U.S. FILTER

USEPA

OPERATING SERVICES, INC. TELEPHONE 412-381-3622
921 SAW MILL RUN BOULEVARD FACSIMILE 412-381-6271
PITTSBURGH, PA 15220

February 20, 1998

Ms. Grisell V. Diaz-Cotto
New Jersey Branch II
Emergency and Remedial Response
United States Environmental Protection Agency
290 Broadway, 19th Floor
New York, NY 10007-1866

Jan '98

Re: ~~February~~ Discharge Monitoring Report
Leachate Treatment Plant, Operable Unit 1
Kin-Buc Landfill Superfund Site

Dear Ms. Grisell V. Diaz-Cotto:

The January Discharge Monitoring Report (DMR) for the Leachate Treatment Plant of Operable Unit 1, Kin-Buc Landfill Superfund Site, prepared by U.S. Filter Operating Services, Inc., is attached. We will provide copies of the DMR to Ian Curtis and Susan Dietrick at the NJDEP.

Should you have any questions concerning the DMR or other site items, please contact me or Pete Watkins at the Kin-Buc site.

Very truly yours,
U.S. Filter Operating Services, Inc.
On behalf of SCA Services, Inc.,

Dennis J. Duryea, P.E.
Division Manager

Enclosure

cc: Ian Curtis - NJDEP
Susan Dietrick - NJDEP
Stephen Joyce - SCA
Bob Morano - Kin-Buc Inc.
Carl Januszkiewicz - Waste Management, Inc.

568430

T-VWX-014

NEW JERSEY DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER QUALITY

MONITORING REPORT - TRANSMITTAL SHEET

NJPDES NO. NJ PERMIT EQUIV.

REPORTING PERIOD
Mo. Yr. 1/2/7/ Mo. Yr. 9/1/9/

PERMITTEE: Name: CARL JANUSZKIEWICZ
Address: 100 LISTER AVE
NEWARK N.J. 07105

FACILITY: Name: KIN-BUC LANDFILL TREATMENT PLANT
Address: 383 MEADOW RD
EDISON, N.J. 08817
Telephone: 732 572 4743

FORMS ATTACHED (Indicate Quantity of Each)

SLUDGE REPORT - SANITARY
___T-VWX-007 ___T-VWX-008 ___T-VWX-009
___ EPA Form 3320-1

SLUDGE REPORT - INDUSTRIAL
___T-VWX-010A ___ T-VWX-010B

WASTEWATER REPORTS
___ T-VWX-011 ___T-VWX-012 ___ T-VWX-013

GROUNDWATER REPORTS
___VWX-015(A,B) ___VWX-016 ___VWX-017
___ ELECTRONIC SUBMISSION

NJPDES DISCHARGE MONITORING
X EPA FORM 3320-1

Operating Exceptions

	YES	NO
DYE TESTING	—	—
TEMPORARY BYPASSING	—	—
DISINFECTION INTERRUPTION	—	—
MONITORING MALFUNCTIONS	—	—
UNITS OF OPERATION	—	—
OTHER	—	—

(Detail any "Yes" on reverse side in appropriate space).

NOTE: The "Hours Attended at Plant" on the reverse of this sheet must also be completed.

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

LICENSED OPERATOR

Name (Printed) PIERRE A. WATKINS
Grade & Registry No 000879 - W-4
Signature Pierre A. Watkins

PRINCIPAL EXECUTIVE OFFICER OR
DULY AUTHORIZED REPRESENTATIVE

Name (Printed) PIERRE A. WATKINS
Title (Printed) PLANT SUPERVISOR
Signature Pierre A. Watkins

Date 2/23/98 Date 2/23/98

OPERATING EXCEPTIONS DETAILED

HOURS ATTENDED AT PLANT Month 01 Year 98

Day of Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Licensed Operator	H	8	-	4	8	8	8	8	8	8	4	8	8	8	8	8
Others	8	16	8	-	16	16	16	16	16	-	16	16	16	16	16	16

Day of Month	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	
Licensed Operator	8	4	8	8	8	8	8	4	8	8	8	8	8	8	8	
Others		-	16	16	16	16	16	-	8	16	16	16	16	16	16	

