From:	Haskins, Tom
То:	HARMLESS, MARTY
Cc:	Loewe \ Jeff; Haney, Mark
Subject:	NIPSCO LLC Bailly Generating Station Post-Closure Groundwater Monitoring Well Network Device Installation Plan
	Revision 1
Date:	Tuesday, July 2, 2024 2:41:17 PM
Attachments:	image001.png
	BGS Device Installation Plan Revision 1 Final.pdf

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Good afternoon, Marty,

On April 25, 2024, on behalf of NIPSCO LLC (NIPSCO), WSP USA Inc (WSP) submitted the Post-Closure Monitoring Well Network Device Installation Plan (DIP) for the Bailly Generating Station (BGS) in Chesterton, Indiana in accordance with requirements of the March 28, 2024, Indiana Department of Environmental Management (IDEM) Approval of Closure/Post-Closure Plan, Northern Indiana Public Service Company LLC, Bailly Generating Station, SW Program ID 64-014. The DIP was approved by IDEM on May 20, 2024. Prior to mobilization and installation of the monitoring wells, WSP and NIPSCO determined the proximity to overhead utilities warranted alternate drilling methods and well construction than those detailed in the DIP (i.e., access with a limited-access drilling rig rather than full size auger rig). Attached to this email is NIPSCO's Post-Closure Monitoring Well Network Device Installation Plan Revision 1, which summarizes and incorporates the alternate drilling methods, rationale, and well construction details discussed between yourself and Jeff Loewe on June 28th, 2024.

Should you have any questions regarding this revision to the DIP, do not hesitate to contact me, Mark Haney at <u>mark.haney@wsp.com</u>, or Jeff Loewe at <u>iloewe@nisource.com</u>.

Regards,

Tom



Tom Haskins, P.G. (IN, WA) Lead Consultant, Geologist

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REPORT

Post-Closure Monitoring Well Network Device Installation Plan

Northern Indiana Public Service Company LLC Bailly Generating Station

Submitted to:

Northern Indiana Public Service Company LLC

801 East 86th Avenue Merrillville, IN 46410

Submitted by:

WSP USA Inc

10 Al Paul Lane, Suite 103 Merrimack, NH 03054

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July 2024

Revision 1.0

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Figure 2	Post-Closure Monitoring Well Network

ATTACHMENTS

Attachment 1

Wood Closure Application for CCR Surface Impoundments – Bailly Generating Station (February 3, 2021)

Attachment 2

Example Soil Boring Log (GAMW-01)

1.0 INTRODUCTION

WSP USA Inc. (WSP) prepared this Post-Closure Monitoring Well Network Device Installation Plan Revision 1.0 (Device Installation Plan 1.0) for the Northern Indiana Public Service Company LLC (NIPSCO) Bailly Generating Station (BGS, Site), located at 246 Bailey Station Road, Chesterton, Porter County, Indiana (Figure 1). WSP prepared the first Device Installation Plan dated April 2024, which was approved by the Indiana Department of Environmental Management (IDEM) on May 20, 2024. The purpose of this Device Installation Plan 1.0 is to provide revised, IDEM-approved post-closure monitoring well drilling methods, in addition to the original well locations and depth intervals, sampling procedures, and other pertinent information stipulated in the IDEM March 28, 2024 Approval of Closure/Post-Closure Plan, Bailly Generating Station, SW Program ID 64-014, Jasper County (Approval Letter). WSP prepared this first revision of the Device Installation Plan to address a modified monitoring well installation approach due to the presence of overhead utilities within the vicinity of several of the proposed post-closure monitoring wells.

1.1 Background

On February 3, 2021, NIPSCO submitted a Surface Impoundment Closures (CCR Final Rule) Closure Application – Bailly Generating Station (Wood Environmental and Infrastructure Solutions, Inc [Wood, now WSP] 2021). This document included a proposed post-closure groundwater monitoring network for four former CCR surface impoundments at BGS: Primary Settling Pond No. 1 (Primary 1), Secondary Settling Pond No. 1 (Secondary 1), Primary Settling Pond No. 2 (Primary 2), and Boiler Slag Pond. Among other details, the proposed monitoring program specified well depths/screened intervals based on historical site data and information available at the time of submittal. The proposed well details were reviewed by and agreed to by IDEM in an Approval Letter dated March 28, 2024.

IDEM's Approval Letter requested additional post-closure monitoring wells to reduce spacing between devices in the groundwater monitoring network including:

- A new background well pair further upgradient (east) of the CCR Units
- An additional well between GAMW-13 and MW-112
- Additional wells to the south of CCR Units based on localized groundwater flow direction.

NIPSCO's plan for addressing these requirements is detailed in the April 2024 Device Installation Plan. Closure construction at the Site is anticipated to initiate in the second quarter of 2024, and anticipated completion of final construction is the third quarter of 2025.

While onsite in June 2024, WSP identified overhead utilities in the vicinity of three proposed post-closure monitoring wells (GAMW-24 and GAMW-25/25B) that required installation via a limited-access drilling rig. Title 329 of the Indiana Administrative Code (IAC) 10-21-4(b) (which is referenced in IDEM's Approval of the Closure/Post-Closure Plan) requires that "the diameter of [a] borehole is at least four (4) inches larger than the diameter of the ground water monitoring well casing and screen." The 4-inch difference in annular space is most typically achieved using a hollow-stem auger (HSA) drilling rig with 6.25-inch outer diameter flights, however, given the need for a limited-access drilling rig, direct-push drilling techniques with a smaller drilling rig may be used instead, yielding a borehole two inches larger than the diameter of the monitoring well,

July 2024

rather than four inches. This Device Installation Plan 1.0 is revised to account for the use of either HSA or direct-push drilling techniques during monitoring well installation, as verbally approved by Mr. Marty Harmless (IDEM) on June 28th, 2024 via phone call.

2.0 MONITORING WELL NETWORK

The post-closure monitoring well network incorporates both new and existing Site groundwater monitoring wells. The proposed network was reviewed by IDEM, modified at IDEM's request, and was subsequently accepted, as documented in the Approval Letter and approval of the first Device Installation Plan. Of the proposed network, 29 post-closure monitoring wells and 5 piezometers were previously installed. A summary of the existing and proposed monitoring wells and piezometers is provided below and in attached Table 1.

	e Background ring Wells	Post-Closure Downgradient Monitoring Wells
Existing	NA*	GAMW-01, GAMW-01B, GAMW-02, GAMW-03, GAMW-04, GAMW-06, GAMW-07, GAMW-08, GAMW-08B, GAMW-10, GAMW-11, GAMW-11B, GAMW-11C, GAMW-12R, GAMW-13, GAMW-14, GAMW-16, GAMW-17, GAMW-17B, GAMW-18, GAMW-19, GAMW-20, GAMW-21, GAMW-22, GAMW-22B, GAMW-23, GAMW-23B, MW-105, and MW-112
Proposed	GAMW-25, GAMW-25B	GAMW-24, GAMW-26

*IDEM requested the current CCR Rule background pair GAMW-01/01B transition to downgradient status and be replaced with new well pair GAMW-25/25B in the IDEM post-closure monitoring well network.

2.1 Monitoring Well Installation Activities

One additional well pair and two monitoring wells will be installed concurrent with construction at the Site. Well pair GAMW-25/GAMW-25B will be installed upgradient to the east of Secondary 1, GAMW-26 will be installed northeast of the Boiler Slag Pond between existing monitoring wells GAMW-13 and MW-112, and GAMW-24 located south of Secondary 1, as requested by IDEM, as shown in Figure 2. Well installation will begin concurrent with closure construction activities in August 2024.

WSP will subcontract an Indiana State-licensed well driller to install the four devices using either 4.25-inch inside diameter (ID) HSA drilling techniques or direct-push drilling techniques. The anticipated proposed boring depths are provided in Table 1 and the table below; however, the boring depth may be adjusted in the field. After drilling is complete, the lower extent of the borehole will be sealed with bentonite and a one-foot sand filter pack buffer will be placed below the bottom of the well screeen, if necessary. This will enable screening of the monitoring well at the upper level of the aquifer while mitigating the adverse effects of bentonite near the well screen (e.g., clogging). Monitoring well construction procedures and protocols are detailed in Section 3.3.

Monitoring Well ID	Proposed Boring Depth (ft-bgs)	Screen Top Depth (ft-bgs)	Screen Bottom Depth (ft-bgs)	Well Diameter (in)
GAMW-24	24	13	23	2
GAMW-25	24	13	23	2
GAMW-25B	32*	27*	32*	2
GAMW-26	24	13	23	2

*The GAMW-25B boring will be advanced until the clay layer present on the south side of the site is encountered, and the well will be screened such that the base of the screen is just above the clay layer. Bring depth and screen intervals may be modified in the field.

In accordance with 329 IAC 10-21-4(f), WSP will provide IDEM with a 10-day notice prior to the installation of the wells.

3.0 DEVICE INSTALLATION PLAN REQUIREMENTS

In general conformance with the applicable requirements of 40 CFR 257.91, 329 IAC 10-21-4, 329 IAC 10-24-3, and IDEM requirements stated in Subsection D3 of the Approval Letter, this Device Installation Plan 1.0 includes:

- A map showing the location of each device with respect to the facility's entire System and a current potentiometric surface.
- A demonstration that each device will yield representative groundwater samples at an appropriate location and depth within the same aquifer or aquifers as the facility's existing System and will meet the installation requirements of 40 CFR 257.91(e).
- Drilling methods and procedures that follow 329 IAC 10-21-4, as applicable, unless direct-push drilling techniques are required due to drilling rig access; well construction materials and details, including protocol for collecting, describing, and analyzing consolidated or unconsolidated materials (329 IAC 10-24-3(3)), as applicable to the Site.
- An example of a borehole log that includes information specified under 329 IAC 10-24-3(2), as applicable.
- Environmental qualifications of all field personnel.
- Provisions to include the installation records in the facility operating record (40 CFR 257.91(e)(1)).

These requirements are further discussed in the sections below.

3.1 Site Map and Potentiometric Surface Map

A site map showing each well included in the post-closure monitoring well network is included as Figure 2. The most recent potentiometric surface map from November 2023 is included as Figure 3.

3.2 Demonstration of Representative Device Locations and Depths

The Wood Closure Plan Application (Attachment 1) includes several maps and cross sections of the CCR Surface

Impoundments subject to closure (B-1070 through B-1077 in Appendix D), the post-closure well network (Figure 2), and potentiometric surface (Figure 3) together demonstrating that each post-closure monitoring well location and depth are a) appropriately located within the network, and b) are screened within the same aquifer(s) as the existing monitoring well network. The proposed locations of the new post-closure monitoring wells were addressed in the Approval Letter.

New monitoring wells will be installed and cased in a manner that maintains the integrity of the monitoring well, including installation, development, and decommissioning, as necessary, and in accordance with 40 CFR 257.91(e). The post-closure well network construction details are included in Table 1.

3.3 Drilling Methods, Procedures, and Protocols

Drilling methods and procedures, as well as protocol for collecting, describing, and analyzing consolidated and unconsolidated soil, are discussed in the following sections, and will be performed in general accordance with 329 IAC 10-21-4 and 329 IAC 10-24-3(3), unless otherwise noted. Proposed deviations from 329 IAC 10-21-4 and 329 IAC 10-21-4 and 329 IAC 10-24-3(3), unless otherwise further herein.

3.3.1 Notification

The first Device Installation Plan was submitted to IDEM at least 60 days prior to the installation of new postclosure monitoring wells, as required by IDEM's Approval of the Closure/Post-Closure Plan. Following IDEM approval of this revision to the Device Installation Plan, IDEM will be notified prior to the monitoring well installation event, at that time with 10 days' notice in accordance with 329 IAC 10-21-4(f).

3.3.2 Soil Core Sampling and Retention

Continuous split-spoon samples (HSA) or core samples (direct-push) will be collected from the surface to the base of the deepest soil boring of a monitoring well pair or cluster using 4.25 ID HSA or direct-push drilling techniques. For the well pair, lithology will be duplicated from the deep pair boring log (i.e., shallow well GAMW-25 will not be logged, and boring logs will contain lithologies described in deep well GAMW-25B). The shallow well within the pair will not be sampled because stratigraphic differences between borings are unlikely given the spatial differences of borings within a pair (i.e., less than 5 feet apart).

Following logging for lithologic purposes, soil will be discarded in the vicinity of the well and will not otherwise be retained to minimize the risk of health and safety incidents related to the transport and placement of soil in a secure area (e.g., slips/trips on stairs, heavy lifting, potential spillage in other areas of the Site, etc.).

3.3.3 Soil Analysis

The Closure Approval references both 329 IAC 10-21-4 and 329 IAC 10-24-3(3), which contain separate, although similar, analysis requirements during soil boring installation, including analysis for grain size, cation exchange capacity (CEC), and hydraulic conductivity. Verbiage within these regulations suggests they are intended for monitoring well networks associated with new municipal or non-municipal solid waste landfills. For example, 329 IAC 10-24-3(3)(e) states "hydraulic conductivity sampling must occur ... at a depth of approximately five (5) feet below *the proposed* base of waste placement." The CCR impoundments at BGS are being excavated and backfilled with a clean borrow source. The analyses listed in these regulations do not further the impoundment closure, nor do the results of the analysis benefit the ensuing long-term groundwater monitoring for

residual impacts from the former impoundments. Subsequently, analyses for grain size, CEC, and hydraulic conductivity will not be performed as the data collected during those analyses does not provide value to impoundment closure or post-closure activities.

Hydraulic conductivity data has previously been collected at the Site, including data from existing post-closure monitoring wells GAMW-01, GAMW-08, GAMW-11 and GAMW11B. Hydraulic conductivity data is included in the July 2023 CCR Groundwater Monitoring System Design Manual Revision 3.0 (WSP 2023).

3.3.4 Soil Description and Classification

All split-spoon or core samples will be photographed and logged in accordance with ASTM D2487 Standard Practice for Classification of Soils for Engineering Purposes (Unified Soil Classification System) and ASTM D2488 Standard Practice for Description and Identification of Soils (Visual-Manual Procedures) by a qualified WSP geologist or engineer. The Wentworth Grain Size Scale (329 IAC 10-21-4(h)(9)(f)) will not be used by itself as it is not industry standard, nor has it been previously used by itself at BGS.

3.3.5 Monitoring Well Completion

Monitoring well construction will be completed in general accordance with 329 IAC 10-21-4 with two-inch diameter, schedule 40 PVC with 10 feet of 0.010-inch (No. 10-slot) screen connected to flush-threaded (with a Teflon seal) schedule 40 PVC riser pipe. Sand pack will consist of a clean, washed, acid-resistant, #5-sized silica sand inside the annulus of the boreholes. If installed via HSA drilling techniques, the sand pack will be poured via tremie pipe and continuously sounded from 0.5 feet below the bottom of the screen (1 foot for deep wells) until it extends to at least 2 feet above the top of the screened interval. A minimum three-foot bentonite seal will be placed on top of the filter pack by tremie pipe and the remaining annular space between the borehole and the riser will be grouted (cement/bentonite mix) using a tremie pipe (side discharge) from above the bentonite seal to within 2 feet of ground surface. If installed via direct-push drilling techniques, a prepacked monitoring well constructed with 20/40 silica sand surrounded by stainless steel mesh screen will be used in place of manual construction via tremie pipe. #5-sized silica sand will be poured into the annulus after prepack screen installation until sand extends at least 2 feet above the top of the screened interval (note: borehole collapse may occur while constructing a well with prepacked materials). A concrete seal will be placed from 2 feet below ground surface to the surface. The wells will be completed with locking, steel stickup protective casings or flush mount monuments, concrete apron, and concrete-filled bollards capable of withstanding minor impacts by typical vehicular traffic.

3.3.6 Well Development

Monitoring well development will occur no earlier than 48 hours after completion of each monitoring well, allowing for the seal and grout to have set. Hydraulic conductivity testing will not be performed following development as hydraulic conductivity data do not benefit Site closure or inform post-closure monitoring plans and activities. Additionally, existing hydraulic conductivity data have previously been collected onsite, discussed in Section 3.3.3.

3.4 Borehole Log

Final borehole logs from post-closure network installation will include all required criteria as defined by 329 IAC 10-24-3(2), including date and method of drilling, monitoring well construction, textural classification, soil

descriptions, water bearing zones, and static water level following completion of the monitoring well. The borehole log will include monitoring well construction details outlined in 329 IAC 10-21-4. An example borehole log from downgradient well GAMW-01 is included in Attachment 2 for reference.

As discussed in Section 3.3.2, samples will only be collected for logging purposes from deep monitoring wells. Subsequently, lithologies will only be described in the deep well pairs. Where there is a shallow well collocated with a new or existing deep well that has been sampled and logged, shallow well lithologies will be assumed to be the same as deep well lithologies.

3.5 Survey Data

The horizontal survey data historically used at BGS is the Indiana State Plane West (latitude and longitude); however, 329 IAC 10-21-4(h) references Universal Transverse Mercator coordinate system. For consistency with previously collected onsite data and industry standard practices, the horizontal datum will be Indiana State Plane West.

The vertical elevation datum historically used at BGS is the North American Vertical Datum of 1988 (NAVD88); however, 329 IAC 10-21-4(h) references the National Geodetic Vertical Datum of 1929, and 329 IAC 10-24-3(2) references mean sea level. For consistency with previously collected onsite data and industry standard practices, the vertical elevation datum will be collected using NAVD88.

3.6 Environmental Qualifications of Field Personnel

All work will be performed under the guidance and direction of an Indiana-State Licensed Geologist. When not physically onsite, the geologist will be immediately available by phone for support.

3.7 Recordkeeping

Installation, development, and/or decommissioning records will be included in the facility operating record in accordance with 40 CFR §257.91(e)(1). All field documentation will be submitted to IDEM within 60 days after completing all related field work.

https://golderassociates.sharepoint.com/sites/nipscoccrgwmonitoring/shared documents/bgs/reports/post-closure device installation plan/revision 1 july 2024/final/bgs device installation plan rev 1 2024-07-02.docx

Table 1: Post-Closure Monitoring Well NetworkNIPSCO LLC Bailly Generating StationChesterton, Indiana

