IF THE PAGE FILMED
AS LEGIBLE AS THIS
IT IS DUE TO THE Q
OF THE ORIGINAL.

EPA

POTENTIAL HAZARDOUS WASTE SITE
FINAL STRATEGY DETERMINATION

PA | SI

REGION: 6 | SITE NUMBER: TX 15407

File this form in the regional Hazardous Waste Log File and submit a copy 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

TX D026988105

A. SITE NAME: LANE AVIATION, INC.

B. STREET: EAST SIDE OF FM 2218 AND 6 miles SW OF US 59

C. CITY: ROSENBERG

D. STATE: TEXAS

E. ZIP CODE: 77471

II. FINAL DETERMINATION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

RECOMMENDATION	NONE(S)	ACTION AGENCY: EPA	STATE	LOCAL	PRIVATE
A. NO ACTION NEEDED	X				
B. REMEDIAL ACTION NEEDED, BUT NO RESOURCES AVAILABLE. (If yes, complete Section III.)					
C. REMEDIAL ACTION (If yes, complete Section IV.)					
D. ENFORCEMENT ACTION (If yes, specify in Part E whether the case will be presently managed by the EPA or the State and what type of enforcement action is anticipated.)					

E. RATIONALE FOR FINAL STRATEGY DETERMINATION: SITE IS AN ACTIVE AERIAL APPLICATOR. THE CHEMICALS ARE PUMPED DIRECTLY TO THE PLANE AND THE RINSATES ARE REAPPLIED TO THE FIELDS. ALL CONTAINERS ARE CLEANED, CRUSHED AND DISPOSED OF PROPERLY. NO APPARENT ONSITE STAINS, SPILLS OR WASTE DISPOSAL WAS OBSERVED. NO FURTHER ACTION IS RECOMMENDED.

F. IF A CASE DEVELOPMENT PLAN HAS BEEN PREPARED, SPECIFY THE DATE PREPARED (mo., day, & yr.): 8/20/85

G. IF AN ENFORCEMENT CASE HAS BEEN FILED, SPECIFY THE DATE FILED (mo., day, & yr.): —

H. PREPARER INFORMATION

1. NAME: Nali Lacta

2. TELEPHONE NUMBER: (214) 767-9704

3. DATE (mo., day, & yr.): 8/20/85

III. REMEDIAL ACTIONS TO BE TAKEN WHEN RESOURCES BECOME AVAILABLE

List all remedial actions, such as excavation, removal, etc. to be taken as soon as resources become available. See instructions for a list of Key Words for each of the actions to be used in the spaces below. Provide an estimate of the approximate cost of the remedy.

A. REMEDIAL ACTION	B. ESTIMATED COST	C. REMARKS
	$	
	$	
	$	
	$	
	$	
	$	SUPERFUND FILE
	$	APR 23 1992
	$	REORGANIZED
D. TOTAL ESTIMATED COST	$	

EPA Form 2070-5 (10-79)

Continue On Reverse

TXD026988105

9435312

IF THE PAGE
AS LEGIBLE A
IT IS DUE TO
OF THE ORIGI

Continued From Front

IV. REMEDIAL ACTIONS

A. SHORT TERM/EMERGENCY ACTIONS (*On Site and Off-Site*): List all emergency actions taken or planned to bring the site under immediate control, e.g., restrict access, provide alternate water supply, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

1. ACTION	2. ACTION START DATE (mo., day, & yr.)	3. ACTION END DATE (mo., day, & yr.)	4. ACTION AGENCY (EPA, State, Private Party)	5. COST	6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED.
				$	
				$	
				$	
				$	
				$	
				$	

B. LONG TERM STRATEGY (*On Site and Off-Site*): List all long term solutions, e.g., excavation, removal, ground water monitoring wells, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

1. ACTION	2. ACTION START DATE (mo., day, & yr.)	3. ACTION END DATE (mo., day, & yr.)	4. ACTION AGENCY (EPA, State, Private Party)	5. COST	6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED.
				$	
				$	
				$	
				$	
				$	
				$	

C. MANHOURS AND COST BY ACTION AGENCY

1. ACTION AGENCY	2. TOTAL MAN-HOURS FOR REMEDIAL ACTIVITIES	3. TOTAL COST FOR REMEDIAL ACTIVITIES
a. EPA		$
b. STATE		$
c. PRIVATE PARTIES		$
d. OTHER (specify)		$