EPA

POTENTIAL HAZARDOUS WASTE SITE
IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION: IV

SITE NUMBER (to be assigned by Hq)

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (*Preliminary Assessment*). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection [illegible] Hazardous Waste Enforcement Task Force (*EN-335*); 401 M St., SW; Washington, DC 20460.

KYD980557177 HARRISON
NO NAME Harrison County Site
RT 2, CURRY RUN RD
CYNTHIANA KY 41031
MACLEOD, KEN, REPORTER 6062554404

I. IDENTIFICATION

STREET (or other identifier)

D. STATE | E. ZIP CODE | F. COUNTY NAME

2. TELEPHONE NUMBER

H. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE ☐ 6. UNKNOWN

"103-C NOTIFICATION" DATE: 810609
CARL SCHROEDER
PHONE: 502-564-6716

K. DATE IDENTIFIED (mo., day, & yr.)

2. TELEPHONE NUMBER

II. PRELIMINARY ASSESSMENT (Complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☒ 2. MEDIUM ☐ 3. LOW ☐ 4. NONE ☐ 5. UNKNOWN

B. RECOMMENDATION

☐ 1. NO ACTION NEEDED (*no hazard*)

☒ 3. SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:
b. WILL BE PERFORMED BY:
5/21/82 - Ecology + Env.
5/11/81 - KY DNREP

☐ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:
b. WILL BE PERFORMED BY:

☐ 4. SITE INSPECTION NEEDED (*low priority*)

C. PREPARER INFORMATION

1. NAME: Shane Hitchcock
2. TELEPHONE NUMBER: 404/881-2234
3. DATE (mo., day, & yr.): 9/17/82

III. SITE INFORMATION

A. SITE STATUS

☐ 1. ACTIVE (*Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if intermittently.*)

☒ 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?

☒ 1. NO ☐ 2. YES (*specify generator's four-digit SIC Code*):

C. AREA OF SITE (*in acres*): ~ 2 acres

D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES

1. LATITUDE (*deg.—min.—sec.*)
2. LONGITUDE (*deg.—min.—sec.*)

E. ARE THERE BUILDINGS ON THE SITE?

☐ 1. NO ☒ 2. YES (*specify*): shed, barn, abandoned house

T2070-2 (10-79)

Continue On Reverse

Continued From Front

IV. 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		1. LANDFILL
	2. SHIP		2. SURFACE IMPOUNDMENT		2. INCINERATION		2. LANDFARM
	3. BARGE	X	3. DRUMS		3. VOLUME REDUCTION	X	3. OPEN DUMP
X	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	X	8. OTHER (specify): open trench containing liquid & sediment
					9. OTHER (specify):		

E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

V. WASTE RELATED INFORMATION

A. WASTE TYPE

[ ] 1 UNKNOWN [X] 2 LIQUID [X] 3. SOLID [X] 4. SLUDGE [ ] 5. GAS

B. WASTE CHARACTERISTICS

[ ] 1. UNKNOWN [ ] 2. CORROSIVE [X] 3. IGNITABLE [ ] 4 RADIOACTIVE [X] 5 HIGHLY VOLATILE
[X] 6 TOXIC [ ] 7 REACTIVE [ ] 8 INERT [ ] 9 FLAMMABLE

[ ] 10. OTHER (specify):

C. WASTE CATEGORIES

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

No

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT 3000	AMOUNT	AMOUNT 1400	AMOUNT	AMOUNT 1900	AMOUNT
UNIT OF MEASURE gal	UNIT OF MEASURE	UNIT OF MEASURE gal	UNIT OF MEASURE	UNIT OF MEASURE gal	UNIT OF MEASURE
X (1) PAINT, PIGMENTS	(1) OILY WASTES	X (1) HALOGENATED SOLVENTS	(1) ACIDS	X (1) FLYASH	X (1) LABORATORY PHARMACEUT.
(2) METALS SLUDGES	(2) OTHER (specify):	X (2) NON-HALOGNTD. SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER (specify)	(3) CAUSTICS	(3) MILLING/ MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMLTG. WASTES	(4) MUNICIPAL
(5) OTHER (specify):			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER (specify):
			(6) CYANIDE	X (6) OTHER (specify): various resins	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			(10) METALS		
			(11) OTHER (specify)		

 Continue On Page 3

Continued From Page 2

V. WASTE RELATED INFORMATION (continued)

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

PCB's
Phenol
Naphthalene
Styrene

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

VI. HAZARD DESCRIPTION

A. TYPE OF HAZARD	B. POTENTIAL HAZARD (mark 'X')	C. ALLEGED INCIDENT (mark 'X')	D. DATE OF INCIDENT (mo., day, yr.)	E. REMARKS
1. NO HAZARD				
2. HUMAN HEALTH				
3. NON-WORKER INJURY/EXPOSURE	X			
4. WORKER INJURY				
5. CONTAMINATION OF WATER SUPPLY				
6. CONTAMINATION OF FOOD CHAIN				
7. CONTAMINATION OF GROUND WATER	X			
8. CONTAMINATION OF SURFACE WATER			X 4/19-22/82	
9. DAMAGE TO FLORA/FAUNA				
10. FISH KILL				
11. CONTAMINATION OF AIR				
12. NOTICEABLE ODORS			X	Continuous complaints by residences.
13. CONTAMINATION OF SOIL			X	
14. PROPERTY DAMAGE				
15. FIRE OR EXPLOSION	X			
16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS			X	
17. SEWER, STORM DRAIN PROBLEMS				
18. EROSION PROBLEMS				
19. INADEQUATE SECURITY			X	No control of access
20. INCOMPATIBLE WASTES				
21. MIDNIGHT DUMPING				
22. OTHER (specify):				

Continue On Reverse

Continued From Front

VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

- [ ] 1. NPDES PERMIT
- [ ] 2. SPCC PLAN
- [ ] 3. STATE PERMIT *(specify)*: _____
- [ ] 4. AIR PERMITS
- [ ] 5. LOCAL PERMIT
- [ ] 6. RCRA TRANSPORTER
- [ ] 7. RCRA STORER
- [ ] 8. RCRA TREATER
- [ ] 9. RCRA DISPOSER
- [ ] 10. OTHER *(specify)*: _____

B. IN COMPLIANCE?

- [ ] 1. YES
- [ ] 2. NO
- [ ] 3. UNKNOWN

4. WITH RESPECT TO *(list regulation name & number)*: _____

VIII. PAST REGULATORY ACTIONS

- [ ] A. NONE
- [x] B. YES *(summarize below)*

operations were closed by KYDNREP and Harrison County Health Dept. in 1973. KYDNREP is proposing an enforcement action against the generator, Fremont Chemical.

IX. INSPECTION ACTIVITY *(past or on-going)*

- [ ] A. NONE
- [ ] B. YES *(complete items 1,2,3, & 4 below)*

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION
sampling investigation	5/21/81 3/15-16/82	EPA/	
	9/16/81 6/11/81	State	

X. REMEDIAL ACTIVITY *(past or on-going)*

- [ ] A. NONE
- [ ] B. YES *(complete items 1, 2, 3, & 4 below)*

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment *(Section II)* information on the first page of this form.

EPA

ENTIAL HAZARDOUS WASTE SITE
TENTATIVE DISPOSITION

REGION	SITE NUMBER
IV	KYD006395694

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

A. SITE NAME	B. STREET	
Corning Glass Works Danville Plt	Vaksdahl Ave	
C. CITY	D. STATE	E. ZIP CODE
Danville	KY	40422

II. TENTATIVE DISPOSITION

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

RECOMMENDATION	MARK 'X'	ACTION AGENCY: EPA	STATE	LOCAL	PRIVATE
A. NO ACTION NEEDED -- NO HAZARD					
B. INVESTIGATIVE ACTION(S) NEEDED (If yes, complete Section III.)	X	X			
C. REMEDIAL ACTION NEEDED (If yes, complete Section IV.)					
D. ENFORCEMENT ACTION NEEDED (If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.)					

E. RATIONALE FOR DISPOSITION

Site is in the (5-84) process of closure under RCRA.
This site has interim status

F. INDICATE THE ESTIMATED DATE OF FINAL DISPOSITION (mo., day, & yr.)	G. IF A CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE THE ESTIMATED DATE ON WHICH THE PLAN WILL BE DEVELOPED (mo., day, & yr.)

H. PREPARER INFORMATION

1. NAME	2. TELEPHONE NUMBER	3. DATE (mo., day, & yr.)

III. INVESTIGATIVE ACTIVITY NEEDED

A. IDENTIFY ADDITIONAL INFORMATION NEEDED TO ACHIEVE A FINAL DISPOSITION.

This should be kept open until proper closure has been verified. (RCRA, State or by S. inspection)

B. PROPOSED INVESTIGATIVE ACTIVITY (Detailed Information)

1. METHOD FOR OBTAINING NEEDED ADDITIONAL INFO.	2. SCHEDULED DATE OF ACTION (mo, day, & yr)	3. TO BE PERFORMED BY (EPA, Contractor, State, etc.)	4. ESTIMATED MANHOURS	5. REMARKS
a. TYPE OF SITE INSPECTION				
(1)				
(2)				
(3)				
b. TYPE OF MONITORING				
(1)				
(2)				
c. TYPE OF SAMPLING				
(1)				
(2)				

EPA

POTENTIAL HAZARDOUS WASTE SITE
IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION: IV

SITE NUMBER (to be assigned by HQ):

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (*Preliminary Assessment*). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Force (*EN-335*); 401 M St., SW; Washington, DC 20460.

KYD006395644 BOYLE
CORNING GLASS WORKS/DANVILLE PLANT
VAKSDAHL AVE
DANVILLE KY 40422
PIGNATO, WILLIAM, ENV. E# 6079746204

FICATION

STREET (for other identifier)

STATE | E. ZIP CODE | F. COUNTY NAME

2. TELEPHONE NUMBER

H. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE ☐ 6. UNKNOWN

"103-C NOTIFICATION" DATE: 810608
CARL SCHROEDER
PHONE: 502-564-6716

K. DATE IDENTIFIED (mo., day, & yr.)

2. TELEPHONE NUMBER

II. PRELIMINARY ASSESSMENT (complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☒ 2. MEDIUM ☐ 3. LOW ☐ 4. NONE ☐ 5. UNKNOWN

B. RECOMMENDATION

☐ 1. NO ACTION NEEDED (*no hazard*)

☐ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:
b. WILL BE PERFORMED BY:

☐ 3. SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:
b. WILL BE PERFORMED BY: March 9, 1982 (State)

☐ 4. SITE INSPECTION NEEDED (*low priority*)

C. PREPARER INFORMATION
1. NAME: B. Shane Hitchcock
2. TELEPHONE NUMBER: 404/882-2234
3. DATE (mo., day, & yr.): 9/16/82

III. SITE INFORMATION

A. SITE STATUS

☒ 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?