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME Mr. Carl Januszkiewicz
ADDRESS c/o SCA Services Inc.
100 Lister Avenue
Newark ~~Newton~~, NJ 07105
FACILITY Kin-Buc Landfill
LOCATION Edison, NJ

DISCHARGE MONITORING REPORT (DMR)

(2-16) NJ Permit Equil. — PERMIT NUMBER
(17-19) 001 — DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 10-31-94

"JAN 98

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	98	1	1	TO	98	1	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPL TYPE (69-70
Flow	SAMPLE MEASUREMENT	27271	35891							Cont	Flow meter
	PERMIT REQUIREMENT	Report Only	Report Only	MGD	**********	**********	**********	*******		Cont.	Flow Meter
pH	SAMPLE MEASUREMENT				7.35		8.6			1/wk	Grab
	PERMIT REQUIREMENT	**********	**********	*******	6.0 DailyMin	**********	9.0	S.U.		Weekly	Grab
Petroleum Hydrocarbons	SAMPLE MEASUREMENT					<0.5	<0.5			2/mo	Grab
	PERMIT REQUIREMENT	**********	**********	*******	**********	10	15	mg/l		2/month	Grab.
COD	SAMPLE MEASUREMENT	16.16	26.43			159	244			2/mo	Comp
	PERMIT REQUIREMENT	Report Only	Report Only	kg/day	**********	Report Only		mg/l		2/month	Comp.
BOD-5 % Removal	SAMPLE MEASUREMENT				>99					2/mo	Calc
	PERMIT REQUIREMENT	**********	**********	*******	90	**********	**********	%		2/month	Calc.
Total Suspended Solids	SAMPLE MEASUREMENT	0.125	0.159			1.16	1.60			1/wk	Comp
	PERMIT REQUIREMENT	Report Only	Report Only	kg/day	**********	30	45(1)	mg/l		Weekly	Comp.
Dissolved Oxygen	SAMPLE MEASUREMENT				9.1					1/wk	Comp
	PERMIT REQUIREMENT	**********	**********		4.0 Min. Instant.	**********	**********	mg/l		Weekly	Comp.

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Pierre A. Watkins, Sr.
Plant Supervisor
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C § 1001 AND 33 U.S.C § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 908, NUMBER 572-4743

DATE: YEAR 98, MO 2, D 23

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

(REPLACES EPA FORM 3320-1 WHICH MAY NOT BE USED)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME Mr. Carl Januszkiewicz
ADDRESS c/o SCA Services Inc.
100 Lister Avenue
NEWARK ~~Newton~~, NJ 07105
FACILITY Kin-Buc Landfill
LOCATION Edison, NJ

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Benzene	SAMPLE MEASUREMENT	<0.00025	<0.00025			<2.3	<2.3			2/mo	Gab
	PERMIT REQUIREMENT	0.009	0.02	kg/day	**********	57	134	ug/l		2/month	Grab
Chlorobenzene	SAMPLE MEASUREMENT	<0.000303	<0.000303			<2.8	<2.8			2/mo	Gab
	PERMIT REQUIREMENT	0.022	0.058	kg/day	**********	142	380	ug/l		2/month	Grab
1,1 Dichloroethene	SAMPLE MEASUREMENT	<0.000303	<0.000303			<2.8	<2.8			2/mo	Gab
	PERMIT REQUIREMENT	0.003	0.009	kg/day	**********	22	59	ug/l		2/month	Grab
Ethylbenzene	SAMPLE MEASUREMENT	<0.000303	<0.000303			<2.8	<2.8			2/mo	Gab
	PERMIT REQUIREMENT	0.022	0.058	kg/day	**********	142	380	ug/l		2/month	Grab
Tetrachloroethylene	SAMPLE MEASUREMENT	<0.000260	<0.000260			<2.4	<2.4			2/mo	Gab
	PERMIT REQUIREMENT	0.008	0.025	kg/day	**********	52	164	ug/l		2/month	Grab
Toluene	SAMPLE MEASUREMENT	<0.000477	<0.000477			<4.4	<4.4			2/mo	Gab
	PERMIT REQUIREMENT	0.004	0.011	kg/day	**********	28	74	ug/l		2/month	Grab
1,2-transDichloroethylene	SAMPLE MEASUREMENT	<0.000271	<0.000271			<2.5	<2.5			2/mo	Gab
	PERMIT REQUIREMENT	0.004	0.009	kg/day	**********	25	60	ug/l		2/month	Grab