		Ground	Total	Top of Casing	Sounded		Corrow	Screen	Depth		Screen Elevat	ion
	Monitoring Well ID	Surface	Borehole	Elevation	Well Depth	Well Material	Screen Length	Тор	Bottom	Тор	Middle	Bottom
		Elevation (ft-NAVD88)	Depth (ft-bgs)	(ft-NAVD88)	(ft-btoc)	wen wateria	(ft)	(ft-bgs)	ft-bgs)	(ft- NAVD88)	(ft-NAVD88)	(ft-NAVD88)
Background	GAMW-25 ¹	TBD	TBD	TBD	TBD	2" Sch 40 PVC	10	13	23	TBD	TBD	TBD
Backyrounu	GAMW-25B ¹	TBD	TBD	TBD	TBD	2" Sch 40 PVC	5	27	32	TBD	TBD	TBD
	GAMW-12R	622.94	28	625.91	31.40	2" Sch 40 PVC	10	17	27	604.51	599.51	594.51
	GAMW-13	622.10	23	625.34	26.43	2" Sch 40 PVC	10	13	23	608.91	603.91	598.91
Boiler Slag Pond	GAMW-14	621.60	23	624.32	26.46	2" Sch 40 PVC	10	13	23	607.86	602.86	597.86
	GAMW-26 ¹	TBD	TBD	TBD	TBD	2" Sch 40 PVC	10	13	23	TBD	TBD	TBD
	MW-105	619.17	18	622.05	21.29	2" Sch 40 PVC	10	8	18	610.76	605.76	600.76
	GAMW-06	624.50	27	626.97	29.57	2" Sch 40 PVC	10	17	27	607.40	602.40	597.40
	GAMW-07	626.00	29	629.04	31.84	2" Sch 40 PVC	10	19	29	607.20	602.20	597.20
	GAMW-08	621.20	25	624.35	28.14	2" Sch 40 PVC	10	15	25	606.21	601.21	596.21
	GAMW-08B	620.80	40	623.73	42.87	2" Sch 40 PVC	10	30	40	590.86	585.86	580.86
	GAMW-10	629.30	31	631.94	32.76	2" Sch 40 PVC	10	21	31	609.18	604.18	599.18
	GAMW-11	622.00	24	625.04	27.40	2" Sch 40 PVC	10	14	24	607.64	602.64	597.64
	GAMW-11B	622.10	75	624.89	78.13	2" Sch 40 PVC	5	70	75	551.76	549.26	546.76
	GAMW-11C	621.83	34	625.16	37.95	2" Sch 40 PVC	5	29	34	592.21	589.71	587.21
	GAMW-16	627.20	30	629.92	32.70	2" Sch 40 PVC	10	20	30	607.22	602.22	597.22
Primary 1 and	GAMW-17	620.67	25	623.98	27.25	2" Sch 40 PVC	10	14.5	24.5	606.73	601.73	596.73
Primary 2	GAMW-17B	620.74	34	624.10	36.87	2" Sch 40 PVC	5	28.5	33.5	592.23	589.73	587.23
	GAMW-18	623.68	30	626.87	32.71	2" Sch 40 PVC	10	20	30	604.16	599.16	594.16
	GAMW-19	619.43	20	622.18	22.43	2" Sch 40 PVC	10	9	19	609.75	604.75	599.75
	GAMW-20	612.39	19	615.64	21.83	2" Sch 40 PVC	10	8	18	603.81	598.81	593.81
	GAMW-21	607.89	15	611.25	17.9	2" Sch 40 PVC	10	4.3	14.3	603.35	598.35	593.35
	GAMW-22	622.10	23	621.78	22.85	2" Sch 40 PVC	10	12.9	22.9	608.93	603.93	598.93
	GAMW-22B	622.11	38	621.82	37.72	2" Sch 40 PVC	10	28	38	594.10	589.10	584.10
	GAMW-23	620.75	23	620.45	23.02	2" Sch 40 PVC	10	13	23	607.43	602.43	597.43
	GAMW-23B	620.76	39	620.49	38.90	2" Sch 40 PVC	10	29	39	591.59	586.59	581.59
	MW-112	624.93	27	628.07	30.22	2" Sch 40 PVC	10	17	27	607.85	602.85	597.85
	GAMW-01	621.26	23	624.53	26.32	2" Sch 40 PVC	10	13	23	608.21	603.21	598.21
	GAMW-01B	621.08	32	623.76	34.98	2" Sch 40 PVC	5	27	32	593.78	591.28	588.78
	GAMW-02	621.30	23	624.20	26.48	2" Sch 40 PVC	10	13	23	607.72	602.72	597.72
Secondary 1	GAMW-03	621.00	23	624.35	27.09	2" Sch 40 PVC	10	13	23	607.26	602.26	597.26
	GAMW-04	620.90	23	624.12	26.37	2" Sch 40 PVC	10	13	23	607.75	602.75	597.75
	GAMW-24 ¹	TBD	TBD	TBD	TBD	2" Sch 40 PVC	10	13	23	TBD	TBD	TBD
	MW-102	616.46	15	619.23	17.77	2" Sch 40 PVC	10	5	15	611.46	606.46	601.46
	MW-103	619.95	19	622.97	22.02	2" Sch 40 PVC	10	9	19	610.95	605.95	600.95
Piezometers	MW-104	619.05	34	622.13	37.08	2" Sch 40 PVC	10	9	19	595.05	590.05	585.05
	MW-114	622.62	24	625.72	27.10	2" Sch 40 PVC	10	14	24	608.62	603.62	598.62
Notes:	MW-115	620.73	21	623.40	23.67	2" Sch 40 PVC	10	11	21	609.73	604.73	599.73

Notes:

¹ Screen length and screen depth values are approximate target depths and may be adjusted based on field observations.

ft-bgs = feet below ground surface

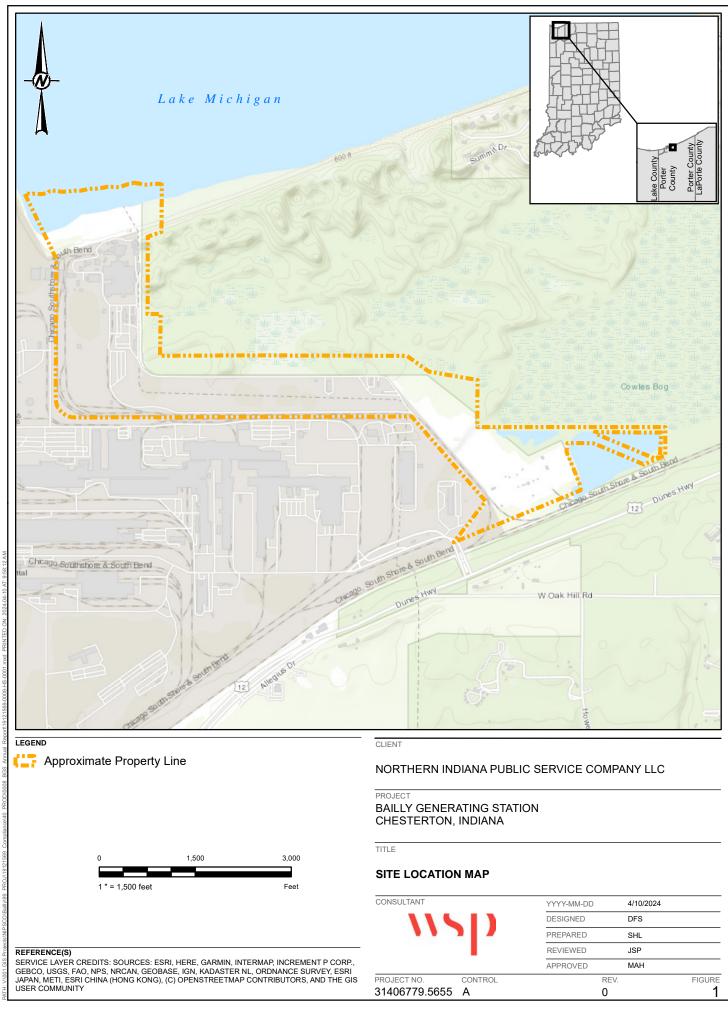
ft-btoc = feet below top of casing

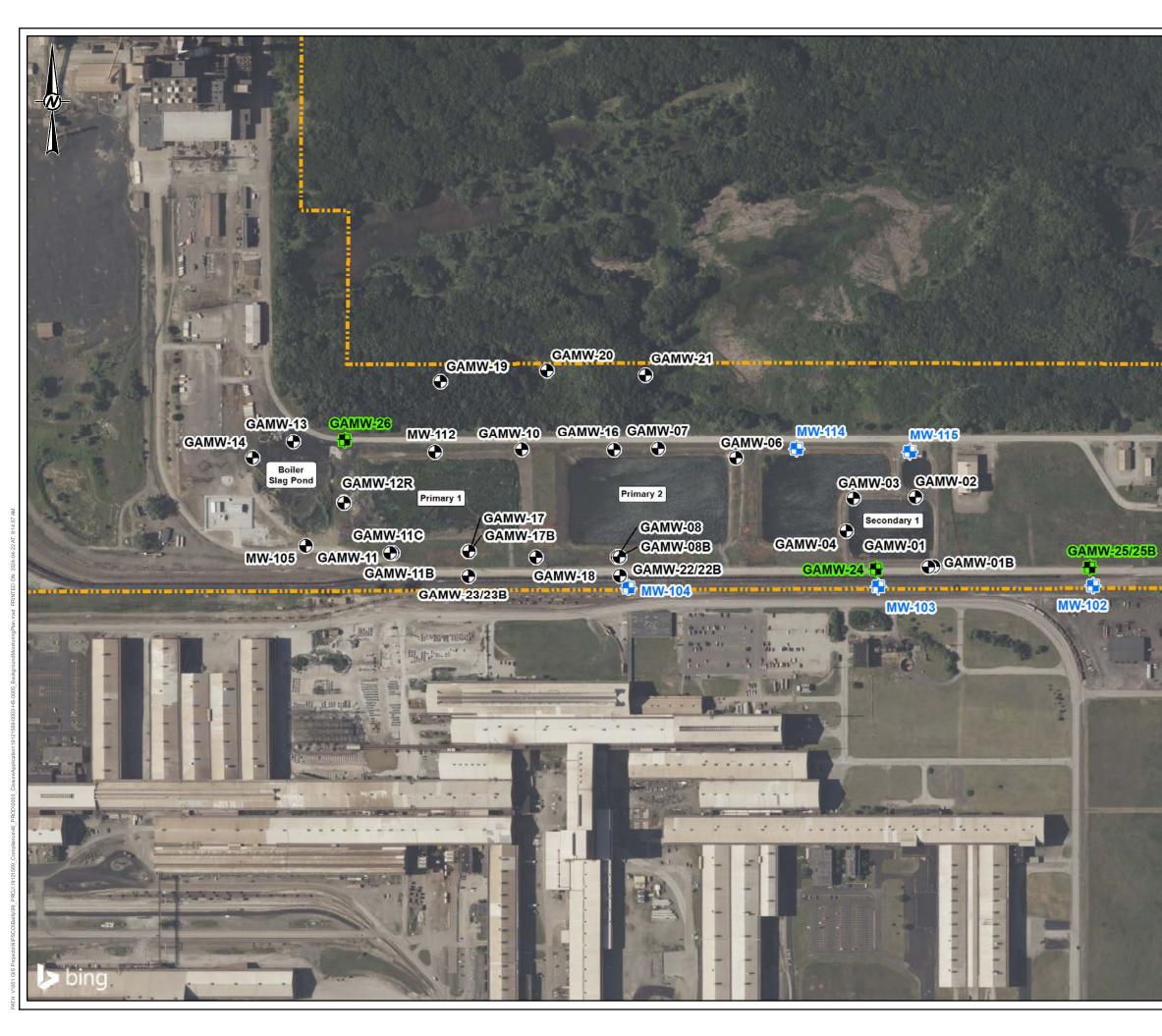
ft-NAVD88 = feet relative to the North American Vertical Datum of 1988

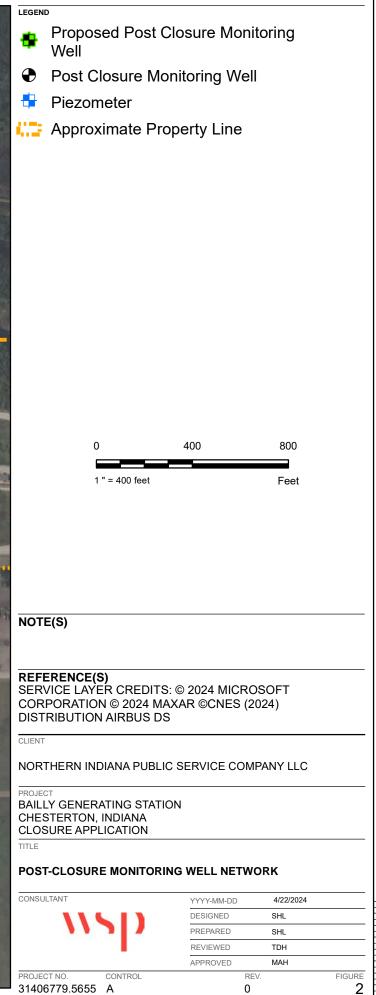
TBD = To Be Determined, values will be at time of device installation and/or well survey

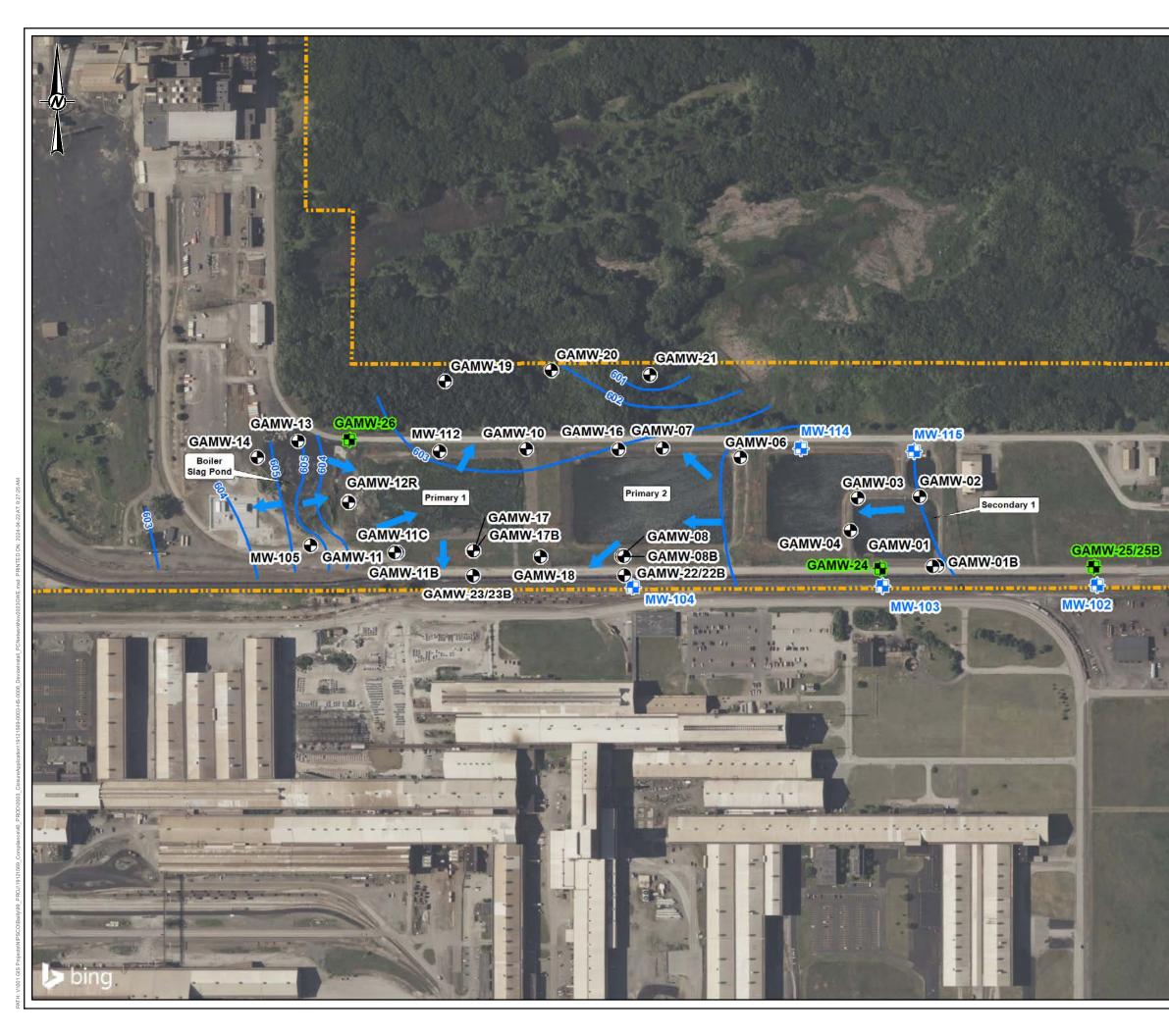
2" Sch 40 PVC = Two-inch diameter well, constructed of schedule 40 polyvinyl chloride materials

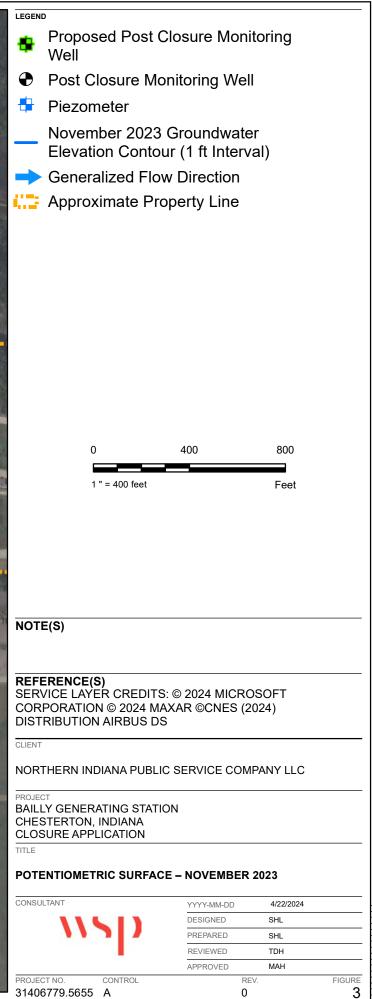
Prepared by:	SHL
Checked by:	TDH
Reviewed by:	MAH











1 IF THIS MEASUREMENT DOES NOT MATCH WHAT IS SHOWN, THE SHEET SIZE HAS BEEN MODIFIEI

ATTACHMENT 1

Wood Closure Application for CCR Surface Impoundments – Bailly Generating Station (February 3, 2021)



3 February 2021

RECEIVED FEB 4 2021 DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF LAND QUALITY

Ms. Alysa Hopkins Raleigh, Permit Manager Indiana Department of Environmental Management Solid Waste Permits – IGCN 1101 100 North Senate Avenue Indianapolis, IN 46204-2251

Subject: Closure Application for CCR Surface Impoundments Bailly Generating Station Chesterton, Indiana

Dear Ms. Raleigh:

The Northern Indiana Public Service Company LLC (NIPSCO LLC) respectfully submits the enclosed Closure Application for the CCR surface impoundments at the Bailly Generating Station. If you have questions or require additional information, please contact me at 219-647-5249 or jloewe@nisource.com.

Sincerely,

Mr. Lacue Jeffrey M. Loewe

Principal NiSource Environmental

Attachments: Volume 1 – Closure Application and Drawings (Appendix A) Volume 2 – Appendices B to G Volume 3 – Appendix H



3 February 2021

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Mr. Jeff Loewe Northern Indiana Public Service Company LLC 801 E. 86th Avenue Merrillville, IN 46410

Re: Closure Application – CCR Surface Impoundments Bailly Generating Station Chesterton, Indiana Wood Project No. 7382-17-3270

Dear Mr. Loewe:

Wood Environment and Infrastructure Solutions (Wood) is submitting this Closure Application for CCR surface impoundments at the Bailly Generating Station. The Closure Application includes a closure plan, figures, and appendices describing the approach and conceptual methods to address removal of CCR materials to meet Federal and State of Indiana regulations.

We appreciate this opportunity to provide engineering services to Northern Indiana Public Service Company LLC. If you have questions regarding the Closure Application, please contact us at 502-267-0700.

Sincerely Wood Environment and Infrastructure Solutions, Inc.

Richard A. Isaac, PE Senior Engineer

John W. Storm PE Project Manager, Principal Engineer

Closure Application Attachments:

Volume 1 - Closure Application and Drawings (Appendix A) Volume 2 - Appendices B through G Volume 3 - Appendix H





Surface Impoundment Closures (CCR Final Rule) Closure Application

Bailly Generating Station

Northern Indiana Public Service Company LLC, Merrillville, Indiana

Prepared for:

Northern Indiana Public Service Company LLC Merrillville, Indiana

Prepared by:

Wood Environment & Infrastructure Solutions, Inc. 11003 Bluegrass Parkway Suite 690 Louisville, Kentucky 40299 USA T: 502-267-0700

2/3/2021



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List of acronyms

3H:1V	3 horizontal to 1 vertical		
AMSL	above mean sea level		
ASTM	American Society for Testing and Materials		
bgs	below ground surface		
BGS	Bailly Generating Station		
CCR	coal combustion residuals		
CFR	Code of Federal Regulations		
cm/sec	centimeters per second		
GWPS	groundwater protection standards		
HDPE	high-density polyethylene		
IAC	Indiana Administrative Code		
IDEM	Indiana Department of Environmental Management		
IDNP	Indiana Dunes National Park		
IDNR	Indiana Department of Natural Resources		
LCL	lower confidence limit		
LKD	lime kiln dust		
LPL	lower prediction limit		
MCGS	Michigan City Generating Station		
MCL	maximum contaminant level		
NC	non-compliance		
NGVD29	National Geodetic Vertical Datum of 1929		
NIPSCO L	LC Northern Indiana Public Service Company LLC		
NPDES	National Pollutant Discharge Elimination System		
PVC	polyvinyl chloride		
QAPP	quality assurance project plan		
RCRA	Resource Conservation and Recovery Act		
RMSGS	R.M. Schahfer Generating Station		
SAP	sampling and analysis plan		
SSI	statistically significant increase		
SSL	statistically significant level		
SWMU	solid waste management unit		
UCL	upper confidence limit		
UPL	upper prediction limit		
USEPA	United States Environmental Protection Agency		
USGS	United States Geological Survey		

1.0 Introduction

The Bailly Generating Station (BGS), owned by the Northern Indiana Public Service Company LLC (NIPSCO LLC), generated electricity using coal-fired boilers from 1962 until 2018. The coal-fired electricity generating process produced coal combustion residuals (CCR) in the form of boiler slag and fly ash. The CCR materials were sluiced into on-site surface impoundments located southeast of the generating station.

The United States Environmental Protection Agency (USEPA) published the Disposal of Coal Combustion Residuals from Electric Utilities Final Rule (CCR Rule) in the Federal Register on 17 April 2015 requiring closure of CCR surface impoundments not meeting the CCR Rule requirements. The State of Indiana Environmental Rules Board adopted an emergency rule incorporating the USEPA CCR Final Rule requirements for CCR surface impoundments into 329 Indiana Administrative Code (IAC) 10. The amendments in the emergency rule went through a full rule writing process and became permanent 10 December 2016. The Indiana Department of Environmental Management (IDEM) adopted an amendment to update Indiana's regulations for regulating CCR disposal facilities to standards equivalent to the USEPA Rule.