☐ 1. NO ☒ 2. YES (*specify generator's four-digit SIC Code*): 3229

C. AREA OF SITE (*in acres*)

D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES
1. LATITUDE (*deg.-min.-sec.*)
2. LONGITUDE (*deg.-min.-sec.*)

E. ARE THERE BUILDINGS ON THE SITE?

☒ 1. NO ☐ 2. YES (*specify*):

T2070-2 (10-79)

Continue On Reverse

Continued From Front

IV. 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	X	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	X	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. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

V. WASTE RELATED INFORMATION

A. WASTE TYPE

[ ] 1 UNKNOWN [ ] 2 LIQUID [X] 3 SOLID [X] 4 SLUDGE [ ] 5 GAS

B. WASTE CHARACTERISTICS

[ ] 1 UNKNOWN [ ] 2 CORROSIVE [ ] 3 IGNITABLE [ ] 4 RADIOACTIVE [ ] 5 HIGHLY VOLATILE
[X] 6 TOXIC [ ] 7 REACTIVE [ ] 8 INERT [ ] 9 FLAMMABLE

[ ] 10 OTHER (specify):

C. WASTE CATEGORIES

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

Yes - NOTIS Printout

2. Estimate the amount (specify unit of measure) of waste by category, mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT: Unknown	AMOUNT	AMOUNT	AMOUNT	AMOUNT: 160,000 ~~Unknown~~	AMOUNT
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE: Cu. ft.	UNIT OF MEASURE
X (1) PAINT, PIGMENTS	X (1) OILY WASTES	X (1) HALOGENATED SOLVENTS	X (1) ACIDS	X (1) FLYASH	X (1) LABORATORY PHARMACEUT.
X (2) METALS SLUDGES	(2) OTHER (specify)	(2) NON-HALOGNT(.) SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER (specify)	(3) CAUSTICS	(3) MILLING/ MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMLTG. WASTES	(4) MUNICIPAL
(5) OTHER (specify):			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER (specify):
			(6) CYANIDE	(6) OTHER (specify): Corrosive fluoride Salts	
			(7) PHENOLS	General Inorganics	
			(8) HALOGENS	Lime glass Dust	
			(9) PCB		
			(10) METALS		
			(11) OTHER (specify)		

 Continue On Page 3

Continued From Page 2

V. WASTE RELATED INFORMATION (continued)

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

Lead
Arsenic
Neutralized & fluoride Wastes

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

Glass manufacturing contaminated with lead and arsenic.

VI. HAZARD DESCRIPTION

A. TYPE OF HAZARD	B. POTENTIAL HAZARD (mark 'X')	C. ALLEGED INCIDENT (mark 'X')	D. DATE OF INCIDENT (mo., day, yr.)	E. REMARKS
1. NO HAZARD				
2. HUMAN HEALTH				
3. NON-WORKER INJURY/EXPOSURE				
4. WORKER INJURY				
5. CONTAMINATION OF WATER SUPPLY				
6. CONTAMINATION OF FOOD CHAIN				
7. CONTAMINATION OF GROUND WATER				
8. CONTAMINATION OF SURFACE WATER			X (Date unknown)	Stream sediment and Runoff contaminated w/ lead & arsenic
9. DAMAGE TO FLORA/FAUNA				
10. FISH KILL				
11. CONTAMINATION OF AIR				
12. NOTICEABLE ODORS				
13. CONTAMINATION OF SOIL				
14. PROPERTY DAMAGE				
15. FIRE OR EXPLOSION				
16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS				
17. SEWER, STORM DRAIN PROBLEMS			X	
18. EROSION PROBLEMS				
19. INADEQUATE SECURITY			X	
20. INCOMPATIBLE WASTES				
21. MIDNIGHT DUMPING				
22. OTHER (specify):				

 Continue On Reverse

Continued From Front

VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

- [x] 1. NPDES PERMIT
- [ ] 2. SPCC PLAN
- [x] 3. STATE PERMIT (specify) Solid Waste Landfill
- [x] 4. AIR PERMITS
- [ ] 5. LOCAL PERMIT
- [ ] 6. RCRA TRANSPORTER
- [ ] 7. RCRA STORER
- [ ] 8. RCRA TREATER
- [ ] 9. RCRA DISPOSER
- [ ] 10. OTHER (specify): _____

B. IN COMPLIANCE?

- [x] 1. YES
- [ ] 2. NO
- [ ] 3. UNKNOWN

4. WITH RESPECT TO (list regulation name & number): _____

VIII. PAST REGULATORY ACTIONS

- [ ] A. NONE
- [ ] B. YES (summarize below)

IX. INSPECTION ACTIVITY (past or on-going)

- [ ] A. NONE
- [ ] B. YES (complete items 1,2,3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION
Site Inspection	3-9-82	State	Site Inspection form submitted

X. REMEDIAL ACTIVITY (past or on-going)

- [ ] A. NONE
- [ ] B. YES (complete items 1, 2, 3, & 4 below)

1. TYPE OF ACTIVITY	2. DATE OF PAST ACTION (mo., day, & yr.)	3. PERFORMED BY: (EPA/State)	4. DESCRIPTION

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (*Section II*) information on the first page of this form.

RCRA facility
N. F. A 8/30/84

MEMORANDUM

TO: Caroline P. Haight, Manager PH
Permit Review Branch

FROM: Barry Burrus, Chief BB
Uncontrolled Sites Section

DATE: May 31, 1984

SUBJECT: Uncontrolled Site Close-out for the Corning Glass works site - Boyle County EPA#KYD006395644

The Corning Glass Works Site, located on Southern Railway property, has been unoffically closed since 1981. It was operated by Corning Glass Works between 1969 and 1981. The company has recently been bought by North American Philips Company which is the reason they are listed as operator on the Preliminary Assessment form in Part III, Section 07.

The facility was a CERCLA referral, having interim status regulated by part A of the Federal Hazardous Waste Facility permit. They are now in the process of applying for their part B with the KNREPC. They were entered onto the ERRIS list because of their classification as a hazardous waste facility.

A potentially hazardous condition did exist at this site during its operation. In order to allow drainage for a new section of the landfill the company excavated a ditch which traversed the width of the old section of landfilled area. This allowed run-off to come in contact with the waste material resulting in contamination of both water and sediment found in the creek located at the toe of the landfill. A recent site investigation conducted by KNREPC personnel (5/23/84) included a visual survey of the old landfill area. At the time of the investigation grade work was being done on the site to correct the existing drainage problems. An inspection of the creek bordering the toe of the landfill was made and no evidence was found in this area of leachate leaving the site. During the time of the site investigation, surface (soil) condition was wet since it had rained the day and night prior to the inspection. If any leachate was leaving the site it should have been evident due to the weather conditions.

Presently, the site is being regulated by the RCRA program and proper closure should be forthcoming. Division files indicated that core samples were taken by H.C. Nutting Co. of Cinncinnati, Ohio. The sample analysis of the type soil being used as fill material for the landfill showed permeability ratings exceeding those required by the State for proper closure (1×10^{-7} cm/sec). The emplacement of this fill material along with proper slope and revegetation would prohibit excessive infiltration of surface water into the landfill which would further assure that leachate generation would be no problem.

In view of the aforementioned, I am recommending that no further action be taken on this site and further recommend that it be removed from the uncontrolled site list.

cc: Hannah Leonard
EPA
File

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE: Ky | 02 SITE NUMBER: D006395644

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site): Corning Glass Works

02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER: Box 88 Vaksdahl Ave.

03 CITY: Danville

04 STATE: Ky | 05 ZIP CODE: 40422 | 06 COUNTY: Boyle | 07 COUNTY CODE: 011 | 08 CONG DIST:

09 COORDINATES LATITUDE: 37° 38' 33".0 | LONGITUDE: 84° 47' 16".0

10 DIRECTIONS TO SITE (Starting from nearest public road): Enter Danville via US Hwy 127S. Go through US Hwy 127 and Main St. intersection. Travel one block south on Main and make a right turn onto Walnut St.. Proceed on Walnut St. for approximately .5 mi.. Turn left onto Vaksdahl ave.. The site is located behind Corning Glass Works (now North American Philips Company) plant.

III. RESPONSIBLE PARTIES

01 OWNER (If known): Southern Railway System

02 STREET (Business, mailing, residential):

03 CITY: Somerset

04 STATE: Ky | 05 ZIP CODE: 42422 | 06 TELEPHONE NUMBER: (606) 678-4486

07 OPERATOR (If known and different from owner): North American Philips Co.

08 STREET (Business, mailing, residential): Vaksdahl Ave.

09 CITY: Danville

10 STATE: Ky | 11 ZIP CODE: 40422 | 12 TELEPHONE NUMBER: (606) 236-3100

13 TYPE OF OWNERSHIP (Check one): ☒ A. PRIVATE ☐ B. FEDERAL: _____ (Agency name) ☐ C. STATE ☐ D. COUNTY ☐ E. MUNICIPAL ☐ F. OTHER: _____ (Specify) ☐ G. UNKNOWN

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply): ☐ A. RCRA 3001 DATE RECEIVED: / / (MONTH DAY YEAR) ☒ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: 8 / ? / 80 (MONTH DAY YEAR) ☐ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION: ☒ YES DATE 5 / 23 / 84 (MONTH DAY YEAR) ☐ NO

BY (Check all that apply): ☐ A. EPA ☐ B. EPA CONTRACTOR ☒ C. STATE ☐ D. OTHER CONTRACTOR ☐ E. LOCAL HEALTH OFFICIAL ☐ F. OTHER: _____ (Specify)

CONTRACTOR NAME(S): _____

02 SITE STATUS (Check one): ☐ A. ACTIVE ☒ B. INACTIVE ☐ C. UNKNOWN

03 YEARS OF OPERATION: 1969 (BEGINNING YEAR) | 1981 (ENDING YEAR) ☐ UNKNOWN

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED:
Arsenic
Lead
Barium
Chromium

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION:
N/A

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents): ☐ A. HIGH (Inspection required promptly) ☐ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on time available basis) ☒ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT: Hannah Leonard (Field Supervisor) | 02 OF (Agency/Organization): Div. of Waste Mgmt. (Frankfort Field office) | 03 TELEPHONE NUMBER: (502) 564-6716

04 PERSON RESPONSIBLE FOR ASSESSMENT: Jim Childers (Geologist) | 05 AGENCY: Env. Protection | 06 ORGANIZATION: Div. of Waste Mgmt. | 07 TELEPHONE NUMBER: (502) 564-6716 | 08 DATE: 5 / 23 / 84 (MONTH DAY YEAR)

EPA FORM 2070-12 (7-81)

EPA

POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT
PART 2 - WASTE INFORMATION

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
KY	D006395644

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES (Check all that apply)

✓ A SOLID
B POWDER FINES
C SLUDGE
D OTHER _____ (Specify)
E SLURRY
F LIQUID
G GAS

02 WASTE QUANTITY AT SITE (Measures of waste quantities must be independent)

TONS _____
CUBIC YARDS 17,520
NO OF DRUMS _____

03 WASTE CHARACTERISTICS (Check all that apply)

✓ A TOXIC
B CORROSIVE
C RADIOACTIVE
D PERSISTENT
E SOLUBLE
F INFECTIOUS
G FLAMMABLE
H IGNITABLE
I HIGHLY VOLATILE
J EXPLOSIVE
K REACTIVE
L INCOMPATIBLE
M NOT APPLICABLE

III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE			The waste material is contain-ed in a landfill which is pres-ently being closed by the facility. The RCRA program is regulating the closure activities.
OLW	OILY WASTE			
SOL	SOLVENTS			
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS			
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS	Unknown	N/A	

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

01 CATEGORY	02 SUBSTANCE NAME	03 CAS NUMBER	04 STORAGE/DISPOSAL METHOD	05 CONCENTRATION	06 MEASURE OF CONCENTRATION
	N/A				

V. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS	Arsenic	7440-38-2	FDS		
FDS	Barium	7440-39-3	FDS		
FDS	Lead	7439-92-1	FDS		
FDS	Chromium	7440-47-3	FDS		

VI. SOURCES OF INFORMATION (Include specific references, e.g., state files, sample analysis, reports)

KNREPC's: Division of Waste Management files
The MERCK Index: ninth edition
Site Investigation of 5/23/84