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Pierre A. Watkins, Sr.
Plant Supervisor
TYPED OR PRINTED

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Pierre A. Watkins
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 908, NUMBER 572-4743

DATE: YEAR 98, MO 2, D 23

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)
NAME Mr. Carl Januszkiewicz
ADDRESS c/o SCA Services Inc.
100 Lister Avenue
NEWARK ~~Newben~~, NJ 07105
FACILITY Kin-Buc Landfill
LOCATION Edison, NJ

DISCHARGE MONITORING REPORT (DMR)

(2-16) NJ Permit Equil. — PERMIT NUMBER
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Trichloroethylene	SAMPLE MEASUREMENT	<0.000260	<0.000260	kg/day		<2.4	<2.4	ug/l		2/mo	Grab
	PERMIT REQUIREMENT	0.004	0.010		**********	26	69			2/month	Grab
Vinyl Chloride	SAMPLE MEASUREMENT	<0.000466	<0.000466	kg/day		<4.3	<4.3	ug/l		1/wk	Grab
	PERMIT REQUIREMENT	0.008	0.016		**********	52.8	106			Weekly	Grab
Acenaphthylene	SAMPLE MEASUREMENT	<0.000076	<0.000076	kg/day		<0.94	<0.94	ug/l		1/mo	Grab
	PERMIT REQUIREMENT	0.00026	0.00052		**********	1.72	3.43			Monthly	Grab
Benzo(a)Anthracene	SAMPLE MEASUREMENT	<0.000072	<0.000072	kg/day		<0.89	<0.89	ug/l		1/mo	Grab
	PERMIT REQUIREMENT	0.00026	0.00052		**********	1.72	3.43			Monthly	Grab
Benzo(a)Pyrene	SAMPLE MEASUREMENT	<0.000039	<0.000039	kg/day		<0.48	<0.48	ug/l		1/mo	Grab
	PERMIT REQUIREMENT	0.00026	0.00052		**********	1.72	3.43			Monthly	Grab
Benzo(ghi)Perylene	SAMPLE MEASUREMENT	<0.000043	<0.000043	kg/day		<0.54	<0.54	ug/l		1/mo	Grab
	PERMIT REQUIREMENT	0.00026	0.00052		**********	1.72	3.43			Monthly	Grab
Benzo(k)Fluoranthene	SAMPLE MEASUREMENT	<0.000074	<0.000074	kg/day		<0.92	<0.92	ug/l		1/mo	Grab
	PERMIT REQUIREMENT	0.00026	0.00052		**********	1.72	3.43			Monthly	Grab

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TELEPHONE: AREA CODE 908, NUMBER 572-4743

DATE: YEAR 98, MO 2, D 23

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

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NAME Mr. Carl Januszkiewicz
ADDRESS c/o SCA Services Inc.
100 Lister Avenue
NEWARK ~~Newton~~, NJ 07105
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Ideno(1,2,3cd)Pyrene	SAMPLE MEASUREMENT	<0.000047	<0.000047			<0.59	<0.59			1/mo	Grab
	PERMIT REQUIREMENT	0.00026	0.00052	kg/day	**********	1.72	3.43	ug/l		Monthly	Grab
Phenanthrene	SAMPLE MEASUREMENT	<0.000062	<0.000062			<0.57	<0.57			1/wk	Grab
	PERMIT REQUIREMENT	**********	**********	*******	**********	Report Only	5.4(2)	ug/l		Weekly	Grab
Aldrin	SAMPLE MEASUREMENT	<0.0000020	<0.0000020			<0.025	<0.025			1/mo	Grab
	PERMIT REQUIREMENT	0.000175	0.00026	kg/day	**********	0.0875	0.176	ug/l		Monthly	Grab
4,4-DDT	SAMPLE MEASUREMENT	<0.000011	<0.000011			<0.10	<0.10			1/wk	Grab
	PERMIT REQUIREMENT	0.0000578	0.000116	kg/day	**********	0.38	0.765	ug/l		Weekly	Grab
PCB-1242	SAMPLE MEASUREMENT	<0.000032	<0.000032			<0.30	<0.30			1/wk	Grab
	PERMIT REQUIREMENT	**********	**********	*******	**********	Report Only	0.5(2)	ug/l		Weekly	Grab
PCB-1248	SAMPLE MEASUREMENT	<0.000032	<0.000032			<0.30	<0.30			1/wk	Grab
	PERMIT REQUIREMENT	**********	**********	*******	**********	Report Only	0.5(2)	ug/l		Weekly	Grab
PCB-1254	SAMPLE MEASUREMENT	<0.000032	<0.000032			<0.30	<0.30			1/wk	Grab
	PERMIT REQUIREMENT	**********	**********	*******	**********	Report Only	0.5(2)	ug/l		Weekly	Grab