This closure application was prepared to outline and present the plan and objectives to close these regulated surface impoundments to meet federal and state requirements.

1.1 BGS surface impoundments

The BGS has six surface impoundments located southeast of the generating station. Four of the surface impoundments are CCR Rule regulated. Secondary Settling Pond No. 2 and the Forebay did not manage CCR and are not CCR Rule regulated.

BGS Surface impoundments			
CCR surface impoundments	Non-CCR impoundments		
Boiler Slag Pond	Secondary Settling Pond No. 2		
Primary Settling Pond No. 1	Forebay		
Primary Settling Pond No. 2			
Secondary Settling Pond No. 1			

1.2 Closure application objectives

The closure application objectives are to:

- Comply with state and federal regulatory requirements
- Present rationale for proposed closure by removal
- Provide engineering drawings depicting limits and methods to achieve closure by removal
- Describe anticipated post-closure care monitoring and maintenance activities
- Present the post-closure care groundwater monitoring plan
- Develop a schedule for closure and post-closure care activities

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• Develop closure and post-closure care opinion of probable costs

2.0 Facility overview

2.1 Location and setting

The BGS is located on the southern shore of Lake Michigan on approximately 350 acres near Chesterton, Indiana. (see Figure 1 - Site Location Map). The street address is 246 Bailly Station Road, Chesterton, Indiana 46304 at latitude 41° 38' 18" North, and 87° 07' 02" West. The Township is 37N, Range 6W, and Section 21. The BGS and surrounding area are shown on United States Geological Survey (USGS) Quadrangle Map Dune Acres (see Figure 2 - Site Vicinity Map).

The BGS is bounded on the north by Lake Michigan, the east by the Indiana Dunes National Park (IDNP), and on the west and south by ArcelorMittal Steel (formerly Mittal Steel, formerly International Steel Group, and before that, Bethlehem Steel), and partially on the south by US Route 12 and freight and commuter rail lines.

2.2 Facility development

The BGS initiated construction in 1959 with a single coal fired unit (Unit 7) and began commercial operation in 1962. Beginning in 1966, a major expansion project was undertaken to allow construction of a second coal-fired generating unit, Unit 8, which became operational in 1968.

The BGS ceased the coal-fired boilers operation 30 April 2018. A third generator (Unit No. 10), which burned natural gas was retired on 15 July 2020.

2.3 Surface impoundments

Four CCR surface impoundments are located southeast of the BGS generating station. An aerial photograph of the BGS, along with the surface impoundment locations, is presented in Figure 3 - Aerial Photograph of Surface Impoundments. The surface impoundments are primarily incised, constructed below ground surface, with interior side slopes to the pond bottoms. Sargent and Lundy Engineers designed the current configuration of the surface impoundments that began operation in 1981. The surface impoundments were constructed with a liner system consisting of one foot of natural clay and a geomembrane component, with a sand cushion layer and steel furnace slag surface protection. The area and estimated volume of CCR material within each of the surface impoundments is presented in Table 1.

Surface impoundment	Impoundment type	Impoundment size (acres)	Current Estimated CCR volume (cubic yards)
Boiler Slag Pond	Partially incised	1.2	1,000 ⁽¹⁾
Primary Settling Pond No. 1	Incised	5.6	28,000 ⁽²⁾
Primary Settling Pond No. 2	Incised	7.2	20,000 ⁽³⁾
Secondary Settling Pond No. 1	Incised	2.5	6,000 ⁽²⁾

Table 1: Surface Impoundment Closure Information Surface Impoundments Closure Application, Bailly Generating Station



Note 1: The Closure Plan prepared by Haley and Aldrich dated 7 February 2019 indicated 11,000 cubic yards (CY) of boiler slag. In 2020, Harsco Recycling Co. removed usable boiler slag from the impoundment for beneficial use. It is estimated that 90% of the boiler slag was removed and current remaining volume is on the order of 1,000 CY.

Note 2: CCR volume based on Closure Plan prepared by Haley and Aldrich dated 7 February 2019. Note 3: Volume based on Closure Plan prepared by Golder dated January 2019

Note that the current impoundment configuration is located within the footprint of a previous set of surface impoundments. It is believed that the original boiler slag pond, primary settling ponds and secondary ponds were first used when the facility operations began in 1962. Although no formal records were found to confirm this suspected date, a review of historic aerial photos and archived design drawings suggest that 1962 is reasonably correct. Significant reconstruction and reconfiguration of these impoundments took place when the original ponds were reportedly dredged and reconfigured with construction completed in 1981.

2.4 **Previous site investigations**

Previous site investigations have been performed at the BGS. The following are relevant to the surface impoundments:

- AMEC Earth & Environmental, Inc. (AMEC), 2005. RCRA Current Conditions Report, NIPSCO Bailly Generating Station Chesterton, Indiana, prepared for Northern Indiana Public Service Company, April 13, 2005.
- AMEC, 2007b. RCRA Facility Investigation Report. NIPSCO Bailly Generating Station, Chesterton, Indiana. August 30, 2007.
- Amec, 2008, 2008 Michigan City Generating Station Subsurface Investigation Summary, Michigan City, Indiana.
- AMEC, 2010. RCRA Facility Investigation Report for Area B. NIPSCO Bailly Generating Station, Chesterton, Indiana. August 16, 2010.
- USGS Water Resources Investigation 81-16 (USGS, 1981). Data from this 1981 USGS water resources investigation titled, "Effects of Coal Fly Ash Disposal on Water Quality in and around the Indiana Dunes National Lakeshore."
- Water Resources Report 85-4340 (USGS, 1986). This 1986 USGS water resources investigation titled, "Shallow Ground-Water Flow, Water Levels, and Quality of Water 1980-84, Cowles Unit, Indiana Dunes National Lakeshore."
- Final Round 10 Dam Assessment Report Bailly Generating Station Coal Ash Impoundments. Prepared by GZA, Inc. dated 17 August 2012.RCRA Facility Investigation (RFI) Report submitted on August 30, 2007 (AMEC, 2007),

3.0 Geology and hydrogeology information

3.1 Physiography

The BGS is located within the Calumet Lacustrine Plain, a physiographic province characterized by three post-glacial dune-beach complexes and bordered on the north by Lake Michigan and on the south by the Valparaiso Morainal Area (Shedlock et al., 1994). The dune-beach complexes parallel the BGS and the current lakeshore boundary. Local geomorphology from the lakeshore to the south consists of the Holocene and Tolleston dune-beach complex, the western portion of the Great Marsh (an interdunal lowland), and the Calumet and Glenwood dune-beach complex; however, the landscape has been modified to support the BGS facility activities and consists primarily of cut and fill



materials (Cohen and Shedlock, 1986). The area northeast of the BGS is preserved largely in its natural state as part of the IDNL and consists of the Great Marsh and landforms of the Holocene and Tolleston dune-beach complex. Part of the Great Marsh northeast of the BGS is designated as the Cowles Bog National Natural Landmark (Cowles Bog).

The land surface elevation ranges from approximately 578 feet above mean sea level (AMSL) along the shore of Lake Michigan to approximately 627 feet AMSL within the BGS. The elevation ranges from approximately 619 feet to 627 feet AMSL. The locations of Geologic Cross Section A-A', and Geologic Cross Section B-B', are shown on Figure 1 and Figure 2, respectively in Appendix B.

3.2 Geology

The geology along the Lake Michigan southern shore represents a complex glacial and post-glacial history consisting of shallow-water coastal lake, wetland, and dune sedimentation that began during, and continued after, the final stages of glacial retreat in the Great Lakes area.

3.2.1 Bedrock geology

Unconsolidated deposits in the BGS vicinity are underlain by the Antrium Shale (Upper Devonian) and carbonate rock (Muscatatuck Group) of Devonian Age. Bedrock in the BGS vicinity ranges from 430 feet to 450 feet AMSL. The Antrium Shale consists of brown to black non-calcareous shale and para conformably (strata are parallel, and the contact is a simple bedding plane) overlies the Muscatatuck Group rocks in the BGS area. The Muscatatuck Group consists of rocks that are predominately limestone and dolomite.

A 1977 USGS boring near the eastern portion of the BGS encountered bedrock (Antrium Shale) at 175 feet below ground surface (bgs). A second USGS boring on the western portion of the BGS encountered shale (Antrium Shale) at 182 feet bgs.

3.2.2 Unconsolidated deposits

Indiana Dunes region subsurface unconsolidated deposits are comprised of three distinct sedimentary units: the basal, middle (till), and surface units. These three sedimentary units can be seen in Geologic Cross Section A-A' presented in Figure 1 in Appendix B.

The basal unit consists of randomly interbedded clay, sand and gravel, and till, and rests on the irregular Paleozoic bedrock surface. The thickness of this lowermost lithologic unit in the area of the BGS is highly variable because of the underlying bedrock's relief and sediments erosion.

The middle unit (till) consists of an assemblage of interbedded, till, glacial/lake clay, sand, and gravel. This unit outcrops in the region as the Lake Border Moraine, about 0.5 miles south of the BGS. The middle unit thickness ranges from 0 feet to 80 feet. The glacial/lake deposits are well developed northward within the unit, where the unit extends under Lake Michigan. The till deposit at the BGS is thickest to the north bordering Lake Michigan, and is thinnest southwest of the BGS, where the till may be discontinuous (Meyer and Tucci, 1979).

The surface unit, an outcropping along the Lake Michigan southern shore, consists of coastal sand with minor gravel, clay, calcareous mud, and peat. This series of dune complexes began forming in response to changes in lake level and changes in the amount of sediment supplied to the coastline. The Holocene and Tolleston dune-beach deposits underlying the BGS and extending northeast along the shore are composed of up to 50 feet of fine-grained, well-sorted eolian sand with lesser lacustrine beach sand and gravel (Hardy, 1981).



Historical USGS investigations indicate the unconsolidated deposits' upper 50 feet are composed of gray to tan fine sand with some zones of medium sand and gravel. The lower 130 feet are comprised of silty lake clay with interspersed thin beds of silty sands.

3.2.3 Soils

Soils in the BGS vicinity are composed primarily of five types: Oakville fine sand, Houghton muck, Adrian muck, Maumee loamy fine sand, and dune sand.

Soils (surficial deposits) in the BGS area are mainly dune deposits that contain sand and some fine gravel. In addition to the dune deposits, the IDNP intradunal wetlands contain paludal deposits (peat, muck, some marl, and mixtures of peat and sand). The largest portion of land used for industrial purposes is classified as cut and fill.

3.3 Hydrogeology

3.3.1 Bedrock aquifers

The occurrence of bedrock aquifers in the Lake Michigan region depends on the original composition of the rocks and post-depositional changes, which can influence hydraulic properties. The Antrium Shale is a poorly productive shale that overlies the fairly productive carbonates of the Muscatatuck Group. In general, bedrock aquifers are not utilized in the area because of the unproductive shale at the bedrock surface and availability of water from the overlying glacial deposits (Indiana Department of Natural Resources [IDNR], 1994).

3.3.2 Surficial aquifers

Surficial aquifers under the BGS consist of glacially derived sediments associated directly or indirectly with Lake Michigan ice lobe advance and retreat during the Wisconsinan glaciation. There are three major aquifers within the unconsolidated sediments surrounding the BGS: basal, subtill, and surficial. The basal sand aquifer appears to be thicker east of the BGS, although the aquifer extent is not well defined.

The most extensive confined aquifer in the area is the subtill aquifer, which consists primarily of sand with interbedded lenses of clay. The subtill aquifer is part of the geologic middle unit and underlies the entire area of the Lake Border Moraine, which originates in the upland areas south of the BGS and extends beneath the easternmost portion of the BGS based on multiple borings advanced by Wood during the Resource Conservation and Recovery Act (RCRA) Corrective Action program. The subtill aquifer does not appear to extend westward below the CCR Units.

The most extensive aquifer in the BGS area is the surficial aquifer, which consists primarily of unconfined lacustrine and eolian sands. The surficial aquifer under the BGS is approximately 50 feet thick, and groundwater flow in the surficial aquifer is primarily horizontal toward Lake Michigan. The surficial aquifer is sometimes separated into an upper and lower sand unit by a calcareous clay of variable thickness and continuity. This clay unit was encountered in some of the borings advanced near the CCR units during the RCRA Corrective Action and CCR programs. Near the CCR units the saturated thickness of the uppermost sand aquifer ranges from 15 feet to 30 feet depending on the height of the fluctuating water table. Regional estimates of aquifer transmissivity (unconsolidated deposits) in the vicinity range from 10,000 to 50,000 gallons per day per foot (IDNR, 1994). No water supply wells exist within the BGS and, according to information provided by the IDNR, no potable water supply wells exist within the portion of IDNL located hydraulically downgradient of the BGS.

A line of extraction wells was installed in an east-west alignment approximately 600 feet south of the BGS surface impoundments on the ArcelorMittal Steel property that were once used to dewater



foundations at several buildings. Online records available from the Indiana Department of Natural Resources (IDNR) show that the test capacities of these wells ranged from 300 to 1000 gallons per minute (gpm) at the time of installation. None of these wells are registered with the IDNR as Significant Withdraw Wells.

Additional wells were installed on the ArcelorMittal Steel property further south of the above referenced well alignment, including one Significant Withdraw Well. IDNR records indicate that this well has an average annual pumping rate of approximately 200 gpm. The following was stated in a letter by EPA provided to NiSource Environmental Remediation, dated January 21, 2021, "According to ArcelorMittal, of the 35 dewatering wells that were installed many years ago, only one is still in use...The only dewatering well that is currently in use is pumping groundwater at 15 gallons per minute." This information corroborates Woods understanding of the current pumping well south of the impoundments on the Arcelor Mittal property with the exception of the pumping rate.

3.3.3 Surface water

Lake Michigan is located immediately north of the BGS. Industrial consumers and public utilities use Lake Michigan for multiple purposes. The Little Calumet River is located approximately 0.5 miles south of the BGS, and discharges to Lake Michigan through Burns Ditch about 5 stream miles west of the BGS, as shown in Figure 3 - Aerial Photograph of Surface Impoundments.

Surface water features at the BGS include the Boiler Slag Pond, Primary Settling Pond No. 1, Primary Settling Pond No. 2, Secondary Settling Pond No. 1, Secondary Settling Pond No. 2, and the Forebay as shown in Figure 4. Surface water runoff predominately from the coal pile area is managed in the Coal Handling Maintenance Surface Impoundment and the Coal Pile Runoff Absorption Area. Permanent surface water bodies known as the Southeast Ponds are present abutting the far eastern portion of the BGS and wetlands that contain surface water depending on precipitation and groundwater elevations, including Central Blag Slough, Little Lake, and the Eastern Wetlands are present in the IDNP north and northwest of the CCR Units.

4.0 Regulatory framework

Federal regulations contain primary closure requirements for CCR surface impoundments at the BGS. The Federal CCR Rule (40 CFR 257), hereinafter referred to as "the CCR Final Rule," lists rules and requirements to be implemented to close the surface impoundments cited in this closure application.

Prior to the CCR Final Rule, the State of Indiana developed regulatory guidance for closing surface impoundments as outlined in 329 IAC 10. The State of Indiana has incorporated the CCR Final Rule by reference.

This closure application has been prepared to address the CCR Final Rule and applicable IDEM regulations as related to specific closure requirements and post-closure care and cost opinions.

4.1 Federal CCR Rule

The CCR Final Rule was published in the Federal Register 17 April 2015 and became effective 19 October 2015. Written closure plan and post-closure care requirements are set forth in 40 CFR § 257.102 (b)(1) and 40 CFR § 257.104, respectively, and are discussed more fully within this closure application. CCR Final Rule closure requirements applicable to the surface impoundments include:

- General Provisions in 257.50 through 257.53
- Ground water monitoring and corrective action standards in 257.90 through 257.98
- Closure and post-closure care standards in 257.100 through 257.104



• Recordkeeping, notification, and posting of information to the Internet in 257.105 through 257.107.

5.0 Surface impoundment description

Sargent & Lundy Engineers designed the surface impoundments beginning in 1978 with construction completed in 1981. The impoundments are incised, excavated below the surrounding ground surface. A perimeter slope was excavated downward to the relatively flat impoundment bottom. Each surface impoundment was constructed with a liner system consisting of the following components presented in descending order from top to bottom:

- One-foot of coarse-graded crushed steel furnace slag
- Six inches of sand
- A geomembrane
- Six inches of sand
- One foot of clay soil material.

One exception to this bottom liner system configuration is the Boiler Slag Pond has two feet of steel furnace slag as the top component.

Overhead power lines span all four of the surface impoundments in the east / west direction. Overhead power lines including transmission line support towers are present along the southern and northern impoundment limits. The support towers are located as follows:

- East of the Boiler Slag Pond and at the southwest corner of Primary Settling Pond No. 1
- At the southeast corner of Primary Settling Pond No. 1 and the southwest corner of Primary Settling Pond No. 2
- At the southeast corner of Primary Settling Pond No. 2 and the southwest corner of Secondary Settling Pond No. 2
- East of Secondary Settling Pond No. 1.

The support towers are located on unexcavated areas that exist between the impoundments. The overhead transmission lines and support towers were in place prior to construction of the currently configured surface impoundments.

A piping system was constructed to transfer operational water through the surface impoundment system. Boiler slag was sluiced from the generating station to the impoundment. Fly ash was sluiced to Primary Settling Pond No. 1 and Primary Settling Pond No. 2. Sluiced water was transferred from the Boiler Slag Pond to Primary Settling Pond No. 1. Operational waters were subsequently transferred from Primary Settling Pond No. 1 through the existing piping system and subsequently into the Forebay for discharge.

5.1 Boiler Slag Pond

The Boiler Slag Pond has an irregular shape, approximately 335 feet long by 160 feet wide and encompasses approximately 1.2 acres. Based on the Closure Plan prepared by Haley and Aldrich dated 7 February 2019, the impoundment contained as much as 11,000 CY of CCR material. In 2020, Harsco Recycling Co. (Harsco), removed usable boiler slag from the impoundment for beneficial use. It is estimated that approximately 90% of the boiler slag was removed and remaining CCR is estimated to be on the order of 1,000 CY.

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The Boiler Slag Pond was designed as a lined surface impoundment with an approximate depth ranging from 8 to 9 feet. This depth corresponds to a bottom of impoundment elevation (top of liner) of approximately 618.5 to 619.5 feet NAVD88 (North American Vertical Datum of 1988) sloping toward Primary Settling Pond No. 1.

The impoundment interior slopes were designed at 3 horizontal to 1 vertical (3H:1V); however, excavation for slag removal and erosion have occurred, allowing steepened interior slopes with light vegetation near the ground surface. The exterior slopes are at 3H:1V, sparsely vegetated with grass, with some signs of erosion.

5.2 Primary Settling Pond No. 1

Primary Settling Pond No. 1 measures approximately 750 feet long by 350 feet wide and encompasses approximately 5.6 acres. The surface impoundment is incised with an approximately 120-foot-wide flat area between Primary Settling Pond No. 1 and Primary Settling Pond No. 2. The interior slopes are constructed at 3H:1V. Primary Settling Pond No. 1 contains approximately 28,000 cubic yards of CCR material, based on the Closure Plan prepare by Haley and Aldrich dated 7 February 2019. Primary Settling Pond No. 1 is a lined surface impoundment with an approximate depth ranging from 8 to 10 feet. The bottom elevation is approximately 611.5 feet to 613.5 NAVD88.

5.3 Primary Settling Pond No. 2

Primary Settling Pond No. 2 measures approximately 750 feet long by 400 feet wide and encompasses approximately 7.2 acres. Primary Settling Pond No. 2 is an incised pond with an approximately 100-foot-wide flat area present between Primary Settling Pond No. 2 and Secondary Settling Pond No. 2 located to the east. The interior slopes are constructed at 3H:1V.

Primary Settling Pond No. 2 is a lined surface impoundment with an approximate depth below ground surface ranging from 20 feet to 14 feet from west to east. It has a bottom elevation (top of liner elevation) of approximately 612.5 feet to 610.5 feet, sloping from west to east. The top of the impoundment is at approximately 625 feet on the north and east sides, approximately 620 feet along the south side, and approximately 635 feet on the west side. Primary Settling Pond No. 2 stores approximately 20,000 cubic yards of CCR material, based on the Closure Plan-Rev 2 prepared by Golder dated January 2019.