EPA FORM 2070-12 (7-81)

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
KY	D006395644

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ B. SURFACE WATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ C. CONTAMINATION OF AIR
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ E. DIRECT CONTACT
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ F. CONTAMINATION OF SOIL
03 AREA POTENTIALLY AFFECTED: _____ (Acres)
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ G. DRINKING WATER CONTAMINATION
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ H. WORKER EXPOSURE/INJURY
03 WORKERS POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ I. POPULATION EXPOSURE/INJURY
03 POPULATION POTENTIALLY AFFECTED: _____
02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

EPA

POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION
01 STATE: KY | 02 SITE NUMBER: D006395644

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ K. DAMAGE TO FAUNA — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION (Include name(s) of species)

N/A

01 ☐ L. CONTAMINATION OF FOOD CHAIN — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES (Spills/runoff/standing liquids/leaking drums) — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

N/A

01 ☐ N. DAMAGE TO OFFSITE PROPERTY — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING — 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
04 NARRATIVE DESCRIPTION

N/A

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

N/A

III. TOTAL POPULATION POTENTIALLY AFFECTED: N/A

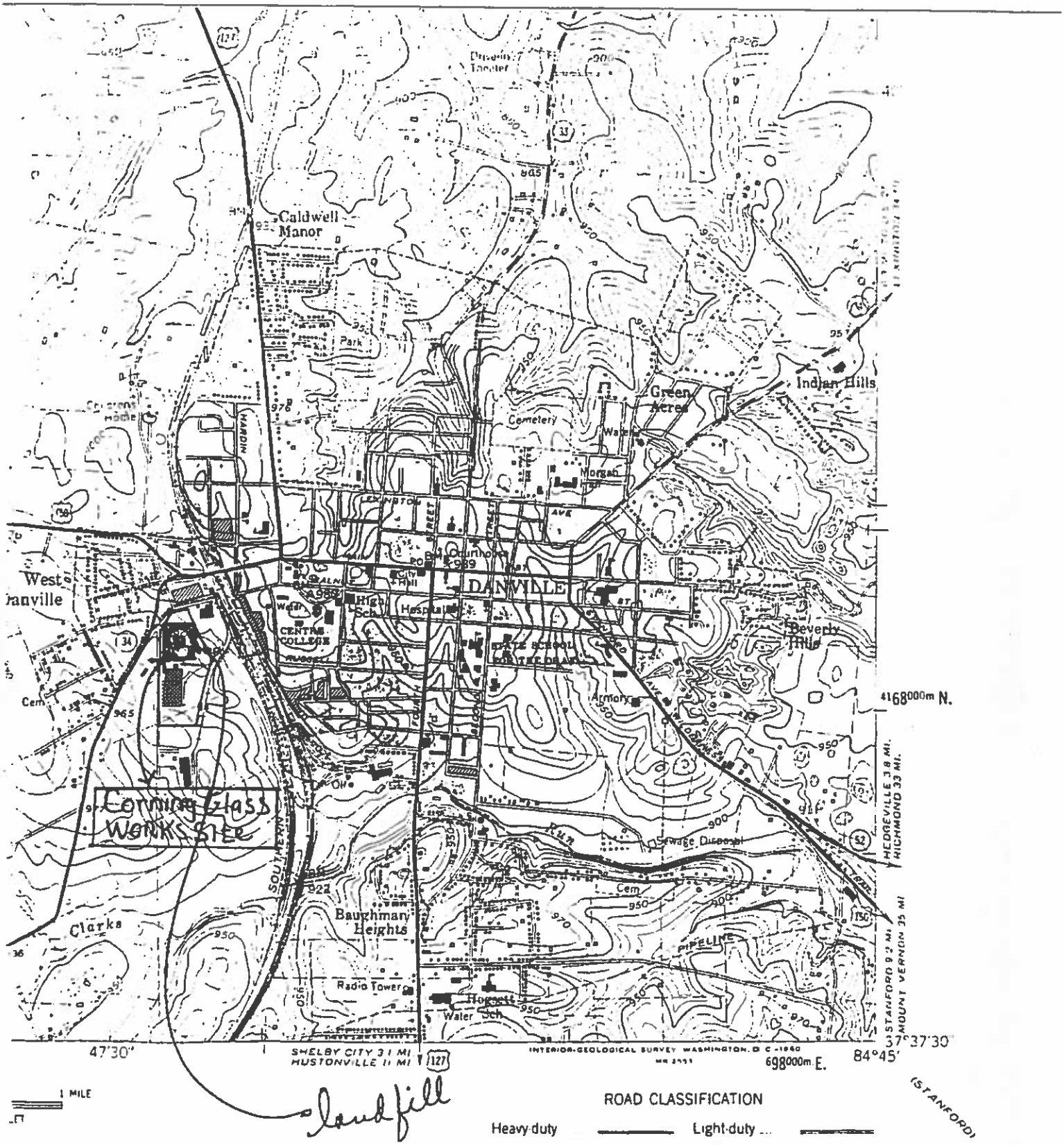
IV. COMMENTS

The facility was a CERCLA referral, having interim status regulated by part "A" of the Federal Hazardous Waste facility permit. They were enter on the ERRIS list because of their classification as a hazardous waste facility. They are now in the process of applying for their Part "B" with the KNREPC.

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

KYNREPC's: Division of Waste Management files
Site Visit of 5/23/84

EPA FORM 2070-12 (7-81)


Caldwell Manor
Park
Cemetery
Green Acres
Indian Hills
Morgan
DANVILLE
West Danville
CENTRE COLLEGE
Hospital
Beverly Hills
Armory
Corning Glass Works Site
Sewage Disposal
Run
Cem
Baughman Heights
Clarks
Radio Tower
Hogsett
Water Sch
PIPELINE
SOUTHERN
HARDIN
4168000m N.
HEDGEVILLE 3.8 MI.
RICHMOND 33 MI.
STANFORD 9.2 MI.
MOUNT VERNON 35 MI.
47'30"
SHELBY CITY 3.1 MI
HUSTONVILLE 11 MI
INTERIOR-GEOLOGICAL SURVEY WASHINGTON, D.C.-1960
698000m E.
37°37'30"
84°45'
(STANFORD)
1 MILE
landfill
ROAD CLASSIFICATION
Heavy-duty
Light-duty
Medium-duty
Unimproved dirt
U.S. Route
State Route
N
KENTUCKY
QUADRANGLE LOCATION
DANVILLE, KY.
NE/4 DANVILLE 15' QUADRANGLE
N3737.5—W8445/7.5
1959

EPA

POTENTIAL HAZARDOUS WASTE SITE SITE INSPECTION REPORT

REGION	SITE NUMBER (to be assigned by HQ)
	KYD006395644

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	B. STREET (or other identifier)		
Corning Glass Works	Vaksdahl Avenue		
C. CITY	**D. STATE**	**E. ZIP CODE**	**F. COUNTY NAME**
Danville	KY		Boyle

G. SITE OPERATOR INFORMATION

1. NAME	2. TELEPHONE NUMBER		
Corning Glass Works	(606)236-3100		
3. STREET	**4. CITY**	**5. STATE**	**6. ZIP CODE**
Vaksdahl Avenue	Danville	KY	40422

H. REALTY OWNER INFORMATION *(if different from operator of site)*

1. NAME	2. TELEPHONE NUMBER	
3. CITY	**4. STATE**	**5. ZIP CODE**

I. SITE DESCRIPTION

On-site landfill used by Corning. Site is bordered by the plant and a small drainage creek.

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	2. TELEPHONE NUMBER	3. DATE (mo., day, & yr.)
Hannah Leonard	(502) 564-6716	5/5/92

III. INSPECTION INFORMATION

A. PRINCIPAL INSPECTOR INFORMATION

1. NAME	2. TITLE
Hannah Leonard	Environmental Supervisor
3. ORGANIZATION	**4. TELEPHONE NO. (area code & no.)**
KY DNREP/Division of Waste Mgmt.	(502) 564-6716

B. INSPECTION PARTICIPANTS

1. NAME	2. ORGANIZATION	3. TELEPHONE NO.
Hannah Leonard	KYDNREP/ Div of Waste Management	502-564-6716

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

1. NAME	2. TITLE & TELEPHONE NO.	3. ADDRESS
Dick Colyer	Chemist (606) 236-3100	Corning Glass Works 7 Vaksdahl Ave., Danville

Continued From Front

INSPECTION INFORMATION *(continued)*

D. GENERATOR INFORMATION *(sources of waste)*

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE GENERATED
Corning Glass	(606)236-3100	Vaksdahl Ave., Danville	Glass manufacturing

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)*
3-9-82	10:00	[x] 1. PERMISSION [ ] 2. WARRANT

J. WEATHER *(describe)*

Sunny Spring day

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			
b. SURFACE WATER			
c. WASTE			
d. AIR			
e. RUNOFF	X	Bureau of Environmental Protection Lab	Currently Available
f. SPILL			
g. SOIL			
h. VEGETATION			
i. OTHER *(specify)* Sediment	X	T. M. Regan	Current Available

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

1. TYPE	2. LOCATION OF MEASUREMENTS	3. RESULTS

Continue On Page 3

Continued From Page 2

IV. SAMPLING INFORMATION (continued)

C. PHOTOS

1. TYPE OF PHOTOS
   - [ ] a. GROUND
   - [ ] b. AERIAL
2. PHOTOS IN CUSTODY OF:

D. SITE MAPPED?

[X] YES. SPECIFY LOCATION OF MAPS: Div.Waste Mgmt. Files

E. COORDINATES

1. LATITUDE (deg.-min.-sec.)
2. LONGITUDE (deg.-min.-sec.)

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 intrequently.)
- [ ] 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?

- [ ] 1. NO
- [X] 2. YES (specify generator's four-digit SIC Code): 3229

C. AREA OF SITE (in acres)

D. ARE THERE BUILDINGS ON THE SITE?

- [X] 1. NO
- [ ] 2. YES (specify):

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	X	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	X	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
- [ ] 2. IGNITABLE
- [ ] 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 Front

VII. SITE RELATED INFORMATION *(continued)*

2. Estimate the amount *(specify unit of measure)* of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT 160,000 cu ft	AMOUNT
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE cu. ft.	UNIT OF MEASURE
[ ] (1) PAINT, PIGMENTS	[ ] (1) OILY WASTES	[ ] (1) HALOGENATED SOLVENTS	[ ] (1) ACIDS	[ ] (1) FLYASH	[ ] (1) LABORATORY, PHARMACEUT.
[X] (2) METALS SLUDGES	[ ] (2) OTHER *(specify)*:	[ ] (2) NON-HALOGNTD. SOLVENTS	[ ] (2) PICKLING LIQUORS	[ ] (2) ASBESTOS	[ ] (2) HOSPITAL
[ ] (3) POTW		[ ] (3) OTHER *(specify)*:	[ ] (3) CAUSTICS	[ ] (3) MILLING/MINE TAILINGS	[ ] (3) RADIOACTIVE
[ ] (4) ALUMINUM SLUDGE			[ ] (4) PESTICIDES	[ ] (4) FERROUS SMELTING WASTES	[ ] (4) MUNICIPAL
[ ] (5) OTHER *(specify)*:			[ ] (5) DYES/INKS	[ ] (5) NON-FERROUS SMLTG. WASTES	[ ] (5) OTHER *(specify)*:
			[ ] (6) CYANIDE	[X] (6) OTHER *(specify)*: Lime glass dust Corrosive fluoride salts	
			[ ] (7) PHENOLS		
			[ ] (8) HALOGENS		
			[ ] (9) PCB		
			[ ] (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')*			3. TOXICITY *(mark 'X')*				4. CAS NUMBER	5. AMOUNT	6. UNIT
	a. SOLID	b. LIQ.	c. VAPOR	a. HIGH	b. MED.	c. LOW	d. NONE			
Glass manufacturing wastes contaminated with lead and arsenic	X			X					160,000.	cu. ft
Neutralized flouride waste	X									

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 4

VIII. HAZARD DESCRIPTION (continued)

☐ B. NON-WORKER INJURY/EXPOSURE

☐ C. WORKER INJURY/EXPOSURE

☐ D. CONTAMINATION OF WATER SUPPLY

☐ E. CONTAMINATION OF FOOD CHAIN

☐ F. CONTAMINATION OF GROUND WATER

☒ G. CONTAMINATION OF SURFACE WATER

One documented occurance of runoff contaminated with lead and arsenic which would have entered drainage creek at the base of the site.