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TELEPHONE: AREA CODE 908 — NUMBER 572-4743

DATE: YEAR 98 — MO 2 — D 23

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

(REFER TO EPA FORM 3 40 WHICH MAY NOT BE USED)

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PCB-1260	SAMPLE MEASUREMENT	<0.000032	<0.000032			<0.30	<0.30			1/wk	Grab
	PERMIT REQUIREMENT	**********	**********	*******	**********	Report Only	0.5(2)	ug/l		Weekly	Grab
Arsenic	SAMPLE MEASUREMENT	0.00206	0.00304			20.3	28.1			1/wk	Comp
	PERMIT REQUIREMENT	0.013	0.026	kg/day	**********	85.8	172	ug/l		Weekly	Comp.
Cadmium	SAMPLE MEASUREMENT	<0.00054	<0.00054			<5.0	<5.0			1/wk	Comp
	PERMIT REQUIREMENT	0.0073	0.017	kg/day	**********	48.2	112	ug/l		Weekly	Comp.
Chromium	SAMPLE MEASUREMENT	<0.00108	<0.00108			<10	<10			1/wk	Comp
	PERMIT REQUIREMENT	0.0304	0.0660	kg/day	**********	198	396	ug/l		Weekly	Comp.
Copper	SAMPLE MEASUREMENT	0.00038	0.00065			3.2	8.1			1/wk	Comp
	PERMIT REQUIREMENT	**********	**********	*******	**********	Report Only	10	ug/l		Weekly	Comp.
Lead	SAMPLE MEASUREMENT	0.00027	0.00069			2.3	6.5			1/wk	Comp
	PERMIT REQUIREMENT	**********	**********	*******	**********	Report Only	10	ug/l		Weekly	Comp.
Nickel	SAMPLE MEASUREMENT	<0.0043	<0.0043			<40	<40			1/wk	Comp
	PERMIT REQUIREMENT	0.140	0.281	kg/day	**********	924	1850	ug/l		Weekly	Comp.

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Plant Manager
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Zinc	SAMPLE MEASUREMENT	0.00222	0.00297			21.6	28.1			1/wk	Comp
	PERMIT REQUIREMENT	0.177	0.356	kg/day	**********	1170	2350	ug/l		Weekly	Comp.
Cyanide	SAMPLE MEASUREMENT	<0.00108	<0.00108			<10.0	<10.0			1/wk	Comp
	PERMIT REQUIREMENT	0.002	0.004	kg/day	**********	13.2	26.4	ug/l		Weekly	Comp.
Aluminum	SAMPLE MEASUREMENT	<0.0108	<0.0108			<10	<10			1/wk	Comp
	PERMIT REQUIREMENT	1.40	2.81	kg/day	**********	9240	18,500	ug/l		Weekly	Comp.
Iron	SAMPLE MEASUREMENT	<0.0108	<0.0108			<100	<100			1/wk	Comp
	PERMIT REQUIREMENT	80.6	162	kg/day	**********	532,000	1,070,000	ug/l		Weekly	Comp.
Acute Toxicity, (LC50)	SAMPLE MEASUREMENT				67.6						
	PERMIT REQUIREMENT	**********	**********	******	50(3)	**********	**********	%		See Permit Equivalent	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Pierre A. Watkins, Sr.
Plant Supervisor
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)*

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE 908, NUMBER 572-4743

DATE: YEAR 98, MO 2, D 23

COMMENT AND EXPLANATION OF ANY VIOLATIONS *(Reference all attachments here)*

(REPLACES EPA FORM 3320-1 WHICH MAY NOT BE USED)