5.4 Secondary Settling Pond No. 1

Secondary Settling Pond No. 1 measures approximately 385 feet long by 275 feet wide and encompasses approximately 2.5 acres. It is an incised pond with interior slopes constructed at 3H:1V. Secondary Settling Pond No. contains approximately 6,000 cubic yards of CCR material, based on the Closure Plan prepared by Haley and Aldrich dated 7 February 2019.

Secondary Settling Pond No. 1 is a lined surface impoundment with a bottom elevation (top of liner elevation) of approximately 609.5 feet to 608.5 feet NAVD88, sloping from west to east. The top of the impoundment is at approximately 620 feet to 623 feet NAVD88 with an approximate depth ranging from 10 to 14 feet.

6.0 Closure approach

The following sections discuss the surface impoundments closure approach.

6.1 General approach

Removing the surface impoundment contents (CCR) is the proposed closure method. CCR material will be excavated and transported to the NIPSCO LLC R.M. Schahfer Generating Station (RMSGS)



onsite landfill for disposal (or possibly sold for beneficial use). The CCR materials from each surface impoundment will be excavated, placed in highway dump trucks, and transported over a predetermined route to the RMSGS.

Closure by removal will include removing contents to the impoundments limits as determined from the Sargent and Lundy construction documents. The surface impoundment closure will consider requirements to preserve the overhead powerlines, including poles and high transmission metal towers running along the surface impoundment's northern and southern boundaries.

The surface impoundments liner components will be removed for disposal in the NIPSCO LLC RMSGS onsite landfill. The geomembrane material will be separated from the slag/sand/clay soil material for disposal at the RMSGS CCR Landfill or in an off-site facility permitted to accept the geomembrane material. The impoundment slopes associated with unexcavated areas between the impoundments were lined to extend up the perimeter slope beyond the CCR/ free water level. The liner will be removed from the perimeter slopes and verification procedures performed as described in this closure application.

As indicated, the impoundments were constructed by excavating below the ground surface, therefore berms were not constructed with the exception of the partial berm at the Boiler Slag Pond. The berm material at this location will be excavated and disposed at the RMSGS on-site CCR landfill.

Removal verification procedures will be conducted at the bottom of the surface impoundments upon excavation completion for the surface impoundment CCR and liner system. Verification will include visual observations for the presence of CCR and topographical survey of the CCR limits, liner system limits, and excavation bottom. Photographs will be taken to document the CCR removal conditions.

Grading and placing off-site soil/topsoil material to a minimum depth of 2 feet (18 inches of soil material and 6 inches of topsoil) will create a final cover and promote storm water runoff. Post closure storm water runoff will be managed by gravity drainage or by using the existing piping system and Forebay pumping station.

6.2 Closure performance standard

The CCR Rule as well as IDEM regulations establish requirements for the CCR surface impoundment closures. The closure performance standards are listed in Table 2.

Regulation	Citation	Closure performance standard
		An owner or operator may elect to close a CCR unit by removing and decontaminating all areas affected by releases from the CCR unit.
40 CFR 257	102(c)	CCR removal and decontamination of the CCR unit are complete when constituent concentrations throughout the CCR unit and any areas affected by releases from the CCR unit have been removed and groundwater monitoring concentrations do not exceed the groundwater protection standard established pursuant to \$257.95(h) for constituents listed in Appendix IV to this part.

Table 2: Closure Performance Standards

Surface Impoundment Closure Application, Bailly Generating Station



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Regulation	Citation	Closure performance standard
	102(d)	Control post closure infiltration of liquids through the former unit. Permeability of soil cover layer is not less than 1×10^{-5} centimeters per second (cm/sec).
40CFR 257		Preclude the probability of future impoundment of water, sediment, or slurry.
100111237		Provide for major slope stability to prevent sloughing or movement.
		Minimize need for maintenance
		Timely completion of closure
	10-30-1	Owner or operators of Type I and Type II restricted waste sites and non-municipal solid waste landfills shall close the facilities in such a manner that:
		Minimizes the need for further maintenance
329 IAC		• Controls post-closure escape of waste, waste constituents, leachate, contaminated precipitation, or waste decomposition products to the ground or surface waters or the atmosphere
		• At a minimum, is in compliance with applicable closure provisions and conditions imposed in the facility permit.

7.0 Closure design

Closure will be conducted by removing surface impoundment contents (CCR materials). The following sections of this closure application provide closure methodology discussions and details. Removing impounded water, dewatering interstitial water, and moisture conditioning of the CCR will be conducted as necessary to complete the surface impoundment closures. The impoundment liner system (as described previously) will be removed and disposed. Backfill soil to achieve subgrade and a two-foot soil cover will be placed over the former surface impoundment areas following excavation to provide:

- 1. Grading to manage surface water runoff
- 2. Final cover as a separation layer and to limit infiltration.

Overhead electrical transmission lines including poles and high transmission metal towers are present along the surface impoundments' northern and southern boundaries. The support structures (towers) and below grade foundations are located adjacent to the surface impoundments. The transmission lines will remain in operation and final closure design must consider the towers' integrity with respect to CCR excavation and removal near them.

7.1 Demolition

The inflow pipelines associated with CCR and non-CCR discharge will be properly cut off and capped at the impoundment limit and grouted with a minimum length of 10 feet of flowable fill. The Boiler Slag Pond has a concrete retaining wall that will be demolished and properly disposed during closure.

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System piping not used for post-closure grading and drainage will be removed when the excavation activity is performed. The removed piping will be cut for placement in roll-off boxes for off-site disposal in a disposal facility permitted to accept the pipe materials. Concrete structures associated with the piping system will be demolished with the reinforcing materials removed for recycling, if appropriate, and the concrete debris placed in roll-off boxes for off-site disposal in a disposal facility permitted to accept the pipe materials.

7.2 Dewatering considerations

Water management will be required during surface impoundments closure activities. Requirements include free water removal, CCR interstitial water removal, storm water control during closure implementation, and potential groundwater inflow. Water management will be conducted using trenches and sumps, mechanical pumps, well point systems, or removal wells. Dewatering operations and associated discharges during closure will be managed to meet IDEM guidelines, federal discharge limits, and NPDES requirements, as appropriate. NIPSCO LLC will coordinate with IDEM's Office of Water Quality to develop allowable discharge conditions and constituent limits.

The groundwater level around the surface impoundments is typically located near the bottom on the ponds, depending on the varying bottom elevations. Levels have fluctuated since the BGS ceased operation of the coal-fired boiler operations. Groundwater levels dropped significantly at the Boiler Slag Pond to levels that are currently 6 feet or more below the deepest liner bottom elevation of 614.5 ft NAVD88. The water level decline at Primary Settling Pond 1 was less pronounced compared to the Boiler Slag Pond. Current groundwater elevations at Primary Settling Pond 1 are a foot or more below the deepest liner base elevation of 608.5 ft NAVD88. Water level declines after the plant shutdown were not evident at Primary Settling Pond 2 or Secondary Settling Pond 1. Groundwater levels at Primary Settling Pond 2 occasionally rise above the deepest liner base elevation of 607.5 ft NAVD88, whereas groundwater levels at Secondary Settling Pond 1 routinely rise above the highest liner base elevation of 606.5 ft NAVD, and since 2016 have always been above the lowest liner base elevation of 605.5 ft NAVD88.

Expected water management activities are discussed as follows:

- Free water removal The surface impoundments at the BGS contain approximately 22 million gallons of free water (based on closure plans previously referenced). Free water removal will be performed by gravity flow and, where necessary, mechanical pumping, discharging to the permitted NPDES discharge. Shallow trenches or sumps excavated prior to commencing grading activities, and pumps installed, if necessary, can lower the surface impoundment water level to allow excavation activities to begin.
- CCR interstitial water removal Water draining from the CCR materials during excavation will be managed during closure activities. This water will be collected in sumps for appropriate discharge and or disposal.
- Storm water control Storm water from rainfall events will be managed based on the stage of
 closure for each of the surface impoundments. Rainfall occurring during the excavation activity
 will be diverted, as needed, using perimeter ditches, diversion berms, and/or swales to direct
 surface run on around/away from the surface impoundments. Rainfall within the excavation areas
 will be managed with ditches to direct the water to sumps. Storm water will be evaluated for
 appropriate discharge or disposal.



• Potential groundwater inflow -Closure activities are likely to encounter groundwater depending on the seasonal conditions and fluctuating groundwater elevations. Consideration will be given to performing excavation work during the summer construction season. Accumulated groundwater, if encountered, will be collected in sumps, by well points and/or rim ditches.

7.3 CCR excavation

CCR materials in the surface impoundments will be excavated following completion of the free water removal activity and transported for disposal in the RMSGS onsite landfill. The excavation sequence is expected to begin with the Boiler Slag Pond and move west to east to Primary Settling Pond No. 1, Primary Settling Pond No. 2, and finish with Secondary Settling Pond No. 1. The actual excavation sequence will be a collaborative decision of NIPSCO LLC and the selected closure contractor.

7.3.1 Excavation

CCR material will be excavated using appropriate equipment, e.g., track-mounted hydraulic excavators, bulldozers, on-road dump trucks, etc. The CCR materials will be excavated, drained of excess water, conditioned as necessary, and placed in over-the-road (highway) dump trucks for transport to the NIPSCO LLC RMSGS onsite landfill for disposal. Liner materials will be excavated using similar equipment and methods as the CCR material excavation. The blast furnace slag and geomembrane liner material will be separated from the sand and clay soil material for disposal at the RMSGS CCR Landfill or in an off-site disposal facility permitted to accept the blast furnace slag and geomembrane material. The sand and clay soil material will be loaded and transported for disposal in the NIPSCO LLC RMSGS onsite landfill. Material excavation information and estimated excavation volumes are presented in Table 3.

The CCR material will be excavated to the depth of the design bottom of each of the surface impoundments, plus removal of the bottom liner system. Visual verification of CCR removal will be performed upon completion of the surface impoundment excavation. The excavation limits i.e. bottom and side slopes, will be field surveyed to provide a record of the depth of the CCR materials, bottom liner system, and final excavation depth.

7.3.2 CCR conditioning

Based on the moisture level after dewatering, excavated CCR materials may require conditioning prior to loading and transporting the CCR materials for disposal. Conditioning may include draining by gravity, mixing with available drier material, and, if required, adding stabilization/ solidification materials such as quicklime, cement kiln dust (CKD), lime kiln dust (LKD), or Portland cement. The requirement for conditioning will be field determined based on site specific conditions and paint filter test results.

7.3.3 Dust Control

Construction dust will be carefully controlled and monitored throughout the closure project duration to comply with all local, state and national requirements. Per 40 CFR 257.80, NIPSCO has prepared a CCR Fugitive Dust Control Plan (Plan) for the Bailly Generating Station . While this Plan more directly addresses facility operations activities, the dust control measures are appropriate and will be applied/enforced during the closure construction activities. The contractor will be required to control and manage dust throughout every phase of the project. The contractor will be required to meet BGS's Air Quality Permit conditions. A project-specific dust control plan will be one of the contractor's required submittals for performing excavation, transport, and backfilling activities.

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CCR impoundment name	Bottom of impoundment/CCR elevation (feet)	Removal excavation elevation (feet)	Current Estimated CCR Volume CY	Estimated Liner Volume CY	Estimated excavation volume (cubic yards) 1
Boiler Slag Pond	619	615	1,000	12,000	13,000
Primary Settling Pond No. 1	612	609	28,000	29,000	57,000
Primary Settling Pond No. 2	611	608	20,000	31,000	51,000
Secondary Settling Pond No. 1	609	606	6,000	10,000	16,000
Total	-	-	55,000	82,000	137,000

Table 3: Preliminary Surface Impoundment Excavation Information Surface Impoundment Closure Application, Bailly Generating Station

Dust Control will incorporate measures to minimize CCR from becoming airborne during closure activities. Primary dust control will be addressed by applying water to haul roads, open excavation areas, and stockpiles. Appropriate measures will be taken to properly address site surface areas. This activity generally consists of wetting the CCR with water such that wind dispersal does not occur. Water is applied to site surface areas using water trucks, spray nozzles and all-terrain vehicles to maintain appropriate moisture conditions during construction. Dust control equipment will generally operate continuously during active construction hours unless site conditions are such that dust control is not necessary. Conditioning can also be accomplished with an appropriate chemical dust suppression agent. Stockpiles can be covered with tarps or plastic sheeting to prevent dust dispersal. Haul trucks used to transport CCR will be equipped with heavy duty tarps to cover/ contain the CCR during transport, as well as sealed tailgates.

7.3.4 CCR transport and disposal

Transportation and disposal of the excavated CCR will be to the NIPSCO LLC RMSGS onsite, CCRcompliant landfill. The excavated CCR/ liner materials will be loaded in highway-compatible trucks equipped with tarpaulins/covers and be transported using a pre-determined route to the NIPSCO LLC RMSGS onsite landfill. The CCR/liner materials will be disposed at the RMSGS onsite landfill as directed by the RMSGS onsite landfill operator. The required permits and/or authorizations for CCR/liner material transportation and disposal will be obtained in accordance with local, municipal, state, and federal rules and regulations. NIPSCO LLC, if required, will coordinate with IDEM any RMSGS onsite landfill permit amendments related to disposing of the CCR/liner materials, including possible CCR/liner conditioning materials such as LKD, Portland cement, or other amendments, from the surface impoundments. Off-site transportation and disposal of blast furnace slag and



geomembrane liner materials will follow the same procedures as the CCR/liner materials off-site transportation and disposal.

Transport and disposal of the CCR and liner materials will be documented during closure activities. The volume, method of disposal, and final location of the CCR/liner materials will be documented.

Measures will be employed to prevent trucks transporting the CCR/liner material for off-site disposal from carrying CCR/ liner material outside the impoundment closure footprint. One of the following methods or a combination thereof will be used:

- Construction of an aggregate construction entrance where the trucks leave the CCR impoundment footprint.
- Construction of a temporary wheel/undercarriage wash located where the vehicles leave the excavation areas and before the vehicles exit the BGS property.

7.3.5 Closure removal verification

Visual observations will be conducted to evaluate removal of physical CCR materials upon completion of the excavation of the CCR material and bottom liner materials. A topographic survey will be conducted to determine the final excavation limit and be documented with photographs.

An appropriately spaced grid system will be established in the field for each of the former surface impoundment areas. Verification will occur at the approximate center of each grid.

7.4 **Closure certification**

Closure certification for the surface impoundments will include:

- A certification statement signed by NIPSCO LLC and a qualified Indiana professional engineer stating the surface impoundments have been closed in accordance with the approved closure application.
 - A notification of former surface impoundments closure completion will be placed in the BGS's operating record
 - The notification of completion will be submitted within 60 days of completing the former surface impoundments closure.
- Verification NIPSCO LLC has recorded a notation on the deed to the property, which will, in perpetuity, notify any potential purchaser of the property the land was formerly used as CCR material surface impoundment. At a minimum, the recorded notation will contain:
 - The general types and locations of where the former CCR materials resided
 - The former CCR materials depth
 - A plot plan, with surface contours at intervals of 2 feet, indicating:
 - Final land surface water run-off direction(s)
 - Surface water control structures after closure completion
 - Final grading
 - A statement prohibiting construction; installation of wells, pipes, conduits, or septic systems; or any other excavation on the property without approval by the IDEM commissioner.

Certification will require documentation that the surface impoundments closure meets the requirements contained in the drawings and technical specifications for closure by removal. This



closure application includes a construction quality assurance plan (see Appendix D) used to document implementation of the surface impoundments closure including CCR material excavation and disposal, structural fill installation, topsoil installation, and final surface area vegetation.

8.0 Post closure grading/soil cover

A 2-foot soil cover will be required over the excavated areas to meet the closure performance standard as defined in the CCR Rule. The former surface impoundment areas will be backfilled with off-site soil material to the elevations and grades shown on Drawing 4 - Final Grading Plan provided in Appendix A. The contour elevations shown on the final grading plan represent the top of the placed surface cover. The final grades also consider surface water control/management. The volume of final grading/backfill material including topsoil is shown in Table 4.

Table 4: Preliminary Surface Impoundments Soil Cover Information

Closure Application, Bailly Generating Station

Material	Estimated grading/backfill volume (cubic yards)
Soil cover - 18 inches	90,000
Topsoil - 6 inches	15,000
Total	105,000

8.1 **Borrow source/soil cover requirements**

Two feet of soil cover will include a minimum of 18 inches of soil material and six inches of topsoil material. A borrow source will be determined by the contractor at the time of closure construction to provide necessary final grading and soil cover requirements. Therefore, the borrow location(s) are not currently available. The following soil cover properties will be required and verified when selecting the borrow source:

- A maximum particle size of 3 inches
- A Unified Soil Classification System classification of SC, ML, ML-CL, or CL as determined by American Society for Testing and Materials (ASTM) D2487-11
- Permeability ≤ 1 x 10-05 cm/sec as determined by ASTM D5084-16a.

The topsoil material will be obtained from an off-site source meeting requirement for particle size analysis (ASTM D422-63(2007) e2), organic content (ASTM D2974-14), and pH (ASTM D4972-13).

8.2 Soil cover placement

The soil cover will consist of off-site borrow material placed in successive lifts of loose material not more than 12 inches thick. Each lift will be uniformly spread on the preceding lift that has been moistened or aerated, as necessary, and scarified or otherwise broken up in such a manner that the material bonds with the surface on which it is placed. Off-site borrow material should be placed with the following considerations:

- Slope the surface of each lift as shown on the drawings to promote free draining of water from the lift
- The surface of each lift will be free of loose material and foreign objects

- Remove the soil material in any areas where it becomes soft or yielding, replace with satisfactory soil borrow materials, and compact the soil borrow materials
- Fill and level ruts in the surface of any lift before compacting
- Seal the surface of the last lift placed at the end of each day using a vibratory smooth-drum roller
- Compaction accomplished by pneumatic-tired roller, vibratory compactor, or other equipment suitable to compact the soil material to a Standard Proctor of 95%
- Acceptable criteria for compaction are at an appropriate moisture content determined by the Standard Proctor (ASTM D698-12e2) optimum moisture content to achieve a dry density greater than or equal to 95% of the Standard Proctor (ASTM D698-12e2) maximum dry density
- In-place density testing using a nuclear density gauge to verify acceptance of the compaction effort.

Moisture condition the fill (if necessary) for any areas that fail the compaction requirements and recompact the area until it meets compaction requirements. Scarify or moisture condition the entire lift before the succeeding lift is placed if large areas of any lift fail the compaction requirements.

The topsoil will be placed and graded using low-ground-pressure track-mounted equipment to minimize consolidation in the topsoil material. The cover area will be seeded following acceptance of the topsoil material placement, to establish vegetative growth to minimize potential erosion and sediment issues. A disc will be used, if required, to break up the top surface of the topsoil to provide an adequate seed bed. The topsoil and seed mix including material characteristics and type will be specified in the technical specifications prepared for contractors to use in installing the topsoil cover and vegetation.

8.3 **Post-closure surface water management**

Final grading was conceptually developed to allow surface drainage of storm water through the postclosure surface impoundment system. Storm water runoff from the Boiler Slag Pond to Primary Settling Pond No. 1 will discharge by gravity through the existing 24-inch drainpipe. Similarly, storm water from Primary Settling Pond No. 1 and Primary Settling Pond No. 2 will drain to Secondary Settling Pond No. 1 by gravity flow through the existing 36-inch and 30-inch drainpipes, respectively.

Secondary Settling Pond No. 1 will be adapted as a permanent detention pond in conjunction with the Forebay discharge structure. Gravity or mechanical means will be used to transfer storm water to the Forebay for discharge. The existing pump station at the Forebay has ample capacity to pump down the storm water runoff to the permitted NPDES discharge. A geosynthetic liner will be installed at Secondary Settling Pond No. 1 for containment purposes.

The Final CCR Rule 40 CFR §257.81 provides requirements for surface water run-on and run-off controls. The surface water run-off was designed to handle the peak discharge from a 25-year, 24-hour storm event. As discussed previously, perimeter ditches/swales are included in the surface impoundments final backfill grading. The final surface water control structures are shown on Drawing 6 provided in Appendix A, with the calculations for the surface water controls included in Appendix C.

Appropriate erosion protection and sediment controls will be established for the post-closure condition. Erosion protection and sediment control drawings will be included in the closure drawings to provide adequate on-site control and prevent surface materials off-site migration. Loss-of-material calculations will be performed based on the selected backfill/surface cover materials. NIPSCO LLC will prepare a Storm Water Pollution Prevention Plan (SWPPP), based on design and configuration of the

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erosion protection and sediment controls required throughout surface impoundment closure activities.

9.0 Closure schedule

The BGS surface impoundment closure schedule is provided in Table 5. The closure schedule was developed considering:

- Current estimate of the year in which the surface impoundment closure activities will be completed
- Description of sequential steps to close the surface impoundments:
 - Coordinating and obtaining permit approvals
 - Dewatering and removing the CCR materials
 - Installing the soil cover.