 Continue On Reverse

Continued From Front

III. HAZARD DESCRIPTION (continued)

☐ H. DAMAGE TO FLORA/FAUNA

☐ I. FISH KILL

☐ J. CONTAMINATION OF AIR

☐ K. NOTICEABLE ODORS

☒ L. CONTAMINATION OF SOIL

Soil associated with the landfill is likely to be contaminated.

☐ M. PROPERTY DAMAGE

 Continue On Page 7

Continued From Page 6

VIII. HAZARD DESCRIPTION (contin

[ ] N. FIRE OR EXPLOSION

[ ] O. SPILLS/LEAKING CONTAINERS/RUNOFF/STANDING LIQUID

[ ] P. SEWER, STORM DRAIN PROBLEMS

[X] Q. EROSION PROBLEMS

Site is beginning to erode; however, the state is working with Corning to correct these problems under their permit specifications.

[X] R. INADEQUATE SECURITY

There is no access controls at this time. If their proposed expansion is approved, fencing will be required.

[ ] S. INCOMPATIBLE WASTES

Continue On Reverse

VIII. HAZARD DESCRIPTION (continued)

☐ T. MIDNIGHT DUMPING

☒ U. OTHER (specify):

STREAM SEDIMENT SAMPLES SHOW 645 ppm - 949 ppm (Wet Wt. Basis) Pb and 1.90 - 14.6 ppm As BELOW THE SITE.

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	distance to nearest dwelling - ~500'	~855 people - 1mi. radius ~2090 people - 2mi. radius	1 mi. - 225 dwellings 2 mi - 550 dwellings	
2. IN COMMERCIAL OR INDUSTRIAL AREAS	distance to nearest offsite bldg. - ~200'		2mi. - 736 buildings	
3. IN PUBLICLY TRAVELLED AREAS	heavily travelled area, people affected unknown			
4. PUBLIC USE AREAS (parks, schools, etc.)	1 State School for the Deaf, Pioneer Playhouse 2, hospital 1 1 Centre College, numerous primary/secondary schools			

X. WATER AND HYDROLOGICAL DATA

A. DEPTH TO GROUNDWATER (specify unit)	B. DIRECTION OF FLOW	C. GROUNDWATER USE IN VICINITY
20'- 50'	northeast	none
D. POTENTIAL YIELD OF AQUIFER	**E. DISTANCE TO DRINKING WATER SUPPLY (specify unit of measure)**	**F. DIRECTION TO DRINKING WATER SUPPLY**
100 - 500 GPD		

G. TYPE OF DRINKING WATER SUPPLY

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

☐ 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')

I. RECEIVING WATER

1. NAME: Clear Run

☐ 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 ☐ 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)
	1. SAND	X	limestone		
	2. CLAY				
	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 (.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: at contact zone

I. SLOPE

1. ESTIMATE % OF SLOPE: 4%

2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.: slope to east

J. OTHER GEOLOGICAL DATA

Site lies at contact and within Tanglewood Limestone and Grier Limestone Members of the Lexington Limestone. Many springs issue from this contact.

 Continue On Reverse

Continued From Front

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 -Landfill	KYDNREP	011.00				X	
NPDES	federal	KY0002607	10-29-80	8-30-82		X	
State- Air	KYDNREP	0-01-10	1-01	none	X		

XV. PAST REGULATORY OR ENFORCEMENT ACTIONS

☐ NONE ☒ YES (summarize in this space)

Not familiar with NPDES regulatory actions.

Corning landfill is currently operating off the permitted area. State is working with the facility to permit a new area. Site is permitted to accept non-hazardous waste; however, a sample of runoff from the site taken 10-01 showed unacceptable levels of lead arsenic and flourides.

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.

EPA

POTENTIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT

REGION:

SITE NUMBER (to be assigned by Hq): KYD063956644

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: Corning Glass Works

B. STREET (or other identifier): Vaksdahl Avenue

C. CITY: Danville

D. STATE: KY

E. ZIP CODE:

F. COUNTY NAME: Boyle

G. SITE OPERATOR INFORMATION

1. NAME: Corning Glass Works

2. TELEPHONE NUMBER: (606)236-3100

3. STREET: Vaksdahl Avenue

4. CITY: Danville

5. STATE: KY

6. ZIP CODE: 40422

H. REALTY OWNER INFORMATION (if different from operator of site)

1. NAME:

2. TELEPHONE NUMBER:

3. CITY:

4. STATE:

5. ZIP CODE:

I. SITE DESCRIPTION

On-site landfill used by Corning. Site is bordered by the plant and a small drainage creek.

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: Hannah Leonard

2. TELEPHONE NUMBER: (502) 564-6716

3. DATE (mo., day, & yr.): 5/5/92

III. INSPECTION INFORMATION

A. PRINCIPAL INSPECTOR INFORMATION

1. NAME: Hannah Leonard

2. TITLE: Environmental Supervisor

3. ORGANIZATION: KY DNREP/Division of Waste Mgmt.

4. TELEPHONE NO. (area code & no.): (502) 564-6716

B. INSPECTION PARTICIPANTS

1. NAME	2. ORGANIZATION	3. TELEPHONE NO.
Hannah Leonard	KYDNREP/ Div of Waste Management	502-564-6716

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

1. NAME	2. TITLE & TELEPHONE NO.	3. ADDRESS
Dick Colver	Chemist (606) 236-3100	Corning Glass Works Vaksdahl Ave., Danville

Continued From Front

INSPECTION INFORMATION *(continued)*

D. GENERATOR INFORMATION *(sources of waste)*

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE GENERATED
Corning Glass	(606)236-3100	Vaksdahl Ave., Danville	Glass manufacturing

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)*
3-9-82	10:00	[X] 1. PERMISSION [ ] 2. WARRANT

J. WEATHER *(describe)*

Sunny Spring day

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			
b. SURFACE WATER			
c. WASTE			
d. AIR			
e. RUNOFF	X	Bureau of Environmental Protection Lab	Currently Available
f. SPILL			
g. SOIL			
h. VEGETATION			
i. OTHER *(specify)* Sediment	X	T. M. Regan	Current Available

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

1. TYPE	2. LOCATION OF MEASUREMENTS	3. RESULTS

Continued From Page 2

IV. SAMPLING INFORMATION (continued)

C. PHOTOS

1. TYPE OF PHOTOS
   - [ ] a. GROUND
   - [ ] b. AERIAL
2. PHOTOS IN CUSTODY OF:

D. SITE MAPPED?

[X] YES. SPECIFY LOCATION OF MAPS: Div.Waste Mgmt. Files

E. COORDINATES

1. LATITUDE (deg.-min.-sec.)
2. LONGITUDE (deg.-min.-sec.)

V. SITE INFORMATION

A. SITE STATUS

- [X] 1. ACTIVE (Those inductrial 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?

- [ ] 1. NO
- [X] 2. YES (specify generator's four-digit SIC Code): 3229

C. AREA OF SITE (in acres)

D. ARE THERE BUILDINGS ON THE SITE?

- [X] 1. NO
- [ ] 2. YES (specify):

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	X	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	X	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
- [ ] 2. IGNITABLE
- [ ] 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 Front

VII. STE RELATED INFORMATION *(continued)*

2. Estimate the amount *(specify unit of measure)* of waste by category; mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT	AMOUNT	AMOUNT	AMOUNT	AMOUNT 160,000 cu ft	AMOUNT
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE cu. ft.	UNIT OF MEASURE
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	(2) OTHER *(specify)*:	(2) NON-HALOGNTD. SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER *(specify)*:	(3) CAUSTICS	(3) MILLING/MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMELTING WASTES	(4) MUNICIPAL
(5) OTHER *(specify)*:			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER *(specify)*:
			(6) CYANIDE	X (6) OTHER *(specify)*: Lime glass dust	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			(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')*			3. TOXICITY *(mark 'X')*				4. CAS NUMBER	5. AMOUNT	6. UNIT
	a. SOLID	b. LIQ.	c. VAPOR	a. HIGH	b. MED.	c. LOW	d. NONE			
Glass manufacturing wastes contaminated with lead and arsenic	X			X					160,000.	cu. ft.
Neutralized flouride waste	X									

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 4

VIII. HAZARD DESCRIPTION (continued)

☐ B. NON-WORKER INJURY/EXPOSURE

☐ C. WORKER INJURY/EXPOSURE

☐ D. CONTAMINATION OF WATER SUPPLY

☐ E. CONTAMINATION OF FOOD CHAIN

☐ F. CONTAMINATION OF GROUND WATER

☒ G. CONTAMINATION OF SURFACE WATER

One documented occurance of runoff contaminated with lead and arsenic which would have entered drainage creek at the base of the site.

Continue On Reverse

Continued From Front

III. HAZARD DESCRIPTION *(continued)*

☐ H. DAMAGE TO FLORA/FAUNA

☐ I. FISH KILL

☐ J. CONTAMINATION OF AIR

☐ K. NOTICEABLE ODORS

☒ L. CONTAMINATION OF SOIL

Soil associated with the landfill is likely to be contaminated.

☐ M. PROPERTY DAMAGE

 Continue On Page 7

Continued From Page 6

VIII. HAZARD DESCRIPTION (continued)

[ ] N. FIRE OR EXPLOSION

[ ] O. SPILLS/LEAKING CONTAINERS/RUNOFF/STANDING LIQUID

[ ] P. SEWER, STORM DRAIN PROBLEMS

[X] Q. EROSION PROBLEMS

Site is beginning to erode; however, the state is working with Corning to correct these problems under their permit specifications.

[X] R. INADEQUATE SECURITY

There is no access controls at this time. If their proposed expansion is approved, fencing will be required.

[ ] S. INCOMPATIBLE WASTES

Continue On Reverse

VIII. HAZARD DESCRIPTION *(continued)*

☐ T. MIDNIGHT DUMPING

☒ U. OTHER *(specify)*:

STREAM SEDIMENT SAMPLES SHOW 695 ppm - 949 ppm (Wet Wt. Basis) Pb and 1.90 - 14.6 ppm As BELOW THE SITE.

