (to be assigned by HQ): 1475

GENERAL INSTRUCTIONS: Complete Sections I and III through XV of this form as completely as possible. Then use the information on this form to develop a Tentative Disposition (Section II). File this form in its entirety in the regional Hazardous Waste Log File. Be sure to include all appropriate Supplemental Reports in the file. Submit a copy of the forms to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME: Westlake Quarry Landfill
B. STREET (or other identifier): Rt. 1 Box 206
C. CITY: Bridgeton
D. STATE: Mo.
E. ZIP CODE: 63044
F. COUNTY NAME: St. Louis

G. SITE OPERATOR INFORMATION
1. NAME: William Canney
2. TELEPHONE NUMBER: 314 739-1122
3. STREET: Rt. 1 Box 206
4. CITY: Bridgeton
5. STATE: Mo.
6. ZIP CODE: 63042

H. REALTY OWNER INFORMATION (if different from operator of site)
1. NAME: Estate of V.R. Cruse - Catherine Cruse and L.E. Tramp a partnership.
2. TELEPHONE NUMBER: 314 739-1122
3. CITY: Rt. 1 Box 206 Bridgeton
4. STATE: Mo.
5. ZIP CODE: 63042

I. SITE DESCRIPTION: State Approved Sanitary and Demolition Landfills

J. TYPE OF OWNERSHIP
☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE

II. TENTATIVE DISPOSITION (complete this section last)

A. ESTIMATE DATE OF TENTATIVE DISPOSITION (mo., day, & yr.):
B. APPARENT SERIOUSNESS OF PROBLEM
☐ 1. HIGH ☒ 2. MEDIUM ☐ 3. LOW ☐ 4. NONE

C. PREPARER INFORMATION
1. NAME: Robert Pappenfort
2. TELEPHONE NUMBER: 314 751-3241
3. DATE (mo., day, & yr.): 12/10/79

III. INSPECTION INFORMATION

A. PRINCIPAL INSPECTOR INFORMATION
1. NAME: Mike Dowall (5/31/79) Howard Winburn (2/2/79)
2. TITLE: Environmental Specialist Environmental Engineer
3. ORGANIZATION: Mo. Department of Natural Resources
4. TELEPHONE NO. (area code & no.): 314 849-1313

B. INSPECTION PARTICIPANTS

1. NAME	2. ORGANIZATION	3. TELEPHONE NO.
Same as above.		

C. SITE REPRESENTATIVES INTERVIEWED (corporate officials, workers, residents)

1. NAME	2. TITLE & TELEPHONE NO.	3. ADDRESS
Mr. William Canney	Site Operator 314 739-1122	Rt. 1 Box 206 Bridgeton, Mo. 63042

Continued From Front

III. INSPECTION INFORMATION (continued)

D. GENERATOR INFORMATION (sources of waste)

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE GENERATED
Borden Chemical Printing Ink. Div.	314 991-2544	1185 Research St. Louis, Mo. 63132	Waste Ink, Pigment Oily Sludges, Ester A
Cheron Chemical Co.	314 432-8234	2497 Adie Road Maryland Heights, Mo. 63043	Insecticides, Herb Halogenated/Intra Aromatics, oils
Pfizer, Inc.	618-271-4800	423 West 55th Street New York, New York 10019	Wastewater Sludge From E. St. Louis O

E. TRANSPORTER/HAULER INFORMATION

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE TRANSPORTED

F. IF WASTE IS PROCESSED ON SITE AND ALSO SHIPPED TO OTHER SITES, IDENTIFY OFF-SITE FACILITIES USED FOR DISPOSAL.

1. NAME	2. TELEPHONE NO.	3. ADDRESS

G. DATE OF INSPECTION (mo., day, & yr.)	H. TIME OF INSPECTION	I. ACCESS GAINED BY: (credentials must be shown in all cases)
3/2/79 5/31/79	DAYTIME	☒ 1. PERMISSION ☐ 2. WARRANT

J. WEATHER (describe)

N/A.

IV. SAMPLING INFORMATION

A. Mark 'X' for the types of samples taken and indicate where they have been sent e.g., regional lab, other EPA lab, contractor, etc. and estimate when the results will be available.