Closure dates other than the completed closure (regulatory) date are considered preliminary for establishing the closure sequence and relative time periods to perform primary activities. These dates may be adjusted in the future.

Table 5: Proposed Surface Impoundments Closure Schedule

Surface Impoundments Closure Application, Bailly Generating Station

Closure activity	Scheduled start	Scheduled completion
Submit closure application to IDEM		3 February 2021
Public outreach meeting		To Be Determined
IDEM closure approval period	21 January 2021	31 December 2021
Prepare closure construction documents, bid and award	01 Mar 2021	31 December 2021
Estimated surface impoundments closure	Q2 2024	Q3 2025

10.0 Post-closure care

The post-closure care plan describes operations, monitoring, and maintenance activities required for the closed surface impoundments throughout the post-closure care period. The post-closure care period duration is mandated to be a minimum of 30 years following IDEM acceptance of the surface impoundment closure certifications and can be extended if any of the subject former surface impoundments are under assessment monitoring in accordance with 40 CFR §257.95. NIPSCO LLC will be responsible for compliance with 40 CFR §257.104 and 329 IAC 10-31 following IDEM acceptance of closure certifications for the surface impoundments, including, but not limited to:

- Maintaining final backfill area integrity and effectiveness
- Repairing the final backfill as necessary to correct effects of settlement, subsidence, erosion, or other issues, and preventing run-on and run-off from eroding or otherwise damaging the final backfill area
- Maintaining the groundwater monitoring system and monitoring groundwater in accordance with 40 CFR §257.90 through §257.98, 329 IAC 10-29 and 10-31, and additional IDEM closure requirements as may be applicable under the approved Closure Application

The items included in the post-closure care plan for the closed surface impoundments are described in the following sections.

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10.1 Groundwater monitoring

Post-closure requirements include establishing, operating, and maintaining a groundwater monitoring program that addresses each of the subject closed surface impoundments and meets the applicable standards of 40 CFR §257.90-98, 40 CFR §104, 329 IAC 10-29, and 329 IAC 10-31.

Surface impoundments Primary Settling Pond 1 (Primary 1), Primary Settling Pond 2 (Primary 2), Secondary Settling Pond 1 (Secondary 1), and the Boiler Slag Pond are subject to the selfimplementing CCR Rule requirements, including groundwater monitoring to identify whether releases have occurred during operating and post-closure care periods. In addition to the self-implementing Federal CCR Rule requirements, when and where applicable, the IDEM Office of Land Quality has released and previously indicated that NIPSCO LLC will be subject to application of the Surface Impoundment Closure Guidance (SICG) during any Closure Application review process.

10.1.1 Overview of existing groundwater monitoring system

NIPSCO LLC designed the monitoring network described herein to meet the performance standards specified in 40 CFR §257.91, modifying and supplementing the initial system as appropriate to address site conditions. The monitoring network adequately monitors representative background groundwater conditions and the quality of groundwater downgradient of each CCR Unit. In designing and installing the network, NIPSCO LLC identified two existing monitoring wells (MW-105 and MW-112 – installed as part of the BGS RCRA Corrective Action program) that are appropriately located and constructed to serve as CCR Rule-compliant monitoring wells. In 2016, NIPSCO installed additional monitoring wells at each CCR Unit based on knowledge of historical site conditions, a Site Conceptual Model, and interpretation of the CCR Rule requirements.

To complete and update the monitoring well network for the CCR Units (i.e., BSP, combined Primary 1 and 2, and Secondary 1), NIPSCO LLC ultimately installed 21 monitoring wells, including six new wells in 2019 at the locations shown in Drawing BGS-04 in Appendix A. NIPSCO LLC selected monitoring wells GAMW-01 and GAMW-01B (installed in 2019) to serve as background wells for all CCR Units. The downgradient monitoring well networks around the BSP and Secondary 1 remain unchanged since inception of the CCR Rule monitoring program. NIPSCO LLC modified the existing monitoring well network near Primary 1 and Primary 2 (now considered one CCR Unit for the purposes of groundwater monitoring) to account for changed conditions and additional information about the site and area conditions, including the variable groundwater flow directions resulting from the cessation of influent to the CCR Units.

10.1.2 Monitoring program approach

Going forward, until IDEM adopts the Federal CCR regulations at the state level in final form and is authorized to implement Indiana's rules in lieu of the Federal program, NIPSCO LLC is faced with operating groundwater program(s) to satisfy two separate and at times overlapping requirements. These somewhat similar, although not identical, requirements include monitoring to satisfy the CCR Rule self-implementing requirements, and, ultimately, enacting a post-closure monitoring program referenced in 329 IAC Rule 10-29 and 329 IAC Rule 10-31 as a condition of Closure Application approval.

Satisfying these two programs simultaneously makes design, coordination with, and approval by IDEM and subsequent operation of such monitoring complex. This is due to the possibility that, under the self-implementing CCR Rule regulations, monitoring parameters and frequencies can change because of groundwater monitoring results (e.g., transition from detection monitoring to assessment monitoring or vice-versa, establishment of groundwater protection standards [GWPS], exceedance of one or more GWPS). The current monitoring program, driven by the Federal CCR Rule regulatory

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requirements in place at this time, does not lend itself to a traditional 329 IAC post-closure monitoring approach.

For these four surface impoundments included in the Closure Application – Primary 1, Primary 2, Secondary 1, and Boiler Slag Pond – NIPSCO LLC proposes a comprehensive post-closure groundwater monitoring program that addresses aspects of and combines appropriate existing elements from each of the applicable Federal and state obligations identified above – namely, the CCR Rule requirements and 329 IAC Rule 10-29 and 329 IAC Rule 10-31 regulations – and considers the findings and implications of the CCR monitoring data. Details of the post-closure program are presented in sections as follows: monitoring well network and basis of design, sampling and analysis plan, sampling frequency, monitoring parameters, data evaluation/statistics, quality assurance project plan, corrective action, data reporting, post-closure monitoring term, and summary and supporting documents.

10.1.3 Monitoring well network and basis of design

NIPSCO LLC is currently monitoring a series of existing background and downgradient wells screened within the uppermost aquifer to satisfy ongoing Federal CCR Rule program requirements.

Site geology in the vicinity of the surface impoundments from ground surface to depth includes:

- Fill: A fill layer is generally present around the CCR Units from ground surface to approximately three to 10 feet below ground surface (ft bgs). The fill material includes a mixture of fly ash, boiler slag, and sand.
- Light Brown/Brown Sand: A loose to compact fine to coarse-grained light brown to brown dune-beach and lacustrine sand with varying quantities of fine gravels and silts underlies the fill material and varies in thickness from approximately 20 to 30 feet.
- Silty Clay (upper clay unit): An approximately two- to four-foot thick interbedded clay with little sand and gravel underlies the light brown to brown sand beneath the CCR Units and is present at an approximate depth of 30 to 40 ft bgs. The silty clay delineates the base of the uppermost aquifer.
- Gray Sand: A loose to compact fine to coarse-grained gray sand underlies the upper silty clay unit. The gray sand varies in thickness and is up to 70 feet thick on the southern side of the CCR Units.
- Basal Clay and Till Unit: A basal clay and silt underlies the gray sand. The basal till and silt are up to 105 feet thick on the northern side of the CCR Units. The thickness of the basal unit is highly variable due to erosion of the sediments and the underlying bedrock's relief.
- Bedrock: A fractured dolomitic limestone was encountered near the eastern portion of the Site at an approximate depth of 145 feet bgs.

Based on geologic information reviewed and consistent with industry interpretations of the definition provided in 40 CFR §257.53, the Site's uppermost aquifer consists of the unconfined fill material, native dune beach sand, and lacustrine light brown to brown sands and gravels that underlie each of the surface impoundments addressed by the Closure Application. The saturated thickness of the aquifer is approximately 15 to 30 feet depending upon seasonal variation of the water table and depth to the uppermost confining layer.

Under natural conditions, general groundwater flow direction and discharge would be expected to be toward Lake Michigan (i.e., toward the north). Except for data from wells located around the perimeter of the Boiler Slag Pond, historical piezometric data also indicated a flat to northerly gradient in the

vicinity of the surface impoundments. However, groundwater dewatering activities at the ArcelorMittal property located due south of the Site alters the local Site groundwater flow direction. Golder understands that ArcelorMittal withdraws over 1,000-gallons per minute from wells located to the south of the CCR units to reduce groundwater infiltration into pits/basements of buildings associated with their steel manufacturing operations. Golder has assumed that ArcelorMittal will continue to operate their dewatering wells and that the potentiometric surface will remain constant during the post-closure monitoring.

Based on the historical and recent BGS hydrogeologic information, there is an apparent groundwater mound beneath the Boiler Slag Pond. Therefore, the well network around the Boiler Slag Pond was designed and is being monitored to account for the localized effect of groundwater mounding. This CCR Unit features four downgradient wells. In addition, due to a) the effects of the ArcelorMittal off-Site groundwater extraction system on Site groundwater flow and b) reduced discharge of influent into the CCR Units, NIPSCO LLC has modified its prior CCR Rule-design monitoring network and selected monitoring wells GAMW-01/01B to represent background groundwater quality conditions for all the CCR Units.

The current Primary 1 and Primary 2 combined monitoring well network includes four monitoring wells (MW-112, GAMW-10, GAMW-16, and GAMW-07) located north of these impoundments that historically were consistently downgradient. Presently, these monitoring wells are not hydraulically downgradient of Primary 1 and Primary 2 based on the new data indicating groundwater flow direction to the south. However, for data collection and evaluation purposes, NIPSCO LLC will continue to consider these four wells as part of the downgradient monitoring well network because the hydraulic gradients are generally flat across Primary 1 and 2 and these wells have historically indicated detections of Appendix IV parameters. Monitoring wells that constitute the downgradient monitoring systems for all surface impoundments subject to closure and post-closure (i.e., Boiler Slag Pond, Primary 1, Primary 2, and Secondary 1) are outlined in Table 6.

Based upon site-specific data, average horizontal groundwater flow velocity was calculated at approximately 213 feet/year. The vertical hydraulic gradient calculations indicate a general downward gradient across the Site. The native sand materials appear to be more conducive to vertical flow versus the overlying fill materials.

Consistent with the self-implementing requirements of 40 CFR §257.91, NIPSCO LLC designed a monitoring system for Primary 1, Primary 2, Secondary 1, and the Boiler Slag Pond that was certified by a qualified Indiana-licensed Professional Engineer as meeting the technical requirements under the CCR Rule. This system consists of two background monitoring wells and 19 downgradient monitoring wells. The monitoring well placement accounted for and addressed the aquifer saturated thickness, horizontal and vertical flow conditions, and release mechanisms as identified by the Site Conceptual Model.

NIPSCO LLC has developed the proposed post-closure monitoring network based on knowledge of current groundwater flow directions and quality; proposed extent of closure excavation, backfill and grading, and surface water drainage plans; presumed post-construction influences on existing groundwater flow conditions; current CCR Rule obligations for the four surface impoundments; and interpretation of 329 IAC Rule 10-29 and 10-31 applicability.

The post-closure groundwater monitoring program will include 21 existing groundwater wells to monitor groundwater quality near the four surface impoundments in accordance with IDEM-approved closure plans. Each monitoring well number and the monitoring well's designated purpose is presented in Table 6. The surface impoundments addressed by the closure plans and background and downgradient monitoring well locations that comprise the post-closure network are depicted on

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Drawing BGS-04 in Appendix A. Boring logs and construction diagrams for the 21 groundwater wells are provided in Appendix B.

		Tan of Casima	p of Casing		147 - 11
	Monitoring Well Locations	Elevation (ft-msl)	Top (ft-bgs)	Bottom (ft-bgs)	Well Diameter (inches)
Deelverend	PC-GAMW-01	624.53	13	23	2
Background	PC-GAMW-01B	623.76	27	32	2
	PC-GAMW-02	624.20	13	23	2
	PC-GAMW-03	624.35	13	23	2
-	PC-GAMW-04	624.12	13	23	2
	PC-GAMW-06	626.97	17	27	2
	PC-GAMW-07	629.04	19	29	2
	PC-GAMW-08	624.35	15	25	2
	PC-GAMW-08B	623.73	30	40	2
	PC-GAMW-10	631.94	21	31	2
	PC-GAMW-11	625.04	14	24	2
Downgradient	PC-GAMW-11C	625.16	29	34	2
5	PC-GAMW-12R	TBD	15	25	2
	PC-GAMW-13	625.34	13	23	2
	PC-GAMW-14	624.32	13	23	2
	PC-GAMW-16	629.92	20	30	2
	PC-GAMW-17	623.96	14.5	24.5	2
	PC-GAMW-17B	624.12	28.5	33.5	2
	PC-GAMW-18	626.87	20	30	2
	PC-MW-105	622.05	8	18	2
	PC-MW-112	628.07	17	27	2

Table 6: Surface Impoundments Groundwater Monitoring Wells

Surface Impoundments Closure Application, Bailly Generating Station

Notes:

Locations surveyed in US State Plane Indiana West Zone NAD 1983, NAVD 1988 (ft)

ft-bgs = feet below ground surface

ft-msl = feet above mean sea level

TBD = to be determined

10.1.4 Sampling and analysis plan (SAP)

NIPSCO LLC will perform post-closure groundwater monitoring in accordance with procedures and protocols consistent with 329 IAC 10-29-2 and outlined in a Site-specific SAP, the complete, standalone version of which is provided in Appendix E. The SAP will include the following elements to provide reliable, consistent, and defensible data:

- Groundwater monitoring procedures that provide representative samples that minimize the potential for cross-contamination
- A quality assurance program that provides quantitative detection limits and the degree of error for analysis of each chemical of concern



- Sample preservation and shipment procedures that maintain reliability of the sample collected for analysis
- Chain-of-custody procedures that prevent tampering and maintain samples integrity prior to analysis.
- The SAP will be reviewed periodically as dictated by alterations in site conditions (e.g., initiation of corrective measures/corrective action, changes in groundwater flow direction) or groundwater monitoring program changes (e.g., addition or deletion of monitoring parameters, addition, or deletion of monitoring wells) and, if necessary, NIPSCO LLC will update the document to reflect necessary modifications.

10.1.5 Sampling frequency

NIPSCO LLC is currently collecting semi-annual groundwater samples in accordance with the CCR Rule requirements (i.e., 40 CFR Part 257 Appendix III and IV parameter lists). Prior to closure of the surface impoundments, NIPSCO LLC will have collected the necessary number of data points to perform statistical analyses as described in the Section 10.1.7 - Data Evaluation/Statistics.

NIPSCO LLC will begin post-closure monitoring during the first calendar quarter after completion of the impoundment closure construction activities and submittal of the Closure Certification Report by the certifying engineer. NIPSCO LLC will perform quarterly post-closure monitoring for a minimum of eight consecutive quarters (i.e., two years) to assess 1) changes in groundwater quality and 2) potential changes in groundwater flow direction, both related to conditions associated with closure activities (i.e., source removal, emplacement of a low permeability cover system, surface water [precipitation run-on] diversion). The two-year quarterly monitoring period is necessary to assist NIPSCO LLC with refining the Conceptual Site Model that will be used to assess whether additional groundwater monitoring or management activities are required, if any.

Following the initial two-year quarterly monitoring events, NIPSCO LLC will continue post-closure groundwater monitoring on a semi-annual basis for parameters appropriate to detect/assess changes in groundwater quality because of completed closure activities. NIPSCO LLC will maintain consistency with the ongoing semi-annual CCR Rule monitoring program, for which sampling is currently conducted primarily in April and October. The initial semi-annual event will be scheduled for the earlier of either April or October following the final two-year quarterly monitoring event. NIPSCO LLC will continue semi-annual groundwater monitoring for a minimum of 28 years (30-years total), or a shorter duration and/or frequency if changes in regulations allow. If groundwater concentrations do not meet the groundwater benchmarks, NIPSCO LLC will continue groundwater monitoring beyond the nominal 30 years.

10.1.6 Monitoring parameters

NIPSCO LLC proposes a monitoring parameter list appropriate to the Site environmental, industrial, and geological background conditions; Site investigation findings; surface impoundment waste management history; and current monitoring provisions of the CCR Rule. From the perspective of evaluating potential post-closure impacts to water quality, the results generated from this approach will be amenable to applying statistical-based (e.g., intra-well or inter-well) or standards-based comparisons. Consistent with the CCR Rule monitoring requirements, the post-closure monitoring parameter list will include:

Field-based water quality parameters

pH, specific conductivity, temperature, turbidity, oxidation-reduction potential





40 CFR, Part 257 Appendix III Detection Monitoring Parameters

40 CFR, Part 257 Appendix IV Assessment Monitoring Parameters Boron, calcium, chloride, fluoride, sulfate, total dissolved solids, pH

Antimony, arsenic, barium, beryllium, cadmium, chromium, cobalt, fluoride, lead, lithium, mercury, molybdenum, selenium, thallium, radium 226 and 228 (combined)

10.1.7 Data evaluation/statistics

Golder developed the selected statistical method for the BGS Closure Application in accordance with 40 CFR Part 257.93 and 329 IAC 10-29, using methodology presented in *Statistical Analysis of Groundwater Data at RCRA Facilities, Unified Guidance, March 2009, EPA 530/R-09-007* (Unified Guidance). For consistency between CCR Rule self-implementing and IDEM Solid Waste closure requirements, the statistical approach proposed herein is the same as the approach currently being used in the monitoring program required under 40 CFR Part 257.93. The full statistical analysis plan is provided as part of the SAP. The statistical methods used for Detection Monitoring under 40 CFR Part 257.93 will be the same as those used to comply with 329 IAC 10-29-6 (also referred to as Phase I), while the statistical methods used for Assessment Monitoring under 40 CFR Part 257.93 will be the same as those used to comply with 329 IAC 10-29-7 (also referred to as Phase II). Corrective Action Monitoring under 40 CFR Part 257.98 will be the same as those used to comply with 329 IAC 10-29-7.

The background populations for each monitoring well and constituent, general background statistics have been developed using the baseline data set. These general statistics include: 1) a review of the intra-well data for potential outliers, 2) an analysis for underlying trends, and 3) an examination of data distribution (i.e., data normality). Following general statistical procedures, data will be reviewed periodically, and outliers will be removed (if applicable) and data will be processed as appropriate for the data distribution detected. Parametric testing methods will be used if the data are normally or transform-normally distributed. Non-parametric testing techniques will be used if the data are non-normally distributed.

10.1.7.1 Phase I - Detection monitoring

Under the Detection Monitoring Phase (referenced as Phase I in 329 IAC 10-29-6), the prediction interval method will be used to evaluate groundwater monitoring data for 40 CFR Part 257 Appendix III parameters. An inter-well testing approach will be used – meaning that data from downgradient wells will be compared to compliance limits derived from background groundwater quality data in hydraulically-upgradient locations. Background data from the upgradient monitoring wells network will be pooled to calculate an upper prediction limit (UPL) (and lower prediction limit [LPL] for pH) for each Appendix III parameter. Results from the final detection monitoring event at the downgradient monitoring wells will be evaluated by comparing individual results to the UPL (and LPL for pH) for each monitoring event. Under this method, an "initial exceedance" occurs when the concentration of any Appendix III constituent in a downgradient monitoring well exceeds the UPL (or is lower than the LPL for pH).

If data from a downgradient monitoring well exceeds the UPL, a 1-of-2 resampling strategy will be used to verify the initial exceedance. One independent resample will be collected and evaluated within 90 days of the initial statistical evaluation to determine whether the initial exceedance is verified. The initial exceedance is considered a spurious result if the resample result does not verify the initial result, and detection monitoring continues for that constituent/well combination. The verified result is considered a statistically significant increase (SSI) if the verification sample result

confirms the initial exceedance. Unless an alternate source demonstration (ASD) can be provided to contradict the SSI, the next step will be to enter assessment monitoring (referenced as Phase II in 329 IAC 10-29-7), as described in the following section.

10.1.7.2 Phase II - Assessment monitoring

Under the Assessment Monitoring phase (i.e., Phase II), the statistical method used will be the confidence interval method. As in detection monitoring, an inter-well approach will be used – meaning data from downgradient monitoring wells will be compared to compliance limits derived from background groundwater quality data in hydraulically-upgradient locations. A GWPS will be calculated for each 40 CFR Part 257 Appendix IV constituent. In accordance with 257.95(h), the GWPS will be the maximum contaminant level (MCL)/health-based standard or the background concentration for each analyte as calculated using a tolerance/prediction limit procedure. Results from the downgradient monitoring wells will be evaluated by comparing the calculated intra-well lower confidence limit (LCL) with the GWPS for each Appendix IV constituent. If the LCL exceeds the GWPS, there is statistical evidence of a statistically significant level (SSL), which will trigger additional response activities, including a delineation of the nature and extent of the noted SSLs and, potentially, Corrective Action. If concentrations of all 40 CFR Part 257 Appendix III and Appendix IV constituents are below background values for two consecutive sampling events, the monitoring program can return to Detection Monitoring.