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	distance to nearest dwelling - ~500'	~855 people - 1mi. radius ~2090 people - 2mi. radius	1 mi. - 225 dwellings 2mi - 550 dwellings	
2. IN COMMERCIAL OR INDUSTRIAL AREAS	distance to nearest offsite bldg. - ~200'		2mi. - 736 buildings	
3. IN PUBLICLY TRAVELLED AREAS	heavily travelled area, people affected unknown			
4. PUBLIC USE AREAS *(parks, schools, etc.)*	1 State School for the Deaf, Pioneer Playhouse 2, hospital 1 1 Centre College, numerous primary secondary schools			

X. WATER AND HYDROLOGICAL DATA

A. DEPTH TO GROUNDWATER *(specify unit)*	B. DIRECTION OF FLOW	C. GROUNDWATER USE IN VICINITY
20'- 50'	southeast	none
D. POTENTIAL YIELD OF AQUIFER	**E. DISTANCE TO DRINKING WATER SUPPLY** *(specify unit of measure)*	**F. DIRECTION TO DRINKING WATER SUPPLY**
100 - 500 GPD		

G. TYPE OF DRINKING WATER SUPPLY

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

☐ 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')

I. RECEIVING WATER

1. NAME: Clarks Run

☐ 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 ☐ 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)
	1. SAND	X	limestone		
	2. CLAY				
	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 (.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: at contact zone

I. SLOPE

1. ESTIMATE % OF SLOPE: 4%

2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.: slope to east

J. OTHER GEOLOGICAL DATA

Site lies at contact and within Tanglewood Limestone and Grier Limestone Members of the Lexington Limestone. Many springs issue from this contact.

 Continue On Reverse

Continued From Front

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 -Landfill	KYDNREP	011.03				X	
NPDES	federal	KY0002607	10-29-83	6-30-82		X	
State- Air	KYDNREP	0-01-18	1-31	none	X		

XV. PAST REGULATORY OR ENFORCEMENT ACTIONS

☐ NONE ☒ YES (summarize in this space)

Not familiar with NPDES regulatory actions.

Corning landfill is currently operating off the permitted area. State is working with the facility to permit a new area. Site is permitted to accept non-hazardous waste; however, a sample of runoff from the site taken 10-31 showed unacceptable levels of lead arsenic and flourides.

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.

EPA Notification of Hazardous Waste Site

R

United States Environmental Protection Agency Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981

Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item which applies

810608

KYS 000 001009

A Person Required to Notify:

Enter the name and address of the person or organization required to notify.

Name: Corning Glass Works
Street: HP ME-3
City: Corning State: NY Zip Code: 14831

B Site Location:

Enter the common name (if known) and actual location of the site

KYD 006395644

Name of Site: Corning Glass Works Danville Plant
Street: Vaksdahl Avenue
City: Danville County: Boyle State: KY Zip Code: 40422

C Person to Contact:

Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form

Name (Last, First and Title): Pignato, William; Environmental Eng.
Phone: (607) 974-6204

D Dates of Waste Handling:

Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site

From (Year): 1952 To (Year): 1974

E Waste Type: Choose the option you prefer to complete

Option 1: Select general waste types and source categories. If you do not know the general waste types or sources, you are encouraged to describe the site in Item I—Description of Site.

General Type of Waste:
Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category

1. ☐ Organics
2. ☒ Inorganics
3. ☐ Solvents
4. ☐ Pesticides
5. ☒ Heavy metals (Possible)
6. ☐ Acids
7. ☐ Bases
8. ☐ PCBs
9. ☐ Mixed Municipal Waste
10. ☐ Unknown
11. ☒ Other (Specify)

Fluoride Salts
Corrosive

Source of Waste:
Place an X in the appropriate boxes

1. ☐ Mining
2. ☐ Construction
3. ☐ Textiles
4. ☐ Fertilizer
5. ☐ Paper/Printing
6. ☐ Leather Tanning
7. ☐ Iron/Steel Foundry
8. ☐ Chemical, General
9. ☐ Plating/Polishing
10. ☐ Military/Ammunition
11. ☐ Electrical Conductors
12. ☐ Transformers
13. ☐ Utility Companies
14. ☐ Sanitary/Refuse
15. ☐ Photofinish
16. ☐ Lab/Hospital
17. ☐ Unknown
18. ☒ Other (Specify)

Glass Manufacturing (SIC 3229)

Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001 regulations (40 CFR Part 261).

Specific Type of Waste:
EPA has assigned a four-digit number to each hazardous waste listed in the regulations under Section 3001 of RCRA. Enter the appropriate four-digit number in the boxes provided. A copy of the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site is located

RECEIVED EPA/REGION IV JUN 9 1981 ENG. DIVISION

0 0 0 0 0 6 7

Form Approved
OMB No. 2000-0138

EPA Form 8900-1

F Waste Quantity

Place an X in the appropriate boxes to indicate the facility types found at the site.

In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.

In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.

Facility Type

1. ☐ Piles
2. ☐ Land Treatment
3. ☒ Landfill
4. ☐ Tanks
5. ☐ Impoundment
6. ☐ Underground Injection
7. ☐ Drums, Above Ground
8. ☐ Drums, Below Ground
9. ☐ Other (Specify) _____

Total Facility Waste Amount

cubic feet 160,000 C

gallons _____

Total Facility Area

square feet 16,000 S

acres _____

G Known, Suspected or Likely Releases to the Environment:

Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.

☐ Known ☐ Suspected ☐ Likely ☒ None

Unknown

Note: Items H and I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.

H Sketch Map of Site Location: (Optional)

Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.

Site identified as an old landfill in the Part "A" Application under RCRA.

I Description of Site: (Optional)

Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.

The waste consist of fluoride salts from the manufacture of incandescent light bulbs. At the time of disposal some of the wastes were corrosive in nature.

J Signature and Title:

The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".

Name S.S. Somers, Mgr. Envir. Control

Street HP ME-3

City Corning State NY Zip Code 14831

Signature S S Somers Date 6/8/81

☒ Owner, Present
☐ Owner, Past
☐ Transporter
☐ Operator, Present
☒ Operator, Past
☒ Other Generator NA

EPA

POTENTIAL HAZARDOUS WASTE SITE
TENTATIVE DISPOSITION

REGION SITE NUMBER: IV KYD006395644

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

A. SITE NAME	B. STREET	
Corning Glass Works Danville Plt	Vaksdahl Ave	
C. CITY	**D. STATE**	**E. ZIP CODE**
Danville	KY	40422

II. TENTATIVE DISPOSITION

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

RECOMMENDATION	MARK 'X'	ACTION AGENCY: EPA	STATE	LOCAL	PRIVATE
A. NO ACTION NEEDED -- NO HAZARD					
B. INVESTIGATIVE ACTION(S) NEEDED (If yes, complete Section III.)	X	X			
C. REMEDIAL ACTION NEEDED (If yes, complete Section IV.)					
D. ENFORCEMENT ACTION NEEDED (If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.)					

E. RATIONALE FOR DISPOSITION

Site is in the (5-84) process of closure under RCRA.
This site has interim status

F. INDICATE THE ESTIMATED DATE OF FINAL DISPOSITION (mo., day, & yr.)

G. IF A CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE THE ESTIMATED DATE ON WHICH THE PLAN WILL BE DEVELOPED (mo., day, & yr.)

H. PREPARER INFORMATION

1. NAME	2. TELEPHONE NUMBER	3. DATE (mo., day, & yr.)

III. INVESTIGATIVE ACTIVITY NEEDED

A. IDENTIFY ADDITIONAL INFORMATION NEEDED TO ACHIEVE A FINAL DISPOSITION.

This should be kept open until proper closure has been verified. (RCRA, State or by S. inspection)

B. PROPOSED INVESTIGATIVE ACTIVITY (Detailed Information)

1. METHOD FOR OBTAINING NEEDED ADDITIONAL INFO.	2. SCHEDULED DATE OF ACTION (mo, day, & yr)	3. TO BE PERFORMED BY (EPA, Contractor, State, etc.)	4. ESTIMATED MANHOURS	5. REMARKS
a. TYPE OF SITE INSPECTION				
(1)				
(2)				
(3)				
b. TYPE OF MONITORING				
(1)				
(2)				
c. TYPE OF SAMPLING				
(1)				
(2)				

Continue On Reverse

Continued From Front

III. INVESTIGATIVE ACTIVITY NEEDED and PART B - PROPOSED INVESTIGATIVE ACTIVITY *(Continued)*

d. TYPE OF LAB ANALYSIS (1)				
(2)				
e. OTHER *(specify)* (1)				
2				

C. ELABORATE ON ANY OF THE INFORMATION PROVIDED IN PART B *(on front side)* AS NEEDED TO IDENTIFY ADDITIONAL INVESTIGATIVE WORK.

D. ESTIMATED MANHOURS BY ACTION AGENCY

1. ACTION AGENCY	2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES	1. ACTION AGENCY	2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES
a. EPA		b. STATE	
c. EPA CONTRACTOR		d. OTHER *(specify)*	

IV. REMEDIAL ACTIONS

A. SHORT TERM/EMERGENCY STRATEGY *(On Site & Off-Site)* List all emergency actions needed to bring 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 space below.

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

B. LONG TERM STRATEGY *(On Site & 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. EST. START DATE *(mo,day,&yr)*	3. EST. END DATE *(mo,day,&yr)*	4. ACTION AGENCY *(EPA, State Private Party)*	5. ESTIMATED COST	6. SPECIFY 311 OR OTHER ACTION. INDICATE THE MAGNITUDE OF THE WORK REQUIRED
				$	
				$	
				$	
				$	
				$	
				$	

C. ESTIMATED MANHOURS AND COST BY ACTION AGENCY

1. ACTION AGENCY	2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES	3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES	1. ACTION AGENCY	2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES	3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES
a. EPA			b. STATE		
c. PRIVATE PARTIES			d. OTHER *(specify)*		

M.2 - SITE MAINTENANCE FORM

ACTION: _

EPA ID : KYD006395644

SITE NAME: CORNING GLASS WORKS DANVILLE PLT SOURCE: H

STREET : VAKSDAHL AVE CONG DIST: 06

CITY : DANVILLE ZIP: 40422

CNTY NAME: BOYLE CNTY CODE : 021

LATITUDE : 37/38/38.0 LONGITUDE : 084/47/16.0

LL-SOURCE: R LL-ACCURACY:

SMSA : HYDRO UNIT: 05100205

INVENTORY IND: Y REMEDIAL IND: Y REMOVAL IND: N FED FAC IND: N

NPL IND: N NPL LISTING DATE: NPL DELISTING DATE:

SITE/SPILL IDS:

RPM NAME: RPM PHONE: - -

SITE CLASSIFICATION: SITE APPROACH:

DIOXIN TIER: REG FLD1: REG FLD2: 1

RESP TERM: PENDING ( ) NO FURTHER ACTION ( ) PENDING (_) NO FURTHER ACTION (_)

ENF DISP: NO VIABLE RESP PARTY ( ) VOLUNTARY RESPONSE ( )
ENFORCED RESPONSE ( ) COST RECOVERY ( )

SITE DESCRIPTION:

M.2 - ALIAS/ALIAS LOCATION MAINTENANCE FORM

ACTION: _

SITE: CORNING GLASS WORKS DANVILLE PLT

EPA ID: KYD006395644 ALIAS SEQ NO: 01

ALIAS NAME: CORNING GLASS WORKS SOURCE: R

ALIAS LOCATION ACTION: _

CONTIGUOUS PORTION OF SITE? C FED FAC IND: N

STREET : VAKSDAHL AVE CONG DIST : 06

CITY : DANVILLE ST: KY ZIP: 40422

CNTY NAME: BOYLE CNTY CODE: 021

LATITUDE : 37/38/33.0 LONGITUDE : 084/47/16.0

LL-SOURCE: R LL-ACCURACY:

SMSA : HYDRO UNIT: 05100205

ALIAS DESCRIPTION:

M.2 - PROGRAM MAINTENANCE FORM

ACTION: _

SITE: CORNING GLASS WORKS DANVILLE PLT

EPA ID: KYD006395644 PROGRAM CODE: H01 PROGRAM TYPE: _

PROGRAM QUALIFIER: ALIAS LINK :

PROGRAM NAME: SITE EVALUATION

DESCRIPTION:

M.2 - EVENT MAINTENANCE FORM

* ACTION: _ *

SITE: CORNING GLASS WORKS DANVILLE PLT
PROGRAM: SITE EVALUATION

EPA ID: KYD006395644 PROGRAM CODE: H01 EVENT TYPE: DS1

FMS CODE: EVENT QUALIFIER : EVENT LEAD: E * _ __ _ *

EVENT NAME: DISCOVERY STATUS: * _____ _ *

DESCRIPTION:

* _____ *
* _____ *
* _____ *
* _____ *

ORIGINAL	CURRENT	ACTUAL			
START:	START:	START:	* __/__/__	__/__/__	__/__/__ *
COMP :	COMP :	COMP : 08/01/80	* __/__/__	__/__/__	__/__/__ *

HQ COMMENT:

* _____ *

RG COMMENT:

* _____ *

COOP AGR #	AMENDMENT #	STATUS	STATE %				
			0	* _____	_____	__	__ *

M.2 - EVENT MAINTENANCE FORM

* ACTION: _ *

SITE: CORNING GLASS WORKS DANVILLE PLT
PROGRAM: SITE EVALUATION

EPA ID: KYD006395644 PROGRAM CODE: H01 EVENT TYPE: PA1

FMS CODE: EVENT QUALIFIER : EVENT LEAD: S * _ ___ _ *

EVENT NAME: PRELIMINARY ASSESSMENT STATUS: * _____ _ *

DESCRIPTION:

* _____ *
* _____ *
* _____ *
* _____ *

ORIGINAL	CURRENT	ACTUAL			
START:	START:	START: 07/01/84	__/__/__	__/__/__	__/__/__
COMP :	COMP :	COMP : 08/01/84	__/__/__	__/__/__	__/__/__

HQ COMMENT:

* _____ *

RG COMMENT:

* _____ *

COOP AGR #	AMENDMENT #	STATUS	STATE %				
			0	_____	_____	__	___

M.2 - COMMENT MAINTENANCE FORM

SITE: CORNING GLASS WORKS DANVILLE PLT

EPA ID: KYD006395644

COM NO	COMMENT	ACTION
001	PART A- ON FILE	
002	KYS000001009-WASTE CONSISTS OF FLOU	
	RIDE SALTS FROM THE MANUFACTURE	
003	OF INCANDESCENT LIGHT BULBS. AT THE	
	TIME OF DISPOSAL SOME OF THE	
004	WASTES WERE CORROSIVE IN NATURE. FR	
	OM 1952 TO 1974.	
005	CONTACT: WILLIAM PIGNATO---ENV. ENG	
	R. (607) 974-6204	

Tom Wright
242

State
Connie Ashcraft
Branch Mgr RCRA
502 564 6716

RECORD OF COMMUNICATION	✓ PHONE CALL	___ DISCUSSION	___ FIELL TRIP	___ CONFERENCE

TO: Brian Donaldson

FROM:

DATE: 12/21/89

TIME:

SUBJECT: Corning Glass Works
alias North American Phillips

#34503

SUMMARY OF COMMUNICATION:

RCRA facility
Land disposal facility

NFA under CERCLA

Tom Wright

4/8/97 Discussion w/ operator (Tom Wright)
Agreed order w/ State to close all landfills satisfied
erosion problem corrected.
Currently addressing groundwater contamination under RCRA

(606) 2389242 Fax 2389294

CONCLUSIONS, ACTION TAKEN OR REQUIRED

INFORMATION COPIES

TO:

DMR Summary

Permit KY0002607

Permit Name	Version Nmbr	Curr. Major Minor Status	Issue Date	Effective Date	Expiration Date
PHILIPS LIGHTING CO	0	Minor	11/13/12	1/1/13	12/31/17
PHILIPS LIGHTING CO	2	Minor	10/30/07	12/1/07	11/30/12

Version # 0

Outfall 0011

00400 pH / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
1/1/13	12/31/17	GRAB	Monthly

Limit		
Limit Unit Desc	Standard Units	Standard Units
Statistical Base	MINIMUM	MAXIMUM
Limit Value	6	9
DMR Values		
1/31/13	8.54	8.54
2/28/13	8.04	8.04
3/31/13	7.51	7.51
4/30/13	8.42	8.42
5/31/13	7.84	7.84
6/30/13	7.12	7.12
7/31/13	7.84	7.84
8/31/13	8.23	8.23
9/30/13	NODI=C	NODI=C
10/31/13	8.17	8.17
11/30/13	7.7	7.7
12/31/13		
1/31/14		
2/28/14		

00530 Solids, total suspended / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
1/1/13	12/31/17	GRAB	Monthly

Limit		
Limit Unit Desc	Milligrams per Liter	Milligrams per Liter
Statistical Base	30DA AVG	DAILY MX
Limit Value		
DMR Values		
1/31/13	7.6	7.6
2/28/13	10	10
3/31/13	2.8	2.8
4/30/13	5.2	5.2
5/31/13	7.6	7.6
6/30/13	5.2	5.2
7/31/13	5.6	5.6
8/31/13	17	17
9/30/13	NODI=C	NODI=C
10/31/13	4.8	4.8
11/30/13	7.2	7.2
12/31/13		

DMR Summary

Permit KY0002607

Version # 0

Outfall 0011

00530 Solids, total suspended / Location 1 / Season 0 / Base

DMR Values		
1/31/14		
2/28/14		

00978 Arsenic, total recoverable / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
1/1/13	12/31/17	GRAB	Monthly

Limit		
Limit Unit Desc	Milligrams per Liter	Milligrams per Liter
Statistical Base	30DA AVG	DAILY MX
Limit Value		.34
DMR Values		
1/31/13	.015	.015
2/28/13	.015	.015
3/31/13	.015	.015
4/30/13	.0049	.0049
5/31/13	.0057	.0057
6/30/13	.015	.015
7/31/13	.009	.009
8/31/13	.015	.015
9/30/13	NODI=C	NODI=C
10/31/13	.015	.015
11/30/13	.015	.015
12/31/13		
1/31/14		
2/28/14		

01114 Lead, total recoverable / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
1/1/13	12/31/17	GRAB	Monthly

Limit		
Limit Unit Desc	Milligrams per Liter	Milligrams per Liter
Statistical Base	30DA AVG	DAILY MX
Limit Value		.082
DMR Values		
1/31/13	.078	.078
2/28/13	.056	.056
3/31/13	.056	.056
4/30/13	.065	.065
5/31/13	.09	.09
6/30/13	.034	.034
7/31/13	.022	.022
8/31/13	.36	.36
9/30/13	NODI=C	NODI=C
10/31/13	.037	.037
11/30/13	.07	.07
12/31/13		
1/31/14		

DMR Summary

Permit KY0002607

Version # 0

Outfall 0011

01114 Lead, total recoverable / Location 1 / Season 0 / Base

DMR Values		
2/28/14		

03582 Oil and grease / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
1/1/13	12/31/17	GRAB	Monthly

Limit		
Limit Unit Desc	Milligrams per Liter	Milligrams per Liter
Statistical Base	30DA AVG	DAILY MX
Limit Value		
DMR Values		
1/31/13	5.6	5.6
2/28/13	5.1	5.1
3/31/13	5.1	5.1
4/30/13	5.3	5.3
5/31/13	5.2	5.2
6/30/13	4.8	4.8
7/31/13	2	2
8/31/13	5	5
9/30/13	NODI=C	NODI=C
10/31/13	5	5
11/30/13	4.8	4.8
12/31/13		
1/31/14		
2/28/14		

50050 Flow, in conduit or thru treatment plant / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
1/1/13	12/31/17	INSTAN	Monthly

Limit		
Limit Unit Desc	Million Gallons per I	Million Gallons per I
Statistical Base	30DA AVG	DAILY MX
Limit Value		
DMR Values		
1/31/13	.0014	.0014
2/28/13	.0504	.0504
3/31/13	.03456	.03456
4/30/13	.005	.005
5/31/13	.0014	.0014
6/30/13	.0022	.0022
7/31/13	.0022	.0022
8/31/13	.007	.007
9/30/13	NODI=C	NODI=C
10/31/13	.00072	.00072
11/30/13	.00072	.00072
12/31/13		
1/31/14		
2/28/14		

DMR Summary

Permit KY0002607

Version # 0

Outfall 0011

50050 Flow, in conduit or thru treatment plant / Location 1 / Season 0 / Base

Outfall 0021

00400 pH / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
1/1/13	12/31/17	GRAB	Monthly

Limit		
Limit Unit Desc	Standard Units	Standard Units
Statistical Base	MINIMUM	MAXIMUM
Limit Value	6	9
DMR Values		
1/31/13	6.52	6.52
2/28/13	7.23	7.23
3/31/13	7.47	7.47
4/30/13	7.04	7.04
5/31/13	7.6	7.6
6/30/13	7.17	7.17
7/31/13	6.56	6.56
8/31/13	7	7
9/30/13	NODI=C	NODI=C
10/31/13	7.04	7.04
11/30/13	7.1	7.1
12/31/13		
1/31/14		
2/28/14		

00530 Solids, total suspended / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
1/1/13	12/31/17	GRAB	Monthly

Limit		
Limit Unit Desc	Milligrams per Liter	Milligrams per Liter
Statistical Base	30DA AVG	DAILY MX
Limit Value		
DMR Values		
1/31/13	10	10
2/28/13	6.8	6.8
3/31/13	1.6	1.6
4/30/13	9.6	9.6
5/31/13	6.8	6.8
6/30/13	2.8	2.8
7/31/13	12	12
8/31/13	28	28
9/30/13	NODI=C	NODI=C
10/31/13	13	13
11/30/13	10	10
12/31/13		
1/31/14		
2/28/14		

DMR Summary

Permit KY0002607

Version # 0

Outfall 0021

00978 Arsenic, total recoverable / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
1/1/13	12/31/17	GRAB	Monthly

Limit		
Limit Unit Desc	Milligrams per Liter	Milligrams per Liter
Statistical Base	30DA AVG	DAILY MX
Limit Value		.34
DMR Values		
1/31/13	.015	.015
2/28/13	.015	.015
3/31/13	.015	.015
4/30/13	.015	.015
5/31/13	.015	.015
6/30/13	.015	.015
7/31/13	.009	.009
8/31/13	.015	.015
9/30/13	NODI=C	NODI=C
10/31/13	.015	.015
11/30/13	.015	.015
12/31/13		
1/31/14		
2/28/14		

01114 Lead, total recoverable / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
1/1/13	12/31/17	GRAB	Monthly

Limit		
Limit Unit Desc	Milligrams per Liter	Milligrams per Liter
Statistical Base	30DA AVG	DAILY MX
Limit Value		.082
DMR Values		
1/31/13	.009	.009
2/28/13	.0035	.0035
3/31/13	.0032	.0032
4/30/13	.009	.009
5/31/13	.009	.009
6/30/13	.009	.009
7/31/13	.015	.015
8/31/13	.009	.009
9/30/13	NODI=C	NODI=C
10/31/13	.009	.009
11/30/13	.009	.009
12/31/13		
1/31/14		
2/28/14		