1. SAMPLE TYPE	2. SAMPLE TAKEN (mark 'X')	3. SAMPLE SENT TO:	4. DATE RESULTS AVAILABLE
a. GROUNDWATER	X	All 9 Monitoring Wells sampled	6/12/79
b. SURFACE WATER		Four Groundwater Wells Sampled in Early 1979	See DNR File
c. WASTE			
d. AIR			
e. RUNOFF			
f. SPILL			
g. SOIL	X	33 test borings made in 1973.	See ENG. PLANS - Mo.
h. VEGETATION			
i. OTHER (specify) Leachate	1/23/78	MSD - St. Louis	See DNR File

B. FIELD MEASUREMENTS TAKEN (e.g., radioactivity, explosivity, PH, etc.)

1. TYPE	2. LOCATION OF MEASUREMENTS	3. RESULTS

Continued From Front

VI. WASTE RELATED INFORMATION (continued)

2. Estimate the amou[illegible] city unit of measure) of waste by category; mark 'X' to indicate which [illegible] are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT	AMOUNT Unknown ← →	AMOUNT	AMOUNT 4000	AMOUNT 2100	AMOUNT UNKNOWN
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE tons	UNIT OF MEASURE tons	UNIT OF MEASURE UNKNOWN
X (1) PAINT, PIGMENTS	X (1) OILY WASTES	X (1) HALOGENATED SOLVENTS	X (1) ACIDS	X (1) FLYASH	X (1) LABORATORY, PHARMACEUT.
(2) METALS SLUDGES	X (2) OTHER(specify): Int. Sludge	X (2) NON-HALOGNTD. SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER(specify):	(3) CAUSTICS	X (3) MILLING/MINE TAILINGS SLUDGE	X (3) RADIOACTIVE (Low Level)
(4) ALUMINUM SLUDGE			X (4) PESTICIDES	(4) FERROUS SMELTING WASTES	(4) MUNICIPAL
(5) OTHER(specify):			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER(specify):
			(6) CYANIDE	(6) OTHER(specify):	Waste Ore Residuals from old Cotter Corporation Laclede Avenue St. Louis, Mo.
			(7) PHENOLS		
			X (8) HALOGENS AROMATICS		
			(9) PCB		
			X (10) METALS		
			(11) OTHER(specify)		

D. LIST SUBSTANCES OF GREATEST CONCERN WHICH ARE ON THE SITE (place in descending order of hazard)

1. SUBSTANCE	2. FORM (mark 'X') a. SOLID	b. LIQ.	c. VAPOR	3. TOXICITY (mark 'X') a. HIGH	b. MED.	c. LOW	d. NONE	4. CAS NUMBER	5. AMOUNT	6. UNIT
Pesticides-Herbicide Residues	X			Unknown					4000	tons
Low Level Rad. Wastes	X			Unknown					?	tons

VIII. HAZARD DESCRIPTION

FIELD EVALUATION HAZARD DESCRIPTION: Place an 'X' in the box to indicate that the listed hazard exists. Describe the hazard in the space provided.

☐ A. HUMAN HEALTH HAZARDS

Continued From Page

IV. SAMPLING INFORMATION (continued)

C. PHOTOS

1. TYPE OF PHOTOS
   - [ ] a. GROUND
   - [x] b. AERIAL
2. PHOTOS IN CUSTODY OF: Mo. DNR - See Engineering Plans

D. SITE MAPPED?

- [x] YES. SPECIFY LOCATION OF MAPS:

E. COORDINATES

1. ~~Latitude (deg-min-sec)~~
2. ~~Longitude (deg-min-sec)~~

Sec. 13 T47N R5E St. Louis County

V. SITE INFORMATION

A. SITE STATUS

- [x] 1. ACTIVE *(Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)*
- [ ] 2. INACTIVE *(Those sites which no longer receive wastes.)*
- [ ] 3. OTHER *(specify)*: _____ *(Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)*

B. IS GENERATOR ON SITE?

- [x] 1. NO
- [ ] 2. YES *(specify generator's four-digit SIC Code)*: _____

C. AREA OF SITE *(in acres)*

Site 1 - 25 Acres
Site 2 - 13 Acres

D. ARE THERE BUILDINGS ON THE SITE?

- [ ] 1. NO
- [x] 2. YES *(specify)*: Quarry Buildings for Plant

VI. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

'X'	A. TRANSPORTER	'X'	B. STORER	'X'	C. TREATER	'X'	D. DISPOSER
	1. RAIL		1. PILE		1. FILTRATION	X	1. LANDFILL
	2. SHIP		2. SURFACE IMPOUNDMENT		2. INCINERATION		2. LANDFARM
	3. BARGE		3. DRUMS		3. VOLUME REDUCTION		3. OPEN DUMP
	4. TRUCK		4. TANK, ABOVE GROUND		4. RECYCLING/RECOVERY		4. SURFACE IMPOUNDMENT
	5. PIPELINE		5. TANK, BELOW GROUND		5. CHEM./PHYS./TREATMENT		5. MIDNIGHT DUMPING
	6. OTHER *(specify)*:		6. OTHER *(specify)*:		6. BIOLOGICAL TREATMENT		6. INCINERATION
					7. WASTE OIL REPROCESSING		7. UNDERGROUND INJECTION
					8. SOLVENT RECOVERY		8. OTHER *(specify)*:
					9. OTHER *(specify)*:		

E. SUPPLEMENTAL REPORTS: If the site falls within any of the categories listed below, Supplemental Reports must be completed. Indicate which Supplemental Reports you have filled out and attached to this for..