10.1.7.3 Corrective Action Monitoring

During Corrective Action implementation, the groundwater monitoring approach is the same as that described under Assessment Monitoring. In Corrective Action Monitoring, the statistical method used to evaluate the data will also be the inter-well confidence interval method (i.e., the same method used for Assessment Monitoring). However, there is one significant difference between Assessment Monitoring and Corrective Action Monitoring. During Corrective Action Monitoring, results from the downgradient monitoring wells will be evaluated by comparing the calculated intra-well Upper Confidence Limit (UCL) with the GWPS for each Appendix IV constituent. If the UCL exceeds the GWPS, there is statistical evidence of non-compliance (NC), which will result in continued Corrective Action Monitoring and possible additional Corrective Action remedies.

If NC is noted under Corrective Action Monitoring, trend analysis and other data analysis tools will be applied to understand whether the data are stable or trending. If increasing trends are noted for key indicators, additional remedies may be necessary. If trends are stable or decreasing during Corrective Action Monitoring, no additional actions may be necessary and Corrective Action Monitoring will continue. Once the UCL is below the GWPS for three consecutive years for each Appendix IV constituent in each well, the Corrective Action remedy is considered complete (from the standpoint of groundwater monitoring), and the monitoring program can return to Assessment Monitoring.

10.1.8 Quality assurance project plan (QAPP)

To monitor, control, and enhance data quality so that the data is acceptable for reporting and evaluation purposes, NIPSCO LLC has developed and will follow a QAPP that addresses, at a minimum, quality assurance objectives and controls; field sample collection; sample handling and preservation; chain of custody and transport; field equipment calibration and laboratory analytical methods; internal quality control checks; and performance and system audits. The site-specific QAPP is provided in Appendix F.

The QAPP will be reviewed periodically as dictated by groundwater monitoring program changes (e.g., addition or deletion of monitoring parameters, addition, or deletion of monitoring wells) and, if necessary, NIPSCO LLC will update the document to reflect necessary modifications.

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10.1.9 Corrective actions

NIPSCO LLC has developed a conceptual Corrective Action Monitoring program that considers technical, regulatory, and programmatic impacts. Specifically, the Corrective Action Monitoring program allows for the effects of post-closure source removal to be reflected in groundwater quality monitoring results and has been sequenced accordingly. Corrective Action may be indicated for certain groundwater-related events including, but not limited to:

- Exceedances of regulatory benchmarks or guidelines for more than two consecutive sampling periods
- Consistent upward trends (or downward, in the case of pH only) for more than two consecutive sampling periods

Depending upon degree and timing of changes in groundwater quality post-closure, Corrective Actions may include activities ranging from addition of monitoring parameters, increased frequency of monitoring, and/or modification/expansion of the post-closure monitoring network, to monitored natural attenuation (MNA), the installation of passive barriers, or the design and operation of active groundwater recovery and treatment systems. Response action(s) and system(s) of choice will necessarily be based upon numerous factors including demonstrated effectiveness of the source removal closures, location and degree of groundwater impacts, improving or declining groundwater quality trends post-closure, and other time-dependent variables. NIPSCO LLC will notify IDEM within 14 days of receipt of validated sampling results in response to these conditions and provide a proposed course of action consistent with 329 IAC 10-29-9 to address the potential need for Corrective Actions to supplement source removal. Because such an event will be in the mature stages of post-closure monitoring and plume conditions will be expected to have reached stability, NIPSCO LLC anticipates that this response will focus primarily on Corrective Actions. Also, by this time NIPSCO LLC anticipates that alternatives will have been identified and screened such that an evaluation will be straightforward. Within 180 days of receipt of validated sampling results, NIPSCO LLC will present a proposed approach to Corrective Actions (e.g., MNA, groundwater extraction, control, and treatment systems) to IDEM for approval. Should the proposed remedy at this stage also require modification to the existing groundwater monitoring program (other than compliance with self-implementing provisions of the CCR Rule or state-adopted equivalent), NIPSCO LLC will also submit a simultaneous request to IDEM and obtain concurrence before making such change(s) to that aspect of the postclosure program.

If Corrective Actions are required and during Corrective Actions implementation, the groundwater monitoring approach statistical evaluation will be completed as described under Section 10.1.7.3.

10.1.10 Data reporting

NIPSCO LLC will prepare reports including summaries of sampling activities, data tables and interpretations, supporting figures, and planned modifications and response activities, if necessary, and submit them to IDEM within 60 days of receipt of sampling data, data evaluation, and performance of statistical analysis.

10.1.11 Post-closure monitoring term

NIPSCO LLC will maintain and operate the groundwater monitoring system for a post-closure care period of up to 30 years minimum in accordance with the applicable requirements of 40 CFR, Part 257.104 and 329 IAC 10-31-2 and as provided in Section 10.1.5. The post-closure monitoring period may be extended past 30 years until monitoring has returned to the detection phase for a period of three consecutive years, at which point the monitoring term will cease.

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10.2 Inspection requirements

Inspections of the closed former surface impoundments will be performed throughout the postclosure care period. Inspections will be performed biannually with an inspection report prepared and submitted to IDEM in accordance with 329 IAC 10-31-2(2). Items inspected include, but are not limited to:

- Final backfill area
 - Settlement/subsidence
 - Accumulated surface water
 - Slope stability issues
 - Erosion issues
 - Vegetation quality e.g. stressed or missing
 - Vegetation other than grass on the final cover
 - Need for mowing
 - Burrowing animals
- Surface water management system
 - Erosion issues
 - Vegetation quality e.g. stressed or missing
 - Vegetation other than grass in the ditches, diversions, and/or swales
 - Obstructions blocking water flow e.g. large rocks, fallen trees/limbs/brush, etc.
 - Burrowing animals
- Groundwater monitoring program
 - Groundwater monitoring wells integrity
 - Protective casing and concrete pads integrity
 - Locks present and in working condition
 - Access to the monitoring locations
- General

Site benchmarks and other survey control integrity.

An inspection form (example provided in Appendix G) for each of the closed former surface impoundments will be completed for each of the biannual inspections. The inspection forms will be included in an inspection report prepared to provide, but not be limited to:

- Inspection summary
- Discussion of issues observed during the inspection
- Discussion of how identified issues will be handled
- Discussion of how issue(s) identified during past inspections were addressed
- Schedule for addressing the issues

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- Inspection forms
- Photographs to document the inspection and any maintenance activities.

The inspection reports will be maintained in the BGS operating record.

10.3 Maintenance requirements

The maintenance activities will depend on the issues observed during the biannual inspections throughout the post-closure care period. The post-closure care plan addresses how the identified issues will be handled in a general sense, with specific remedial efforts determined based on each identified issue's severity. A schedule for addressing identified issues will be included in the inspection report, again, determined based on each identified issue's severity.

The maintenance activity for each issue will be performed as soon as practical. Maintenance activities initiation and length of time required to address each issue will vary depending on issue severity. For example, replacing a missing or broken lock on a groundwater monitoring well protective casing can be performed in a much shorter timeframe than repairing erosion gullies/rills or settlement in the final backfill area. Based on the inspection items provided in Section 10.2, typical maintenance activities can include, but are not limited to:

- Final backfill area
 - Using non-impacted soil to repair settlement/subsidence areas, erosion gullies/rills, slope failure(s), and area(s) where animal burrows are identified
 - Revegetating the area of disturbance to establish a healthy stand of grass
 - Revegetating missing and/or stressed vegetation
 - Removing vegetation other than grass from the final backfill area surface
 - Mowing the grass, a minimum of twice per year spring and fall
- Surface water management system
 - Using non-impacted soil to repair erosion gullies/rills
 - Revegetating the area of disturbance to establish a healthy stand of grass
 - Revegetating missing and/or stressed vegetation
 - Removing obstructions blocking water flow e.g. large rocks, fallen trees/limbs/brush, etc.
 - Removing vegetation other than grass from the ditches, diversions, and/or swales
- Groundwater monitoring program
 - Replacing groundwater monitoring wells including abandoning compromised groundwater monitoring wells
 - Replacing compromised protective casing and concrete pads
 - Replacing missing and/or inoperable locks
- General

Repairing/replacing site benchmarks and other survey control.

A discussion, including photographs, of how the identified issue(s) were addressed will be included in the inspection reports. Changes to the maintenance activity schedule will also be addressed.

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10.4 Post-closure care contact

The primary NIPSCO LLC person who can be contacted during the post-closure care period and who is responsible for post-closure care maintenance and monitoring is:

Contact Name:	Jeff Neumeier
Contact Physical Address:	246 Bailly Station Road, Chesterton, Indiana 46304
Contact Telephone Number:	(219) 787-7298 (BGS office)
	(219) 873-7337 (Michigan City Generating Station office)
	(219) 680-7098 (mobile)
Contact E-Mail Address:	JNeumeier@NiSource.com

10.5 Post-closure use of the property

BGS plans no long-term use of the property where the former surface impoundments are located at the time of this closure application submittal. NIPSCO LLC and BGS reserve the right to use this area at a future time, when a use for this area is determined.

A demonstration will be prepared to establish that future use of this area does not compromise the final backfill integrity or monitoring systems function and does not increase the threat to human health or the environment.

10.6 Post-closure certification

NIPSCO LLC will prepare a notification that post-closure care has been completed no later than 60 days following completion of the post-closure care period. The notification will include certification by NIPSCO LLC and a qualified Indiana professional engineer, verifying the post-closure care has been completed in accordance with the post-closure care plan. The notification will be placed in the NIPSCO LLC BGS CCR Operating Record as required by 40 CFR 257.105 (i) (13) for the former surface impoundments.

11.0 Opinion of probable closure and post-closure care cost

An opinion of probable closure and post-closure care cost has been prepared for the former surface impoundments on forms provided by IDEM, and is included in Appendix H.

The closure activities include, but are not limited to:

- Installing erosion and sedimentation controls
- Excavating CCR materials and bottom liner system
- Loading, transporting, and disposing of the CCR materials in the RMSGS onsite landfill
- Loading, transporting, and disposing of the blast furnace slag and geomembrane liner materials in an off-site disposal facility permitted to accept the blast furnace slag and geomembrane materials
- Backfilling the former surface impoundments with off-site soil and topsoil
- Installing surface water control/management features
- Vegetating the final surface.



The opinion of probable closure care cost was prepared for each of the closure activities identified for the former surface impoundments. The closure activities are as presented in Sections 6.0 and 7.0 of the closure application. The total opinion of probable closure cost is \$27,084,198.

The post-closure care activities can include, but are not limited to:

- Semi-annual inspections of the final backfill for erosion, surface water ponding, and storm drainage features
- Vegetation mowing
- Repairing areas where erosion has occurred
- Maintaining vegetation to prevent erosion
- Groundwater monitoring.

The opinion of probable post-closure care cost was prepared for each of the monitoring, inspection, and maintenance activities identified for the former surface impoundments. The monitoring, inspection, and maintenance activities are as presented in Sections 10.2 and 10.3 of the post-closure care plan. The total opinion of probable post-closure care cost is \$2,027,500 for the 30-year post-closure care period.

The unit costs and/or lump sum costs were obtained from sources including, but not limited to, historical costs for activities of like/similar scope, RS Means Cost Data, contractor/vendor quotes, and other consultant costs.

The mobilization/demobilization, engineering, construction quality assurance, and contingency typically calculated and included as part of the closure and post-closure care opinion of probable costs are not included in the IDEM forms and; therefore, are not included.

12.0 Financial assurance

Financial assurance is required for closure and post-closure care of the surface impoundments under 329 IAC 10-39-3. Financial assurance is not required under the CCR Final Rule.

The financial assurance mechanism for the closure and post-closure care activities is:

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329 IAC 10-39-3(a)(5) - A financial test
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NIPSCO LLC will demonstrate the financial test has been met by submitting to the commissioner the documents required in 329 IAC 10-39-3(a)(5)(C) upon closure application approval and annually within 90 days after the close of each fiscal year.

The opinion of probable post-closure care cost included with this closure application was calculated using the IDEM format. NIPSCO LLC will review the opinion of probable post-closure care cost annually until the post-closure care of the former surface impoundments certification is deemed adequate and submit to the commissioner no later than 15 June of any given year. The opinion of post-closure care cost will be adjusted for inflation using one of the following methods:

- Recalculating the opinion of post-closure care cost in current dollars
- Using an inflation factor derived from the most recent implicit price deflator for gross national product published by the United States Department of Commerce in its Survey of Current Business.

If the post-closure care plan has changed, NIPSCO LLC. will revise the opinion of post-closure care cost not later than 30 days after the commissioner has approved the changed post-closure care plan. The revised opinion of post-closure care cost will be adjusted for inflation as previously specified.

13.0 Public outreach

NIPSCO LLC intends to provide public information opportunities about closure of the surface impoundments. NIPSCO LLC will prepare a public outreach plan describing the surface impoundment closures and subsequent corrective action activities.

NIPSCO LLC regularly publishes and updates documents for the BGS operating record (<u>https://www.nipsco.com/about-us/ccr-rule-compliance</u> in accordance with requirements contained in the Federal CCR Rule (40 CFR 257.105). Documents have been, or will be posted for:

- Location restrictions
- Design criteria
- Operating criteria
- Groundwater monitoring and corrective action
- Closure and post-closure care.

14.0 References

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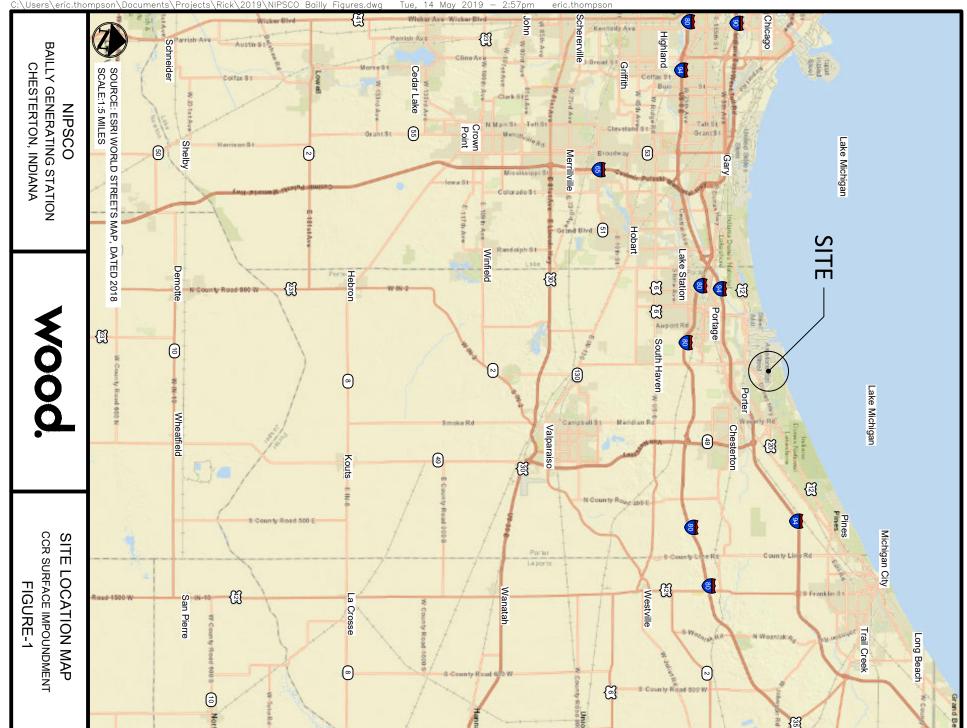
GZA GeoEnvironmental, Inc., 2012, *Final Round 10 Dam Assessment Report, NIPSCO Michigan City Generating Station Coal Ash Impoundments*, for US Environmental Protection Agency, Washington, DC.



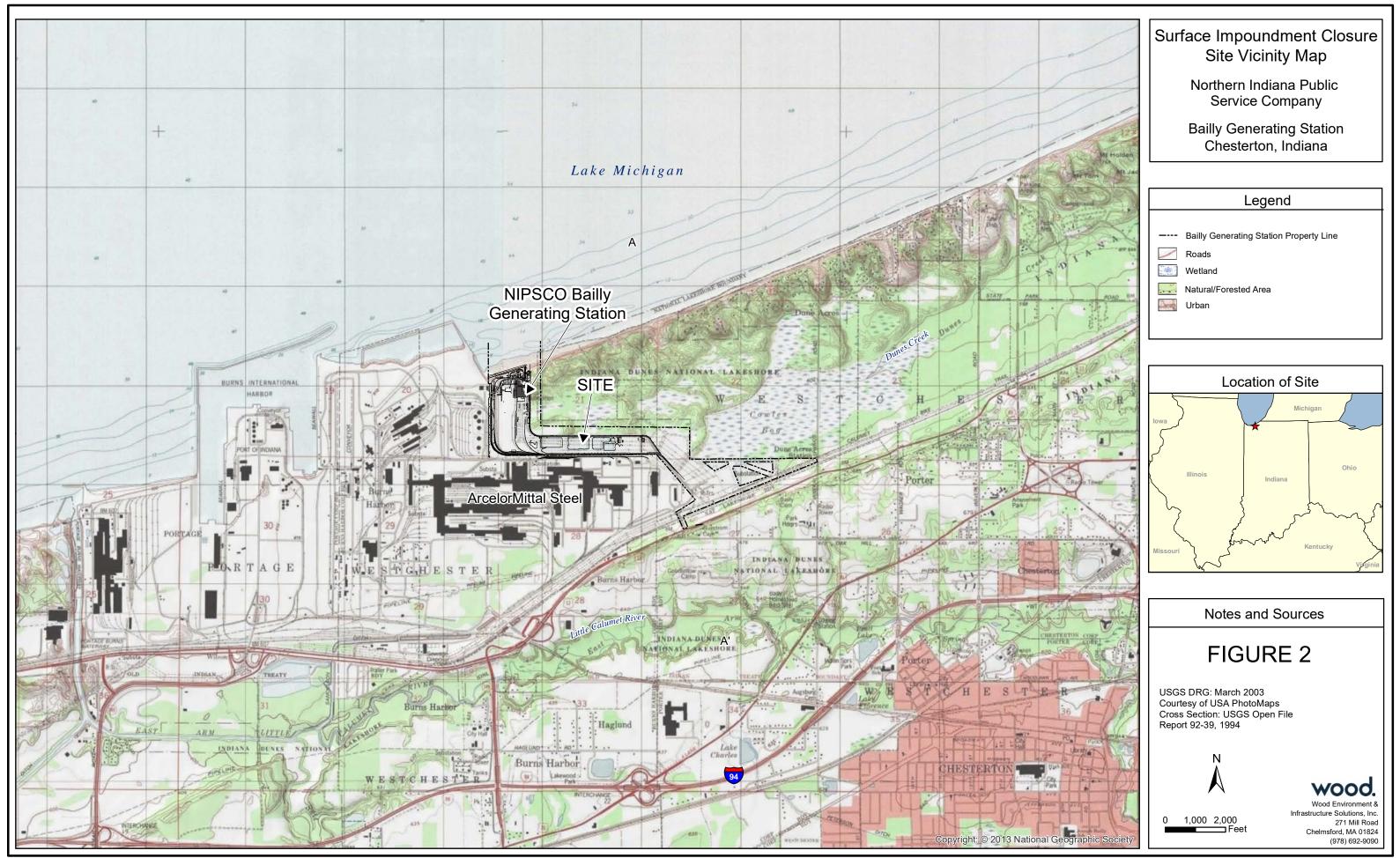
IDNR, 1990, 1994, *Unconsolidated Aquifer Systems of La Porte County, Indiana*, Indiana Department of Natural Resources, Division of Water.