03582 Oil and grease / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis

DMR Summary

Permit KY0002607

Version # 0

Outfall 0021

03582 Oil and grease / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
1/1/13	12/31/17	GRAB	Monthly

Limit		
Limit Unit Desc	Milligrams per Liter	Milligrams per Liter
Statistical Base	30DA AVG	DAILY MX
Limit Value		
DMR Values		
1/31/13	5.1	5.1
2/28/13	1.6	1.6
3/31/13	5.2	5.2
4/30/13	5.4	5.4
5/31/13	1.8	1.8
6/30/13	4.8	4.8
7/31/13	4.4	4.4
8/31/13	5	5
9/30/13	NODI=C	NODI=C
10/31/13	5	5
11/30/13	4.9	4.9
12/31/13		
1/31/14		
2/28/14		

50050 Flow, in conduit or thru treatment plant / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
1/1/13	12/31/17	INSTAN	Monthly

Limit		
Limit Unit Desc	Million Gallons per I	Million Gallons per I
Statistical Base	30DA AVG	DAILY MX
Limit Value		
DMR Values		
1/31/13	.00108	.00108
2/28/13	.0042	.0042
3/31/13	.02304	.02304
4/30/13	.0029	.0029
5/31/13	.0014	.0014
6/30/13	.0043	.0043
7/31/13	.0043	.0043
8/31/13	.0008	.0008
9/30/13	NODI=C	NODI=C
10/31/13	.00072	.00072
11/30/13	.00432	.00432
12/31/13		
1/31/14		
2/28/14		

Version # 2

Outfall 0011

00011 Temperature, water deg. fahrenheit / Location 1 / Season 0 / Base

DMR Summary

Permit KY0002607

Version # 2

Outfall 0011

00011 Temperature, water deg. fahrenheit / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
12/1/07	11/30/12	GRAB	Monthly

Limit	
Limit Unit Desc	Degrees Fahrenheit
Statistical Base	DAILY MX
Limit Value	89
DMR Values	
1/31/09	46
2/28/09	52
3/31/09	47
4/30/09	64
5/31/09	62
6/30/09	76
7/31/09	70
8/31/09	76
9/30/09	69
10/31/09	62
11/30/09	60
12/31/09	54
1/31/10	Not Received
2/28/10	40
3/31/10	52
4/30/10	62
5/31/10	71
6/30/10	72
7/31/10	76
8/31/10	78
9/30/10	72
10/31/10	56
11/30/10	58
12/31/10	44
1/31/11	48
2/28/11	50
3/31/11	69
4/30/11	70
5/31/11	12
6/30/11	70
7/31/11	71
8/31/11	NODI=C
9/30/11	Not Received
10/31/11	54
11/30/11	55
12/31/11	58
1/31/12	3
2/29/12	42.1
3/31/12	50
4/30/12	6
5/31/12	65
6/30/12	80.6
7/31/12	78.4
8/31/12	84.3

DMR Summary

Permit KY0002607

Version # 2

Outfall 0011

00011 Temperature, water deg. fahrenheit / Location 1 / Season 0 / Base

DMR Values	
9/30/12	75.7
10/31/12	49.1
11/30/12	57.4
12/31/12	41.4

00400 pH / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
12/1/07	11/30/12	GRAB	Monthly

Limit		
Limit Unit Desc	Standard Units	Standard Units
Statistical Base	MINIMUM	MAXIMUM
Limit Value	6	9
DMR Values		
1/31/09	8.5	8.5
2/28/09	8.6	8.6
3/31/09	8	8
4/30/09	8.7	8.7
5/31/09	8.6	8.6
6/30/09	8.4	8.5
7/31/09	8.3	8.3
8/31/09	8.1	8.1
9/30/09	8.1	8.1
10/31/09	8.1	8.1
11/30/09	7.8	7.8
12/31/09	8.8	8.8
1/31/10	Not Received	Not Received
2/28/10	8.1	8.1
3/31/10	8.2	8.2
4/30/10	8.2	8.2
5/31/10	8.5	8.5
6/30/10	8.1	8.1
7/31/10	8.4	8.4
8/31/10	8.5	8.5
9/30/10	8.5	8.5
10/31/10	8	8
11/30/10	8.4	8.4
12/31/10	8.1	8.1
1/31/11	8.6	8.6
2/28/11	8.1	8.1
3/31/11	8.1	8.1
4/30/11	7.4	7.4
5/31/11	7.2	7.2
6/30/11	6.7	6.7
7/31/11	6.7	6.7
8/31/11	NODI=C	NODI=C
9/30/11	Not Received	Not Received
10/31/11	6.9	6.9
11/30/11	6.7	6.7
12/31/11	6.7	6.7

DMR Summary

Permit KY0002607

Version # 2

Outfall 0011

00400 pH / Location 1 / Season 0 / Base

DMR Values		
1/31/12	8.8	8.8
2/29/12	8.7	8.7
3/31/12	8.26	9.6
4/30/12	8.3	8.3
5/31/12	8.05	9.2
6/30/12	8.74	8.74
7/31/12	7.57	7.57
8/31/12	8.68	8.68
9/30/12	7.5	7.5
10/31/12	7.94	7.94
11/30/12	8.18	8.18
12/31/12	7.87	8.12

00530 Solids, total suspended / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
12/1/07	11/30/12	COMP24	Monthly

Limit		
Limit Unit Desc	Pounds per Day	Pounds per Day
Statistical Base	30DA AVG	DAILY MX
Limit Value	105.9	209.8
DMR Values		
1/31/09	.83	.83
2/28/09	NODI=5	NODI=5
3/31/09	.41	.41
4/30/09	.28	.28
5/31/09	.26	.26
6/30/09	.21	.25
7/31/09	.05	.05
8/31/09	.08	.08
9/30/09	.16	.16
10/31/09	1.58	1.58
11/30/09	.47	.47
12/31/09	4.7	4.7
1/31/10	Not Received	Not Received
2/28/10	2.35	2.35
3/31/10	1.52	1.52
4/30/10	9.78	9.78
5/31/10	1.13	1.13
6/30/10	2.31	2.31
7/31/10	.47	.47
8/31/10	10.86	10.86
9/30/10	7.41	7.41
10/31/10	1.4	1.4
11/30/10	1.14	1.14
12/31/10	3.27	3.27
1/31/11	1.38	1.38
2/28/11	23.24	23.24
3/31/11	5.69	5.69
4/30/11	14.81	14.81

DMR Summary

Permit KY0002607

Version # 2

Outfall 0011

00530 Solids, total suspended / Location 1 / Season 0 / Base

DMR Values		
5/31/11	.88	.88
6/30/11	2.4	2.4
7/31/11	4.79	4.79
8/31/11	NODI=C	NODI=C
9/30/11	Not Received	Not Received
10/31/11	.85	.85
11/30/11	16.44	16.44
12/31/11	36.16	36.16
1/31/12	10.04	10.04
2/29/12	.192	.192
3/31/12	.369	.369
4/30/12	.034	.034
5/31/12	.006	.006
6/30/12	.004	.004
7/31/12	.324	.324
8/31/12	.008	.008
9/30/12	.336	.336
10/31/12	.093	.093
11/30/12	.439	.439
12/31/12	.115	.115

00900 Hardness, total [as CaCO3] / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
12/1/07	11/30/12	GRAB	Monthly

Limit		
Limit Unit Desc	Milligrams per Liter	Milligrams per Liter
Statistical Base	30DA AVG	DAILY MX
Limit Value		
DMR Values		
1/31/09	92	92
2/28/09	190	190
3/31/09	170	170
4/30/09	160	160
5/31/09	130	130
6/30/09	140	160
7/31/09	140	140
8/31/09	150	150
9/30/09	160	160
10/31/09	120	120
11/30/09	150	150
12/31/09	90	90
1/31/10	Not Received	Not Received
2/28/10	180	180
3/31/10	160	160
4/30/10	100	100
5/31/10	122	122
6/30/10	108	108
7/31/10	152	152
8/31/10	140	140

DMR Summary

Permit KY0002607

Version # 2

Outfall 0011

00900 Hardness, total [as CaCO3] / Location 1 / Season 0 / Base

DMR Values		
9/30/10	154	154
10/31/10	146	146
11/30/10	180	180
12/31/10	150	150
1/31/11	130	130
2/28/11	165	165
3/31/11	104	104
4/30/11	75	75
5/31/11	130	130
6/30/11	75	75
7/31/11	NODI=X	NODI=X
8/31/11	NODI=C	NODI=C
9/30/11	Not Received	Not Received
10/31/11	46	46
11/30/11	25	25
12/31/11	38	38
1/31/12	30	30
2/29/12	48	48
3/31/12	42	42
4/30/12	53	53
5/31/12	42	42
6/30/12	74	74
7/31/12	56	56
8/31/12	74	74
9/30/12	180	180
10/31/12	32	32
11/30/12	23	23
12/31/12	77	77

01114 Lead, total recoverable / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
12/1/07	11/30/12	COMP24	Monthly

Limit		
Limit Unit Desc	Milligrams per Liter	Milligrams per Liter
Statistical Base	30DA AVG	DAILY MX
Limit Value	.003	.082
DMR Values		
1/31/09	.148	.148
2/28/09	.182	.182
3/31/09	.099	.099
4/30/09	.083	.083
5/31/09	.081	.081
6/30/09	.02	.024
7/31/09	.006	.006
8/31/09	.019	.019
9/30/09	.01	.01
10/31/09	.075	.075
11/30/09	.02	.02
12/31/09	.161	.161

DMR Summary

Permit KY0002607

Version # 2

Outfall 0011

01114 Lead, total recoverable / Location 1 / Season 0 / Base

DMR Values		
1/31/10	Not Received	Not Received
2/28/10	.019	.019
3/31/10	.003	.003
4/30/10	.018	.018
5/31/10	.021	.021
6/30/10	.026	.026
7/31/10	.016	.016
8/31/10	.008	.008
9/30/10	.024	.024
10/31/10	.011	.011
11/30/10	.012	.012
12/31/10	.007	.007
1/31/11	.021	.021
2/28/11	.0122	.0122
3/31/11	.0262	.0262
4/30/11	.0448	.0448
5/31/11	.0233	.0233
6/30/11	.022	.022
7/31/11	NODI=X	NODI=X
8/31/11	NODI=C	NODI=C
9/30/11	Not Received	Not Received
10/31/11	.064	.064
11/30/11	.0375	.0375
12/31/11	.0178	.0178
1/31/12	.002	.002
2/29/12	.036	.036
3/31/12	.025	.025
4/30/12	.14	.14
5/31/12	.062	.062
6/30/12	.095	.095
7/31/12	.076	.076
8/31/12	.057	.057
9/30/12	.053	.053
10/31/12	.052	.052
11/30/12	.034	.034
12/31/12	.15	.16

03582 Oil and grease / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
12/1/07	11/30/12	GRAB	Monthly

Limit		
Limit Unit Desc	Pounds per Day	Pounds per Day
Statistical Base	30DA AVG	DAILY MX
Limit Value	105.9	209.8
DMR Values		
1/31/09	1.65	1.65
2/28/09	NODI=5	NODI=5
3/31/09	1.23	1.23
4/30/09	1.1	1.1