- [ ] 1. STORAGE
- [ ] 2. INCINERATION
- [x] 3. LANDFILL
- [ ] 4. SURFACE IMPOUNDMENT
- [ ] 5. DEEP WELL
- [ ] 6. CHEM/BIO/PHYS TREATMENT
- [ ] 7. LANDFARM
- [ ] 8. OPEN DUMP
- [ ] 9. TRANSPORTER
- [ ] 10. RECYCLOR/RECLAIMER

VII. WASTE RELATED INFORMATION

A. WASTE TYPE

- [ ] 1. LIQUID
- [x] 2. SOLID
- [x] 3. SLUDGE
- [ ] 4. GAS

B. WASTE CHARACTERISTICS

- [ ] 1. CORROSIVE
- [x] 2. IGNITABLE
- [x] 3. RADIOACTIVE
- [ ] 4. HIGHLY VOLATILE
- [x] 5. TOXIC
- [ ] 6. REACTIVE
- [ ] 7. INERT
- [ ] 8. FLAMMABLE
- [ ] 9. OTHER *(specify)*:

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

Continue On Reverse

Continued From Page 4

VIII. HAZARD DESCRIPTION (continued)

☐ N. FIRE OR EXPL

☒ O. SPILLS/LEAKING CONTAINERS/RUNOFF/STANDING LIQUID

In quarry from seepage from west wall. (2/2/79)

☒ P. SEWER, STORM DRAIN PROBLEMS

Significant Amount of Water Intrusion Occurring in the West Wall of the Quarry. (5/31/79)

☒ Q. EROSION PROBLEMS

Area near side slope near the original leachate collection wall has some erosion. (5/31/79)

☐ R. INADEQUATE SECURITY

☒ S. INCOMPATIBLE WASTES

Much non-demolition material was placed in the demolition landfill.

VIII. HAZARD DESCRIPTION (continued)

☐ T. MIDNIGHT DUMPING

☐ U. OTHER (specify):

IX. POPULATION DIRECTLY AFFECTED BY SITE

A. LOCATION OF POPULATION	B. APPROX. NO. OF PEOPLE AFFECTED	C. APPROX. NO. OF PEOPLE AFFECTED WITHIN UNIT AREA	D. APPROX. NO. OF BUILDINGS AFFECTED	E. DISTANCE TO SITE (specify units)
1. IN RESIDENTIAL AREAS	1 occupied Residence in the neighborhood			
2. IN COMMERCIAL OR INDUSTRIAL AREAS				
3. IN PUBLICLY TRAVELLED AREAS Near	Interstate 70	(4000' ±)		
4. PUBLIC USE AREAS (parks, schools, etc.)				

X. WATER AND HYDROLOGICAL DATA

A. DEPTH TO GROUNDWATER (specify unit)	B. DIRECTION OF FLOW	C. GROUNDWATER USE IN VICINITY
Water Table 440' elev	Westward to Missouri River	
D. POTENTIAL YIELD OF AQUIFER	**E. DISTANCE TO DRINKING WATER SUPPLY (specify unit of measure)**	**F. DIRECTION TO DRINKING WATER SUPPLY**
N/A	2 miles to Mo. River	West

G. TYPE OF DRINKING WATER SUPPLY

☐ 1. NON-COMMUNITY < 15 CONNECTIONS ☐ 2. COMMUNITY (specify town): > 15 CONNECTIONS _____

☒ 3. SURFACE WATER ☐ 4. WELL

Continue On Page 9

Continued From Page 8

X. WATER AND HYDROLOGICAL DATA (continued)

H. LIST ALL DRINKING WATER WELLS WITHIN A 1/4 MILE RADIUS OF SITE

1. WELL	2. DEPTH (specify unit)	3. LOCATION (proximity to population/ buildings)	4. NON-COMMUNITY (mark 'X')	5. COMMUNITY (mark 'X')
	See Missouri Geological Survey, Rolla, Mo.			

I. RECEIVING WATER

1. NAME: Missouri River

☐ 2. SEWERS ☒ 3. STREAMS/RIVERS ☐ 4. LAKES/RESERVOIRS ☐ 5. OTHER (specify):

6. SPECIFY USE AND CLASSIFICATION OF RECEIVING WATERS

XI. SOIL AND VEGITATION DATA

LOCATION OF SITE IS IN:

☐ A. KNOWN FAULT ZONE ☐ B. KARST ZONE ☒ C. ~~100 YEAR FLOOD PLAIN~~ Missouri River Alluvium ☐ D. WETLAND

☐ E. A REGULATED FLOODWAY ☐ F. CRITICAL HABITAT ☐ G. RECHARGE ZONE OR SOLE SOURCE AQUIFER

XII. TYPE OF GEOLOGICAL MATERIAL OBSERVED

Mark 'X' to indicate the type(s) of geological material observed and specify where necessary, the component parts.