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Figures

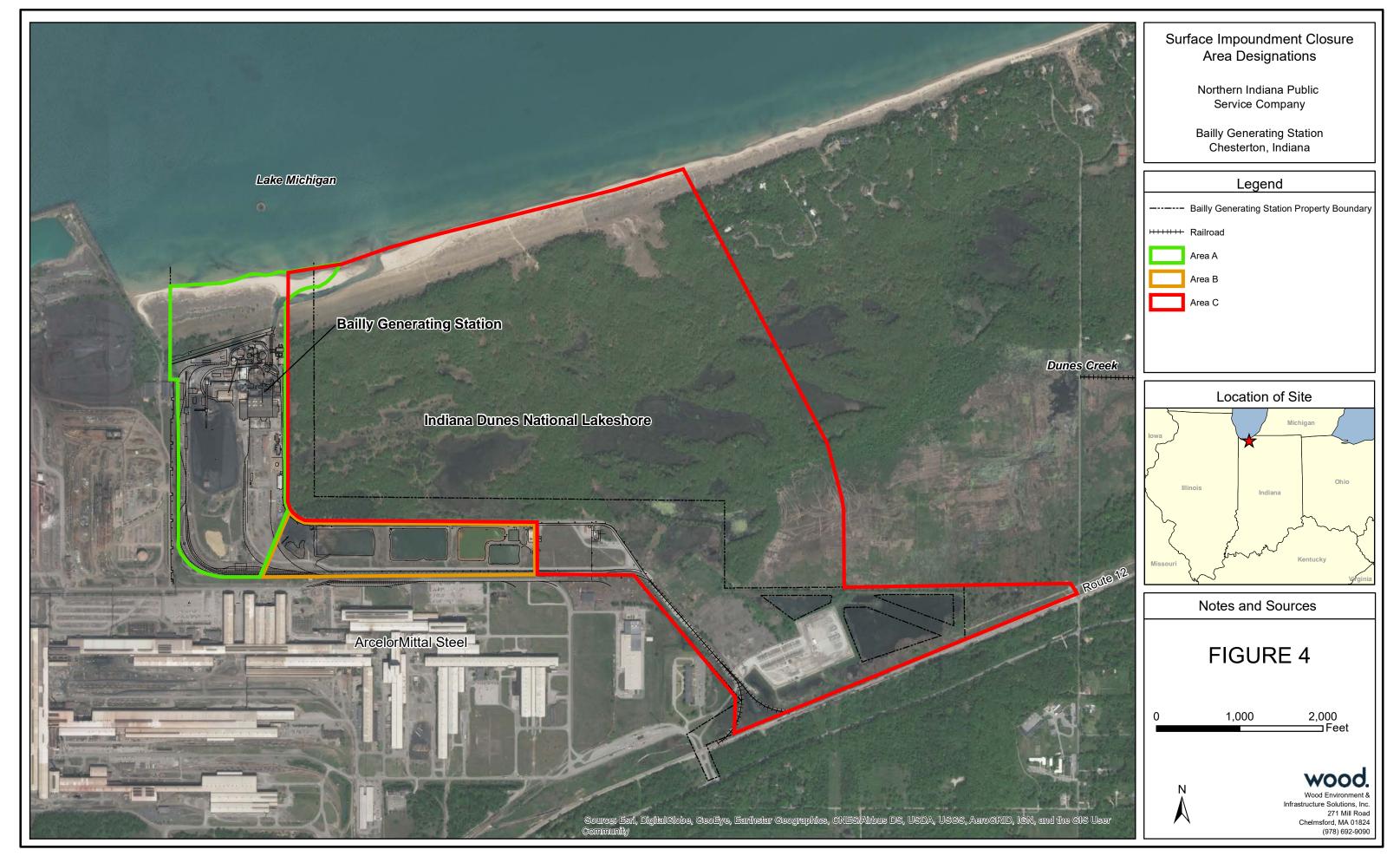


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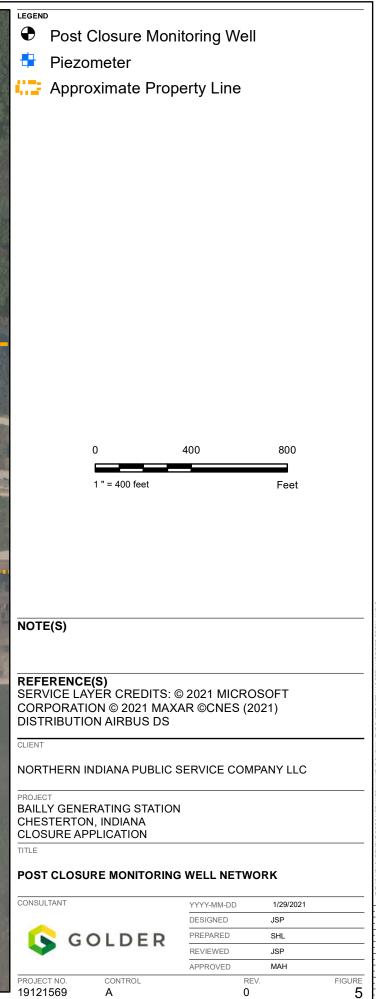


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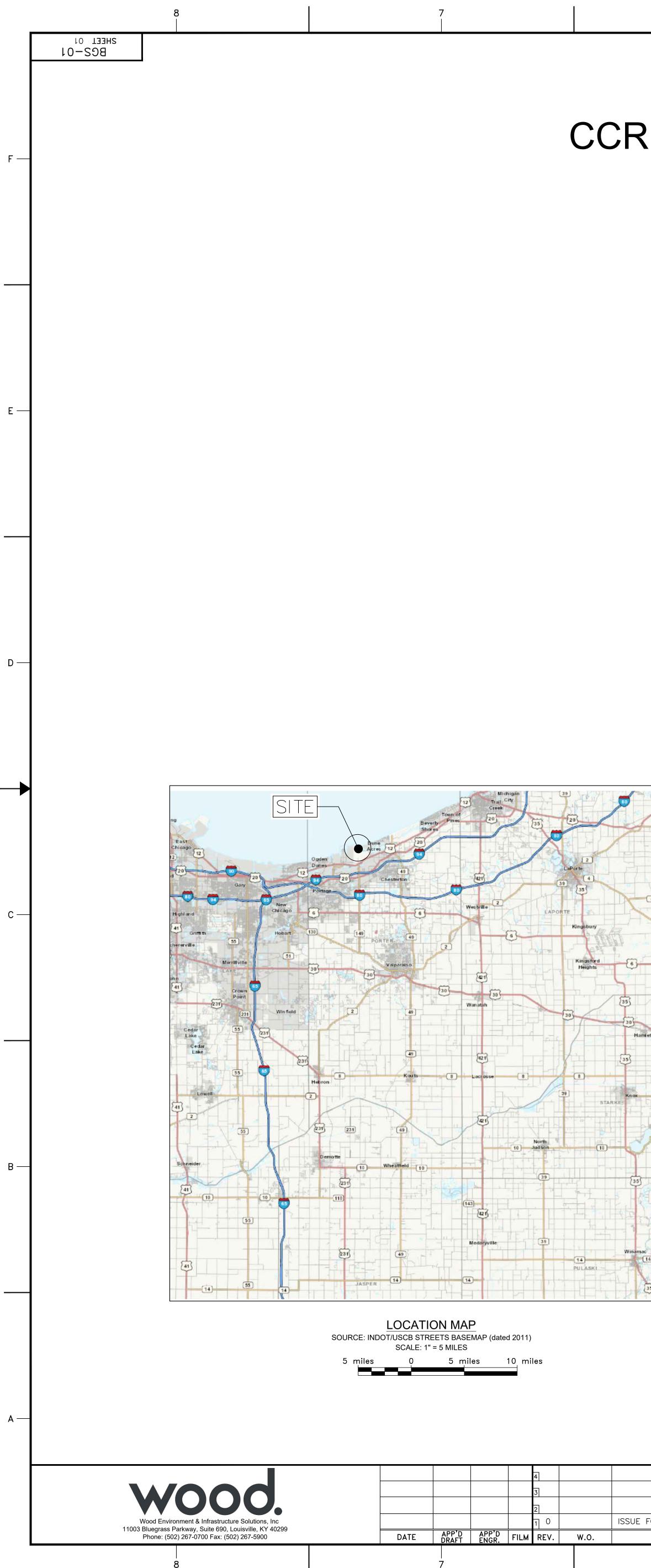






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Appendix A



COVER SHEET

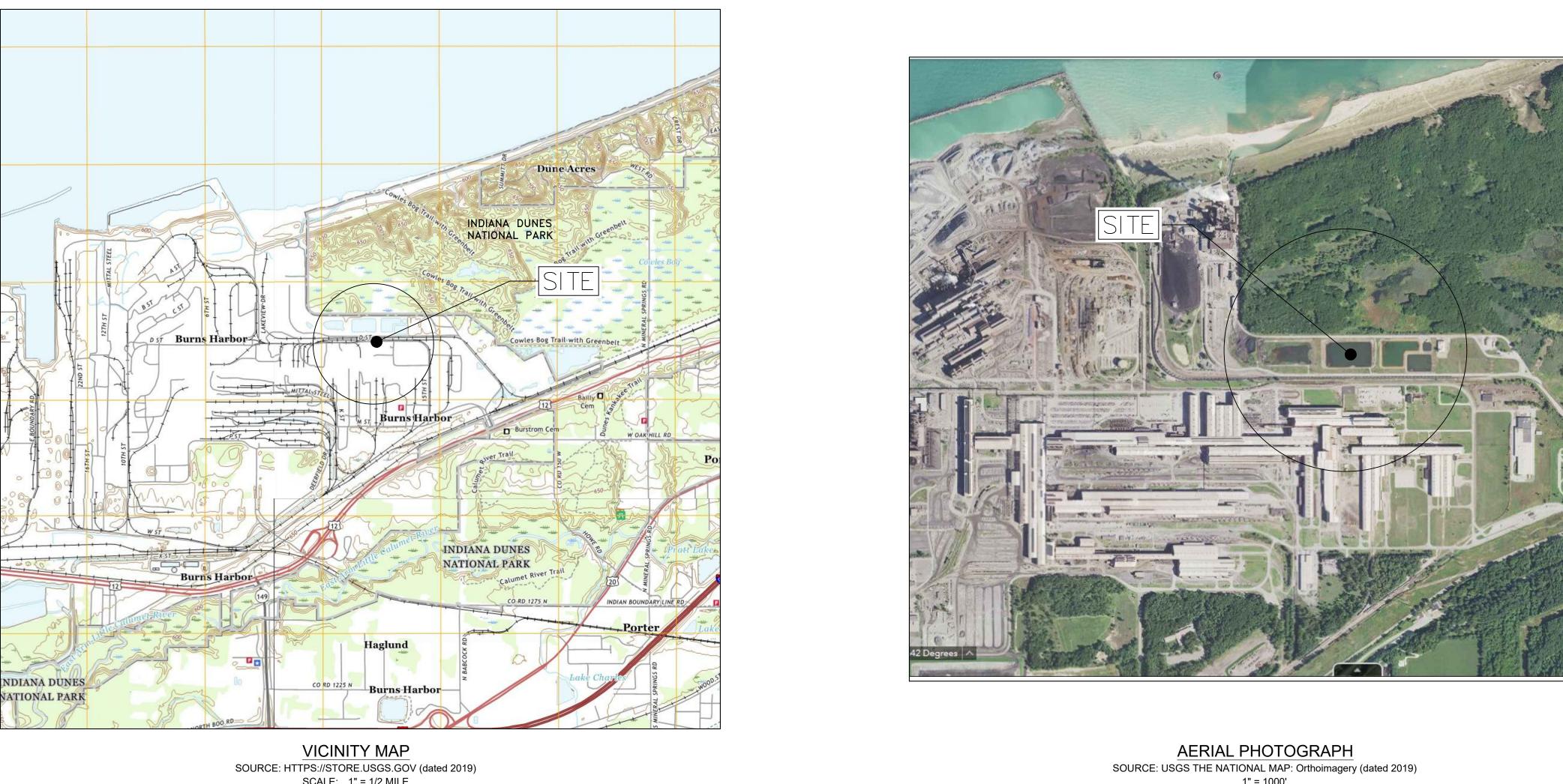
CCR IMPOUNDMENT CLOSURE PLAN PERMIT APPLICATI **BOILER SLAG POND** PRIMARY SETTLING POND NO. 1 PRIMARY SETTLING POND NO. 2 SECONDARY SETTLING POND NO. 1

BAILLY GENERATING STATION PORTER COUNTY, CHESTERTON, INDIANA LATITUDE: 41° 38' 18" N, LONGITUDE: 87° 07' 03" W

OWNER:

NORTHERN INDIANA PUBLIC SERVICE COMPANY, LLC 246 BAILLY STATION ROAD, CHESTERTON, IN 46304

PREPARED BY: WOOD ENVIRONMENT & INFRASTRUCTURE SOLUTIONS, INC. 11003 BLUEGRASS PARKWAY SUITE 690, LOUISVILLE, KENTUCKY 40299



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DRAWING INDEX

DRAWING NUMBER	SHEET NUMBER	DETAIL TITLE
BGS-01	01	COVER SHEET & LOCATION MAPS
BGS-02	02	LEGEND, ABBREVIATIONS, GENERAL NOTES, AND DRAWING INDEX
BGS-03	03	OVERALL SITE PLAN
BGS-04	04	EXISTING CONDITIONS PLAN
BGS-05	05	EXCAVATION PLAN
BGS-06	06	GRADING PLAN
BGS-07	07	BASELINE PROFILES
BGS-08	08	CROSS SECTIONS: STA.
BGS-09	09	GENERAL DETAILS
BGS-10	10	EROSION PREVENTION AND SEDIMENT CONTROL PLAN
BGS-11	11	EROSION PREVENTION AND SEDIMENT CONTROL DETAILS

GENERAL NOTES:

- 1. EXISTING TOPOGRAPHIC MAPPING SHOWN WAS DEVELOPED BY DLZ INDUSTRIAL, LLC, 316 TECH DRIVE, BURNS HARBOR, IN 46304, DATED OCTOBER 6, 2017.
- 2. THE SURVEY CONTROL HEREON SHOWS COORDINATE VALUES IN INDIANA COORDINATE
- SYSTEM OF 1983 (NAD 83, WEST ZONE). UNITS ARE IN US FEET. 3. THE SURVEY CONTROL TABLE HEREON SHOWS ELEVATIONS IN NAVD88 (NORTH
- AMERICAN DATUM 1988).
- 4. ONLY UTILITIES OBSERVED AT THE TIME OF SURVEY WERE RECORDED. ADDITIONAL UTILITIES EXIST IN ADDITION TO THOSE HEREON. *SEE SARGENT AND LUNDY DRAWINGS B-565, B-566, AND B-569 FOR ADDITIONAL UNDERGROUND UTILITIES. 5. ADDITIONAL INFORMATION
- STREET ADDRESS: 246 BAILLY STATION ROAD, CHESTERTON, INDIANA 46304 COUNTY: PORTER TOWNSHIP: 37 N
- RANGE: 6 W
- SECTION: 21
- USGS QUADRANGLE MAP: DUNE ACRES 6. USE CAUTION WHEN WORKING BENEATH OVERHEAD ELECTRICAL TRANSMISSION LINES, IN ACCORDANCE WITH THE OWNER'S REQUIREMENTS. VERIFY ADEQUATE CLEARANCE
- FOR EQUIPMENT. PRIOR TO PERFORMING WORK, SELECT EQUIPMENT AND CONDUCT OPERATIONS TO MAINTAIN ADEQUATE CLEARANCE BENEATH ELECTRICAL CONDUCTORS.
- 7. GROUNDWATER MONITORING WELLS FOR SURFACE IMPOUNDMENTS ARE LISTED WITHIN THE TABLE AND ARE SHOWN ON THE EXISTING CONDITIONS DRAWING. 8. EXISTING DISCHARGE PIPES USED TO CONVEY ACCUMULATED WATER WITHIN THE BOILER SLAG POND, AND PRIMARY SETTLING PONDS 1 AND 2 ARE BEING RE-PURPOSED FOR USE AS STORM DRAIN PIPING DURING THE POST-CLOSURE PERIOD. AN
- ASSESSMENT IS PLANNED DURING DETAILED DESIGN, AND PIPING REHABILITATION, IF REQUIRED, WILL BE PROPOSED BY NIPSCO FOR CONCURRENCE BY IDEM.
- 9. INVERT ELEVATIONS SHOWN ON EXISTING UNDERGROUND DRAINAGE PIPING ARE TAKEN FROM SARGENT AND LUNDY DRAWINGS B-565, B-566, AND B-569.

STATION NOTES:

- 1. CLOSURE OF THE CCR SURFACE IMPOUNDMENTS AT BGS INCLUDES THE FOLLOWING SURFACE IMPOUNDMENTS:
- BOILER SLAG POND PRIMARY SETTLING POND NO. 1
- PRIMARY SETTLING POND NO. 2
- SECONDARY SETTLING POND NO. 1 2. WORK PERFORMED FOR THE CCR SURFACE IMPOUNDMENT CLOSURE IS GOVERNED
- BY THE REQUIREMENTS OUTLINED IN THE CCR SURFACE IMPOUNDMENT CLOSURE
- APPLICATION FOR BAILLY GENERATING STATION. 3. CONDUCT CONSTRUCTION ACTIVITIES FOR THE CCR SURFACE IMPOUNDMENT CLOSURE IN ACCORDANCE WITH THE REQUIREMENTS CONTAINED IN THE "BAILLY
- GENERATING STATION CCR FUGITIVE DUST CONTROL PLAN".
- 4. PERFORM WORK FOR THE CCR SURFACE IMPOUNDMENT CLOSURE IN CONFORMANCE WITH THE APPROVED STORM WATER POLLUTION PREVENTION PLAN.
- 5. WATER SURFACE ELEVATIONS (WSE) SHOWN ON EXISTING CONDITIONS DRAWING REFLECT ELEVATIONS AT THE TIME OF THE SURVEY.
- 6. WATER SURFACE ELEVATIONS (WSE) SHOWN ON THE EXISTING CONDITIONS DRAWING REFLECT ELEVATIONS AT THE TIME OF THE SURVEY.

SURVEY TABLE

(SE	E GENER	AL NOTE 3)

	CONTROL	INDIANA WEST NA	D83 STATE PLANE	NAVD 88	DESCRIPTION
	POINT NO.	NORTHING	EASTING	ELEVATION	DESCRIPTION
	5	2,329,455.30	2,911,425.77	619.27	MAG NAIL
	M-8	2,329,734.40	2,941,564.88	619.33	PLANT MONUMENT
	M-5	2,330,030.14	2,941,986.27	616.84	PLANT MONUMENT
	13036	2,327,710.02	2,944,937.04	621.58	CUT "BOX" FOUND
Ī	13060	2,327,822.02	2,943,494.13	633.35	CUT "BOX" FOUND



Plotted By: Foraker, Lydia Sheet Set: New Sheet Set (3) Layout: SHT 2 - LEGEND AND INDEX January 04, 2021 08:47:23am P: \Projects \7382 \7382193347 NIPSCO Bailly \Plansheets \BGS Permit Set Rev 0 2021-0106.dwg

10

DATE APP'D APP'D FILM REV. W.O.