DMR Summary

Permit KY0002607

Version # 2

Outfall 0011

03582 Oil and grease / Location 1 / Season 0 / Base

DMR Values		
5/31/09	.52	.52
6/30/09	.49	.63
7/31/09	3.6	3.6
8/31/09	.17	.17
9/30/09	.32	.32
10/31/09	3.15	3.15
11/30/09	.93	.93
12/31/09	1.57	1.57
1/31/10	Not Received	Not Received
2/28/10	3.53	3.53
3/31/10	4.55	4.55
4/30/10	6.52	6.52
5/31/10	2.27	2.27
6/30/10	4.62	4.62
7/31/10	.47	.47
8/31/10	3.1	3.1
9/30/10	1.85	1.85
10/31/10	.7	.7
11/30/10	2.29	2.29
12/31/10	3.27	3.27
1/31/11	5.5	5.5
2/28/11	16.6	16.6
3/31/11	5.69	5.69
4/30/11	.62	.62
5/31/11	1.77	1.77
6/30/11	2.4	2.4
7/31/11	4.79	4.79
8/31/11	NODI=C	NODI=C
9/30/11	Not Received	Not Received
10/31/11	.43	.43
11/30/11	13.15	13.15
12/31/11	3.62	3.62
1/31/12	6.3868	6.3868
2/29/12	.153	.153
3/31/12	.218	.218
4/30/12	.005	.005
5/31/12	.002	.002
6/30/12	.003	.003
7/31/12	.108	.108
8/31/12	.003	.003
9/30/12	.002	.002
10/31/12	.008	.008
11/30/12	.052	.052
12/31/12	.052	.052

50050 Flow, in conduit or thru treatment plant / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
12/1/07	11/30/12	CONTIN	Monthly

DMR Summary

Permit KY0002607

Version # 2

Outfall 0011

50050 Flow, in conduit or thru treatment plant / Location 1 / Season 0 / Base

Limit		
Limit Unit Desc	Million Gallons per [	Million Gallons per [
Statistical Base	30DA AVG	DAILY MX
Limit Value		
DMR Values		
1/31/09	.099	.099
2/28/09	NODI=5	NODI=5
3/31/09	.049	.049
4/30/09	.033	.033
5/31/09	.031	.031
6/30/09	.015	.021
7/31/09	.006	.006
8/31/09	.01	.01
9/30/09	.019	.019
10/31/09	.063	.063
11/30/09	.056	.056
12/31/09	.094	.094
1/31/10	Not Received	Not Received
2/28/10	.141	.141
3/31/10	.182	.182
4/30/10	.391	.391
5/31/10	.136	.136
6/30/10	.277	.277
7/31/10	.028	.028
8/31/10	.186	.186
9/30/10	.111	.111
10/31/10	.042	.042
11/30/10	.137	.137
12/31/10	.196	.196
1/31/11	.165	.165
2/28/11	.398	.398
3/31/11	.341	.341
4/30/11	.037	.037
5/31/11	.106	.106
6/30/11	.144	.144
7/31/11	.287	.287
8/31/11	NODI=C	NODI=C
9/30/11	Not Received	Not Received
10/31/11	.026	.026
11/30/11	.197	.197
12/31/11	.217	.217
1/31/12	.109	.109
2/29/12	.00576	.00576
3/31/12	.0101	.0101
4/30/12	.0002	.0002
5/31/12	.0004	.0007
6/30/12	.0001	.0001
7/31/12	.0043	.0043
8/31/12	.0001	.0001
9/30/12	.0001	.0001
10/31/12	.0007	.0007
11/30/12	.0048	.0048
12/31/12	.0014	.0014

DMR Summary

Permit KY0002607

Version # 2

Outfall 0011

50050 Flow, in conduit or thru treatment plant / Location 1 / Season 0 / Base

Outfall 0021

00400 pH / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
12/1/07	11/30/12	GRAB	Monthly

Limit		
Limit Unit Desc	Standard Units	Standard Units
Statistical Base	MINIMUM	MAXIMUM
Limit Value	6	9
DMR Values		
1/31/09	7.8	7.8
2/28/09	NODI=C	NODI=C
3/31/09	8.6	8.6
4/30/09	8.5	8.5
5/31/09	8.4	8.4
6/30/09	7.9	7.9
7/31/09	8.3	8.3
8/31/09	7.3	7.3
9/30/09	7.5	7.5
10/31/09	7.4	7.4
11/30/09	7.9	7.9
12/31/09	8.4	8.4
1/31/10	Not Received	Not Received
2/28/10	7.6	7.6
3/31/10	8	8
4/30/10	8.1	8.1
5/31/10	7.6	7.6
6/30/10	7.1	7.1
7/31/10	7.8	7.8
8/31/10	NODI=C	NODI=C
9/30/10	7.2	7.2
10/31/10	6.6	6.6
11/30/10	8.3	8.3
12/31/10	NODI=C	NODI=C
1/31/11	NODI=C	NODI=C
2/28/11	Not Received	Not Received
3/31/11	Not Received	Not Received
4/30/11	Not Received	Not Received
5/31/11	Not Received	Not Received
6/30/11	Not Received	Not Received
7/31/11	NODI=C	NODI=C
8/31/11	NODI=C	NODI=C
9/30/11	Not Received	Not Received
10/31/11	NODI=C	NODI=C
11/30/11	NODI=C	NODI=C
12/31/11	NODI=C	NODI=C
1/31/12	6.9	6.9
2/29/12	7.1	7.1
3/31/12	6.8	6.8
4/30/12	6.98	6.98
5/31/12	6.4	6.4

DMR Summary

Permit KY0002607

Version # 2

Outfall 0021

00400 pH / Location 1 / Season 0 / Base

DMR Values		
6/30/12	NODI=C	NODI=C
7/31/12	7.64	7.64
8/31/12	7.4	7.4
9/30/12	7.35	7.35
10/31/12	Not Received	Not Received
11/30/12	7.07	7.54
12/31/12	7.53	7.53

00530 Solids, total suspended / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
12/1/07	11/30/12	GRAB	Monthly

Limit		
Limit Unit Desc	Milligrams per Liter	Milligrams per Liter
Statistical Base	30DA AVG	DAILY MX
Limit Value		50
DMR Values		
1/31/09	1	1
2/28/09	NODI=C	NODI=C
3/31/09	4	4
4/30/09	1	1
5/31/09	1	1
6/30/09	40	40
7/31/09	36	36
8/31/09	1	1
9/30/09	1	1
10/31/09	1	1
11/30/09	76	76
12/31/09	2	2
1/31/10	Not Received	Not Received
2/28/10	2	2
3/31/10	1	1
4/30/10	7	7
5/31/10	5	5
6/30/10	28	28
7/31/10	1	1
8/31/10	NODI=C	NODI=C
9/30/10	46	46
10/31/10	1	1
11/30/10	1	1
12/31/10	NODI=C	NODI=C
1/31/11	NODI=C	NODI=C
2/28/11	Not Received	Not Received
3/31/11	Not Received	Not Received
4/30/11	Not Received	Not Received
5/31/11	Not Received	Not Received
6/30/11	Not Received	Not Received
7/31/11	NODI=C	NODI=C
8/31/11	NODI=C	NODI=C
9/30/11	Not Received	Not Received

DMR Summary

Permit KY0002607

Version # 2

Outfall 0021

00530 Solids, total suspended / Location 1 / Season 0 / Base

DMR Values		
10/31/11	NODI=C	NODI=C
11/30/11	NODI=C	NODI=C
12/31/11	NODI=C	NODI=C
1/31/12	NODI=X	NODI=X
2/29/12	5.6	5.6
3/31/12	82	82
4/30/12	4.4	4.4
5/31/12	14	14
6/30/12	NODI=C	NODI=C
7/31/12	10	10
8/31/12	2	2
9/30/12	10	10
10/31/12	Not Received	Not Received
11/30/12	76.6	150
12/31/12	NODI=X	17

03582 Oil and grease / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
12/1/07	11/30/12	GRAB	Monthly

Limit		
Limit Unit Desc	Milligrams per Liter	Milligrams per Liter
Statistical Base	30DA AVG	DAILY MX
Limit Value		20
DMR Values		
1/31/09	2	2
2/28/09	NODI=C	NODI=C
3/31/09	2	2
4/30/09	2	2
5/31/09	2	2
6/30/09	Not Received	Not Received
7/31/09	2	2
8/31/09	2	2
9/30/09	2	2
10/31/09	2	2
11/30/09	2	2
12/31/09	2	2
1/31/10	Not Received	Not Received
2/28/10	2	2
3/31/10	2	2
4/30/10	2	2
5/31/10	2	2
6/30/10	2	2
7/31/10	2	2
8/31/10	NODI=C	NODI=C
9/30/10	2	2
10/31/10	2	2
11/30/10	2	2
12/31/10	NODI=C	NODI=C
1/31/11	NODI=C	NODI=C

DMR Summary

Permit KY0002607

Version # 2

Outfall 0021

03582 Oil and grease / Location 1 / Season 0 / Base

DMR Values		
2/28/11	Not Received	Not Received
3/31/11	Not Received	Not Received
4/30/11	Not Received	Not Received
5/31/11	Not Received	Not Received
6/30/11	Not Received	Not Received
7/31/11	NODI=C	NODI=C
8/31/11	NODI=C	NODI=C
9/30/11	Not Received	Not Received
10/31/11	NODI=C	NODI=C
11/30/11	NODI=C	NODI=C
12/31/11	NODI=C	NODI=C
1/31/12	5	5
2/29/12	2.7	2.7
3/31/12	1.8	1.8
4/30/12	2	2
5/31/12	1.4	1.4
6/30/12	NODI=C	NODI=C
7/31/12	3.2	3.2
8/31/12	2.5	2.5
9/30/12	1.3	1.3
10/31/12	Not Received	Not Received
11/30/12	1.3	1.3
12/31/12	1.3	1.3

50050 Flow, in conduit or thru treatment plant / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
12/1/07	11/30/12	ESTIMA	Monthly

Limit		
Limit Unit Desc	Million Gallons per I	Million Gallons per I
Statistical Base	30DA AVG	DAILY MX
Limit Value		
DMR Values		
1/31/09	.0007	.0007
2/28/09	NODI=C	NODI=C
3/31/09	.051	.051
4/30/09	.001	.001
5/31/09	.001	.001
6/30/09	.002	.002
7/31/09	.002	.002
8/31/09	.002	.002
9/30/09	.003	.003
10/31/09	.005	.005
11/30/09	.001	.001
12/31/09	.002	.002
1/31/10	Not Received	Not Received
2/28/10	.002	.002
3/31/10	.004	.004
4/30/10	.002	.002
5/31/10	.002	.002

DMR Summary

Permit KY0002607

Version # 2

Outfall 0021

50050 Flow, in conduit or thru treatment plant / Location 1 / Season 0 / Base

DMR Values		
6/30/10	.36	.36
7/31/10	.001	.001
8/31/10	NODI=C	NODI=C
9/30/10	Not Received	Not Received
10/31/10	.001	.001
11/30/10	.001	.001
12/31/10	NODI=C	NODI=C
1/31/11	NODI=C	NODI=C
2/28/11	Not Received	Not Received
3/31/11	Not Received	Not Received
4/30/11	Not Received	Not Received
5/31/11	Not Received	Not Received
6/30/11	Not Received	Not Received
7/31/11	NODI=C	NODI=C
8/31/11	NODI=C	NODI=C
9/30/11	Not Received	Not Received
10/31/11	NODI=C	NODI=C
11/30/11	NODI=C	NODI=C
12/31/11	NODI=C	NODI=C
1/31/12	.0072	.0072
2/29/12	.0101	.0101
3/31/12	.002	.002
4/30/12	.0003	.0003
5/31/12	.00216	.00216
6/30/12	NODI=C	NODI=C
7/31/12	.00288	.00288
8/31/12	.00001	.00001
9/30/12	.00001	.00001
10/31/12	Not Received	Not Received
11/30/12	.012	.022
12/31/12	.022	.022