'X'	A. OVERBURDEN	'X'	B. BEDROCK (specify below)	'X'	C. OTHER (specify below)
X	1. SAND - SILT (60')			X	Groundwater @ 20-30'
X	2. CLAY (Moist)				or 440' elevation
	3. GRAVEL				

XIII. SOIL PERMEABILITY

☐ A. UNKNOWN ☐ B. VERY HIGH (100,000 to 1000 cm/sec.) ☐ C. HIGH (1000 to 10 cm/sec.)

☐ D. MODERATE (10 to .1 cm/sec.) ☒ E. ~~LOW~~ HIGH (.1 to .001 cm/sec.) ☐ F. VERY LOW (.001 to .00001 cm/sec.)

G. RECHARGE AREA

☒ 1. YES ☐ 2. NO 3. COMMENTS:

H. DISCHARGE AREA

☐ 1. YES ☐ 2. NO 3. COMMENTS:

I. SLOPE

1. ESTIMATE % OF SLOPE: 50/12,000

2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.: WESTWARD

J. OTHER GEOLOGICAL DATA

 Continue On Reverse

Continued From Fro

XIV. PERMIT INFORMATION

List all applicable permits held by the site and provide the related information.

A. PERMIT TYPE (e.g., RCRA, State, NPDES, etc.)	B. ISSUING AGENCY	C. PERMIT NUMBER	D. DATE ISSUED (mo., day, & yr.)	E. EXPIRATION DATE (mo., day, & yr.)	F. IN COMPLIANCE (mark 'X') 1. YES	2. NO	3. UNKNOWN
State (25 Acres)	Mo. Dir. of Health	118903 218903	8/27/74				
State (13 Acres)	Mo. DNR	118906	1/22/79	N/A			

XV. PAST REGULATORY OR ENFORCEMENT ACTIONS

☐ NONE ☐ YES (summarize in this space)

NOTE: Based on the information in Sections III through XV, fill out the Tentative Disposition (Section II) information on the first page of this form.

LANDFILLS SITE INSPECTION REPORT
(Supplemental Report)

INSTRUCTION
Answer and Explain as Necessary.

1. EVIDENCE OF SITE INSTABILITY *(Erosion, Settling, Sink Holes, etc)*
☒ YES ☐ NO

2. EVIDENCE OF IMPROPER DISPOSAL OF BULK LIQUIDS, SEMI-SOLIDS AND SLUDGES INTO THE LANDFILL
☒ YES ☐ NO

3. CHECK RECORDS OF CELL LOCATION AND CONTENTS AND BENCHMARK
☐ YES ☒ NO

4. WASTES SURROUNDED BY SORBENT MATERIAL
☐ YES ☒ NO

5. DIVERSION STRUCTURES ARE EFFECTIVELY CONSTRUCTED AND PROPERLY MAINTAINED
☐ YES ☐ NO

6. EVIDENCE OF PONDING OF WATER ON SITE
☒ YES ☐ NO

7. EVIDENCE OF IMPROPER/INADEQUATE DRAINING
☒ YES ☐ NO

8. ADEQUATE LEACHATE COLLECTION SYSTEM *(If "Yes", specify Type)*
☐ YES ☒ NO

8a. SURFACE LEACHATE SPRING
☒ YES ☐ NO West Wall of Quarry

9. RECORDS OF LEACHATE ANALYSIS
☒ YES ☐ NO "One"

10. GAS MONITORING
☒ YES ☐ NO

11. GROUNDWATER MONITORING WELLS
☒ YES ☐ NO Total of Nine

12. ARTIFICIAL MEMBRANE LINER INSTALLED
☐ YES ☒ NO

13. SPECIFIC CONTAINMENT MEASURES *(Clay Bottom, Sides, etc)*
☒ YES ☐ NO Clay Pad (24" Compacted)

14. FIXATION *(Stabilization)* OF WASTE
☐ YES ☒ NO

15. ADEQUATE CLOSURE OF INACTIVE PORTION OF FACILITY
☐ YES ☒ NO

16. COVER *(Type)*
Daily 6" clay cover plus 24 inches final cover over filled areas.

16a. THICKNESS

16b. PERMEABILITY
Unknown

16c. DAILY APPLICATION
☒ YES ☐ NO For sanitary landfill
Once per week for demolition fill