	LEGEND
Θ	GAS METER
•	ELECTRIC METER
	BEEHIVE INLET
×	UTILITY POLE
Ō	POWER POLE
~_0	LIGHT POLE
Q	HYDRANT
	SURVEY MARKER - MAG NAIL
	SURVEY MARKER - MONUMENT
•	
	GAS PIPELINE MARKER
E	
°	GUARD POST
0	MANHOLE
	POST CLOSURE STORM DRAIN SYSTEM
RR	
——————————————————————————————————————	
(600)	EXISTING CONTOURS PROPOSED CONTOURS
600	SPOT ELEVATIONS
	GUARDRAIL
X	FENCE
	PAVED ROAD
	GRAVEL ROAD
	CONCRETE
	BUILDING
	METAL GRATING
	WATER EDGE
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	VEGETATION LINE
	SURFACE IMPOUNDMENT BOUNDARY
(TBD)	TO BE DEMOLISHED
H.P.	HIGH POINT
$\frac{\text{DETAIL TITLE}}{00}$	$\frac{1}{104}$
	SHEET NUMBER WHERE DETAIL IS SHOWN
DETAIL	TITLE & NUMBER
	DETAIL NUMBER ON
	DRAWING WHERE SHOWN
SHEET NUMBER OF DRAWING	04
WHERE DETAIL IS REFERENCED	WHERE DETAIL IS SHOWN
DRAV	VING CALL OUT
& DET	AIL REFERENCE
SECTION / PROFILE	
IDENTIFYING LETTER	VIEW DIRECTION
SHEET NUMBER WHERE SECTION / PROFILE IS REFERENCED	
	CTION / PROFILE OUT & REFERENCE

				DRAWN:	RB	TITLE BAILLY GENERAT	ING STATION
				ENGINEER:	DRS	LOCATION CHESTERTON,	
				APPROVED:	: JS	DETAIL LEGEND, ABBREVIATIONS	, GENERAL NOTES
ISSUE FOR IDEM REVIEW	01-06-2021 RB	JS		DATE:	01-06-2021	AND DRAWING CCR IMPOUNDMEN	; INDEX √T CLOSURE
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ABBREVIATION	S
ACRONYM	DESCRIPTION
@	AT
CCR	COAL COMBUSTION RESIDUALS
CCR RULE	US EPA FINAL RULE FOR DISPOSA RESIDUALS FROM ELECTRIC UTIL
CL	CENTER LINE
CLR	CLEARANCE
CY	CUBIC YARD
DIA	DIAMETER
ELEV	ELEVATION
EPSC	EROSION PROTECTION AND SEDI
U.S. EPA	UNITED STATES ENVIRONMENTAL
FSS	FIXATED SCRUBBER SLUDGE
HDPE	HIGH DENSITY POLYETHYLENE
н	HORIZONTAL
INV	INVERT
LF	LINEAR FEET
MAX	MAXIMUM
MIN	MINIMUM
NO.	NUMBER
NTS	NOT TO SCALE
OD	OUTER DIAMETER
ОН	OVERHEAD
OZ	OUNCES
RR	RAILROAD TRACKS
SDR	STANDARD DIMENSION RATIO
SF	SQUARE FEET
SR	STATE ROUTE
STA	STATION OR STATIONING
STD	STANDARD
SY	SQUARE YARDS
TEMP	TEMPORARY
ТҮР	TYPICAL
UG	UNDERGROUND
UNO	UNLESS NOTED OTHERWISE
WS	WATER SURFACE
WSE	WATER SURFACE ELEVATION

GROUNDWATER MONITORING WELLS							
CCR UNIT	MW NUMBER	DESIGNATION					
ALL	GAMW-01	BACKGROUND					
	GAMW-01B	BACKGROUND					
-	GAMW-12R	DOWNGRADIENT					
BOILER SLAG POND	GAMW-13	DOWNGRADIENT					
BOILER SLAG POIND	GAMW-14	DOWNGRADIEN					
	MW-105	DOWNGRADIENT					
	GAMW-06	DOWNGRADIENT					
-	GAMW-07	DOWNGRADIENT					
	GAMW-08	DOWNGRADIEN					
	GAMW-08B	DOWNGRADIEN					
	GAMW-10	DOWNGRADIEN					
PRIMARY SETTLING POND 1 /	GAMW-11	DOWNGRADIEN					
PRIMARY SETTLING POND 2	GAMW-11C	DOWNGRADIEN					
_	GAMW-16	DOWNGRADIENT					
	GAMW-17	DOWNGRADIENT					
	GAMW-17B	DOWNGRADIENT					
-	GAMW-18	DOWNGRADIENT					
-	MW-112	DOWNGRADIEN					
	GAMW-02	DOWNGRADIENT					
SECONDARY SETTLING POND 1	GAMW-03	DOWNGRADIENT					
-	GAMW-04	DOWNGRADIENT					

NOTE: MW GAMW-12R IS LOCATED NEAR GAMW-12



### ESIDUALS R DISPOSAL OF COAL COMBUSTION CTRIC UTILITIES

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AND SEDIMENT CONTROL ONMENTAL PROTECTION AGENCY UDGE

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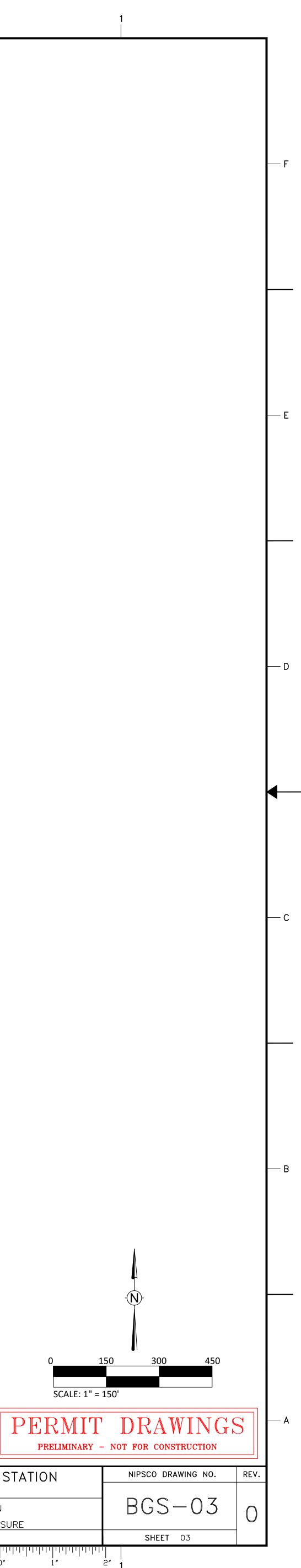
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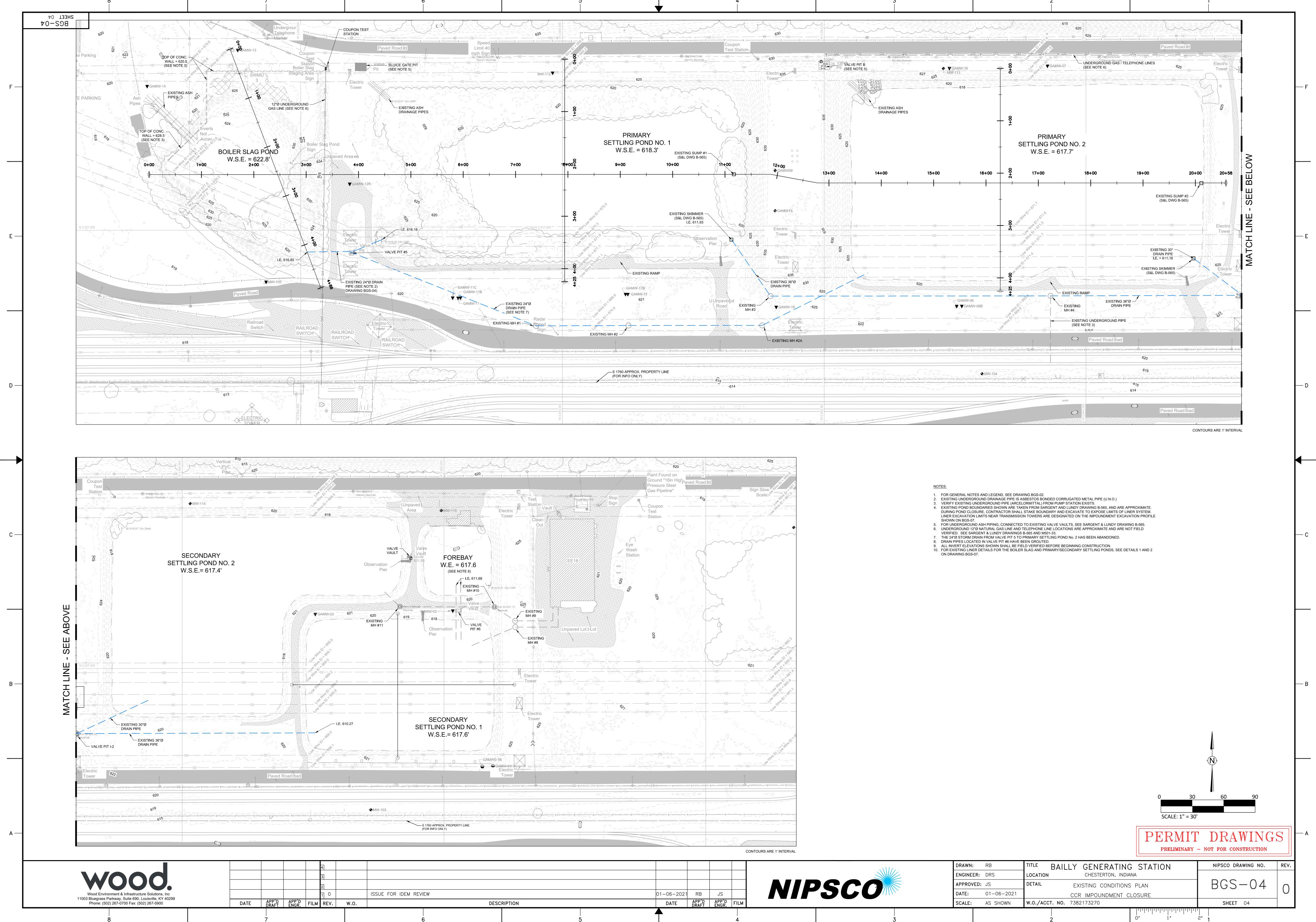
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	ENGINEER:	DRS	LOCATION	CHESTERTON, IND	IANA
IPSCO	APPROVED: JS		DETAIL	PLAN	
	DATE:	01-06-2021		CLOSURE	
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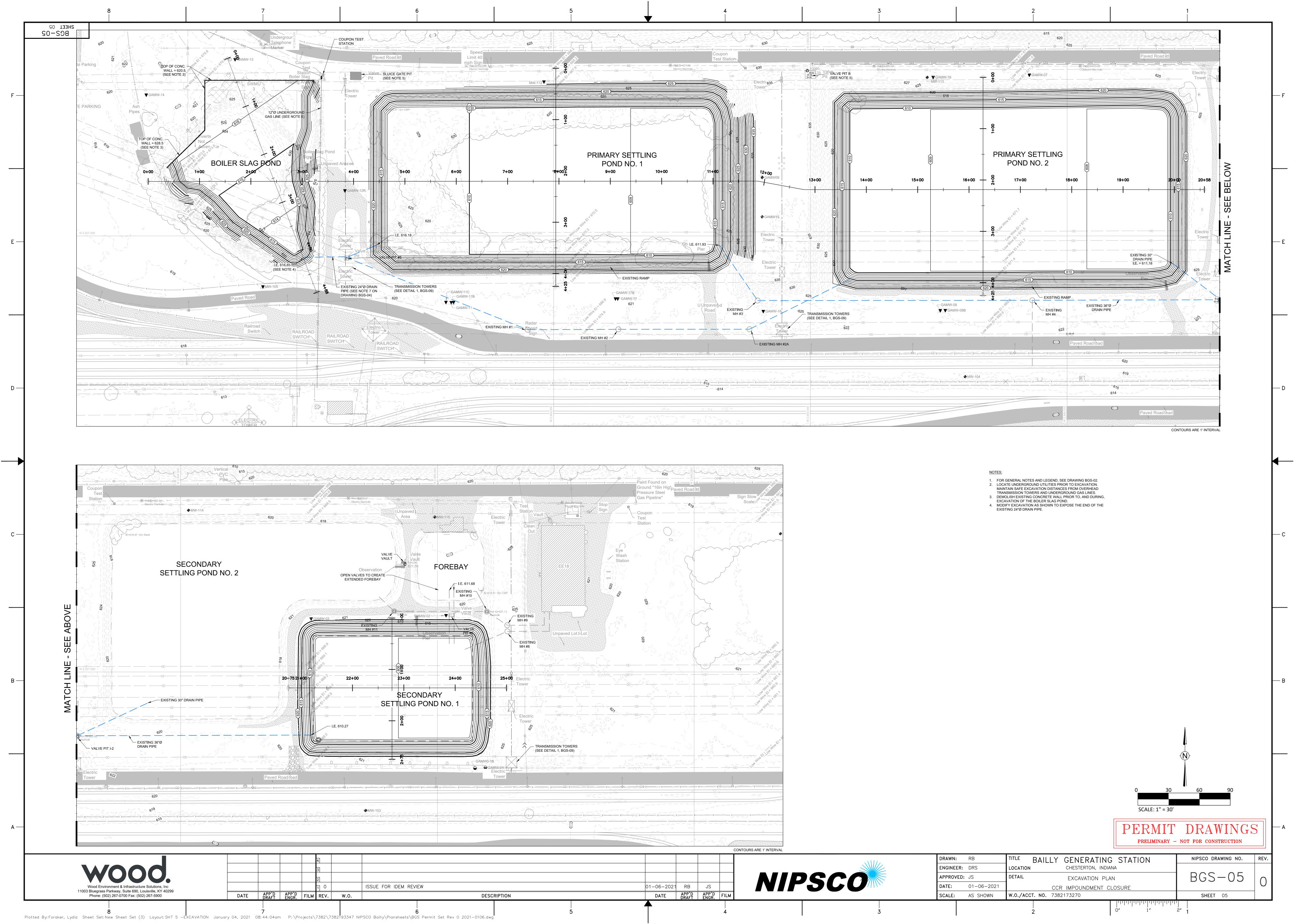


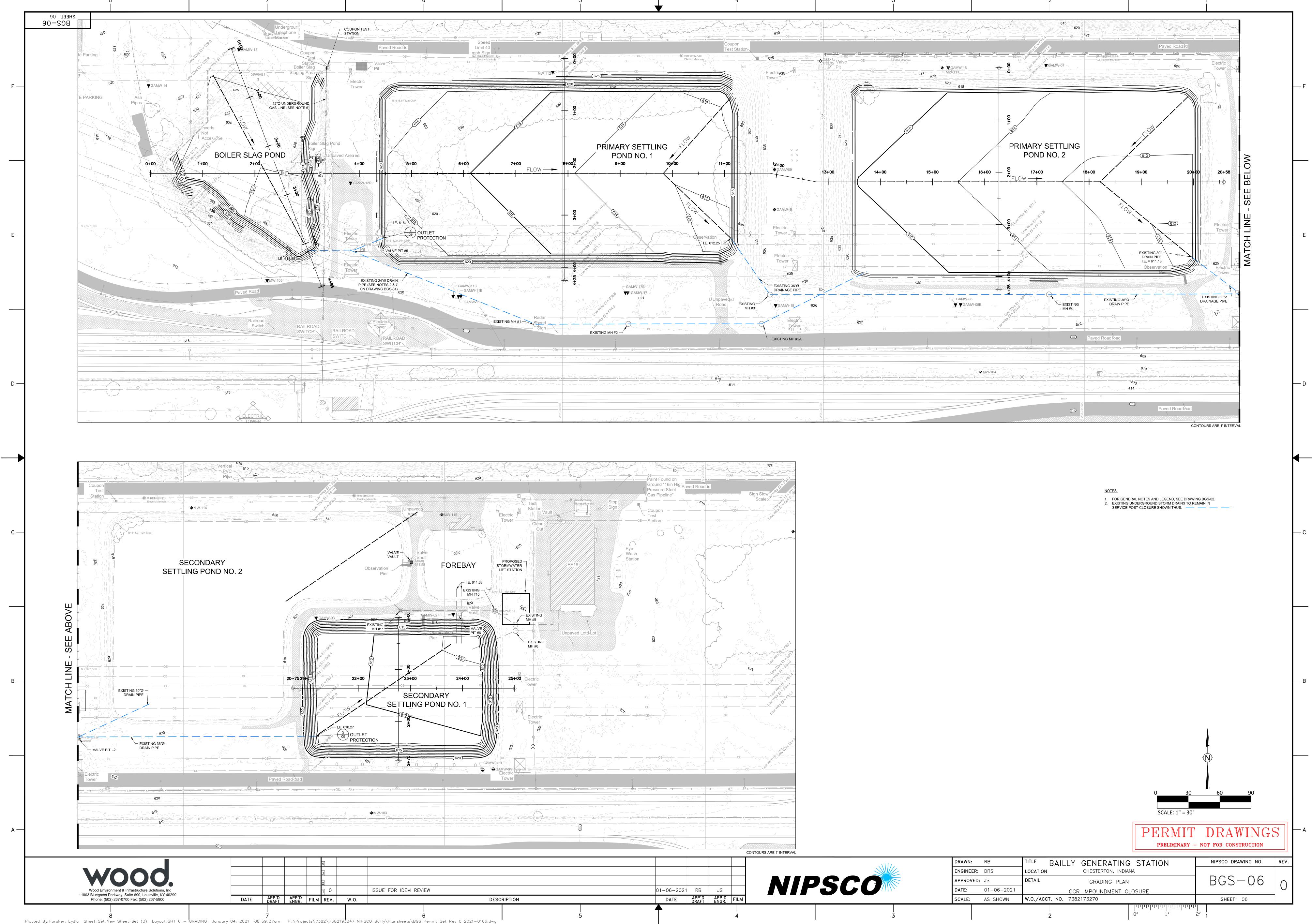
Wood Environment & Infrastructure Solutions, Inc		4	ISSUE FOR IDEM REVIEW	01-06-2021	RB JS	
11003 Bluegrass Parkway, Suite 690, Louisville, KY 40299 Phone: (502) 267-0700 Fax: (502) 267-5900	DATE APP'D DRAFT	APP'D ENGR. FILM REV. W.O.	DESCRIPTION	DATE	APP'D APP'D FILM DRAFT ENGR.	
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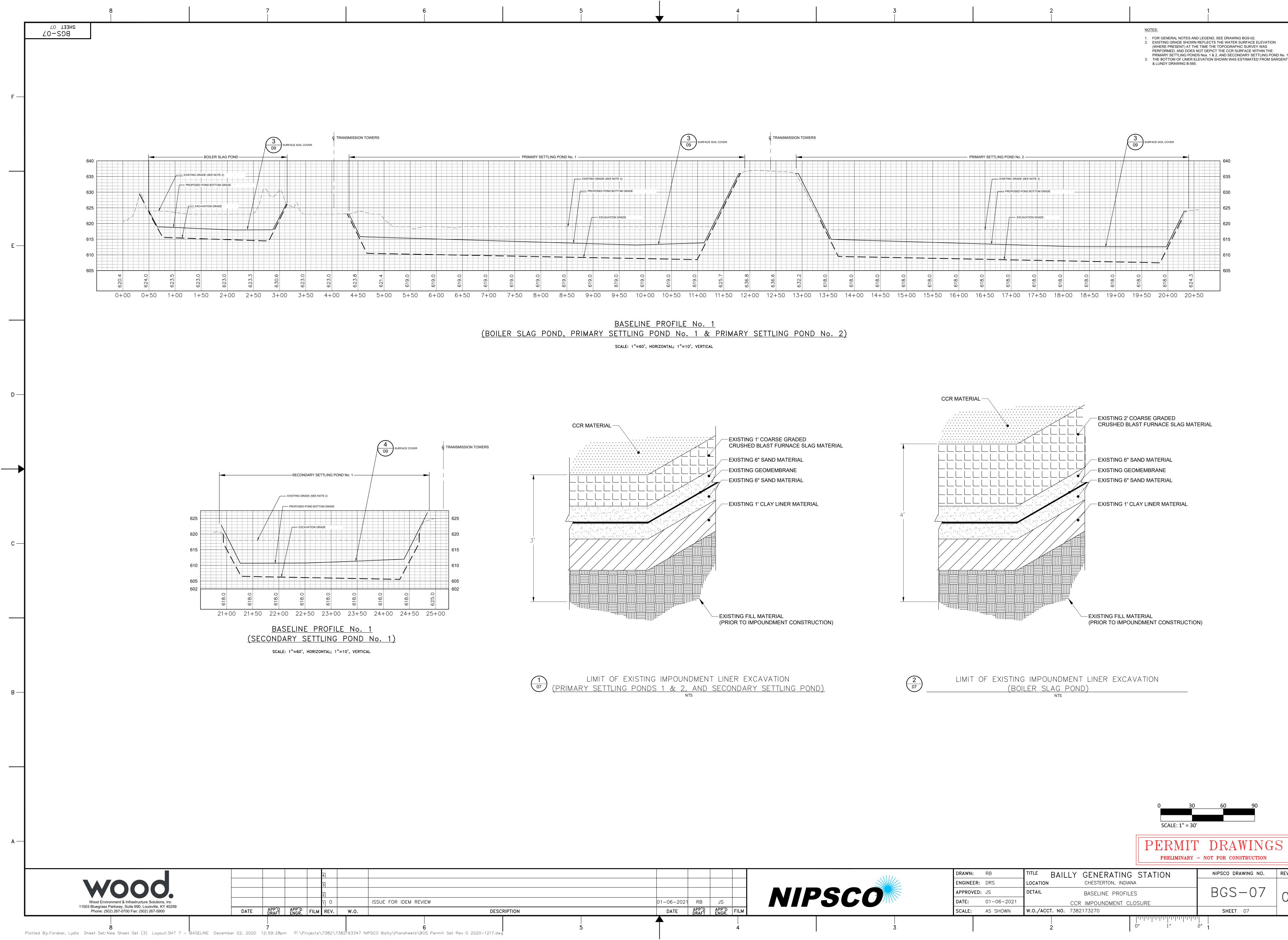
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ENGINEER:	DRS	LOCATION			CHESTERTON, IN	DIAN	4
APPROVED:	: JS	DETAIL		ΕX	ISTING CONDITIO	NS	PLAN
DATE:	01-06-2021			CCF	R IMPOUNDMENT	CLO	DSURE
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ENGINEER:	DRS	LOCATION		(	CHESTERTON, INDIA	NA	
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SCALE: 1" = 30' PERMIT DRAWINGS PRELIMINARY - NOT FOR CONSTRUCTION NIPSCO DRAWING NO. BGS-07 SHEET 07

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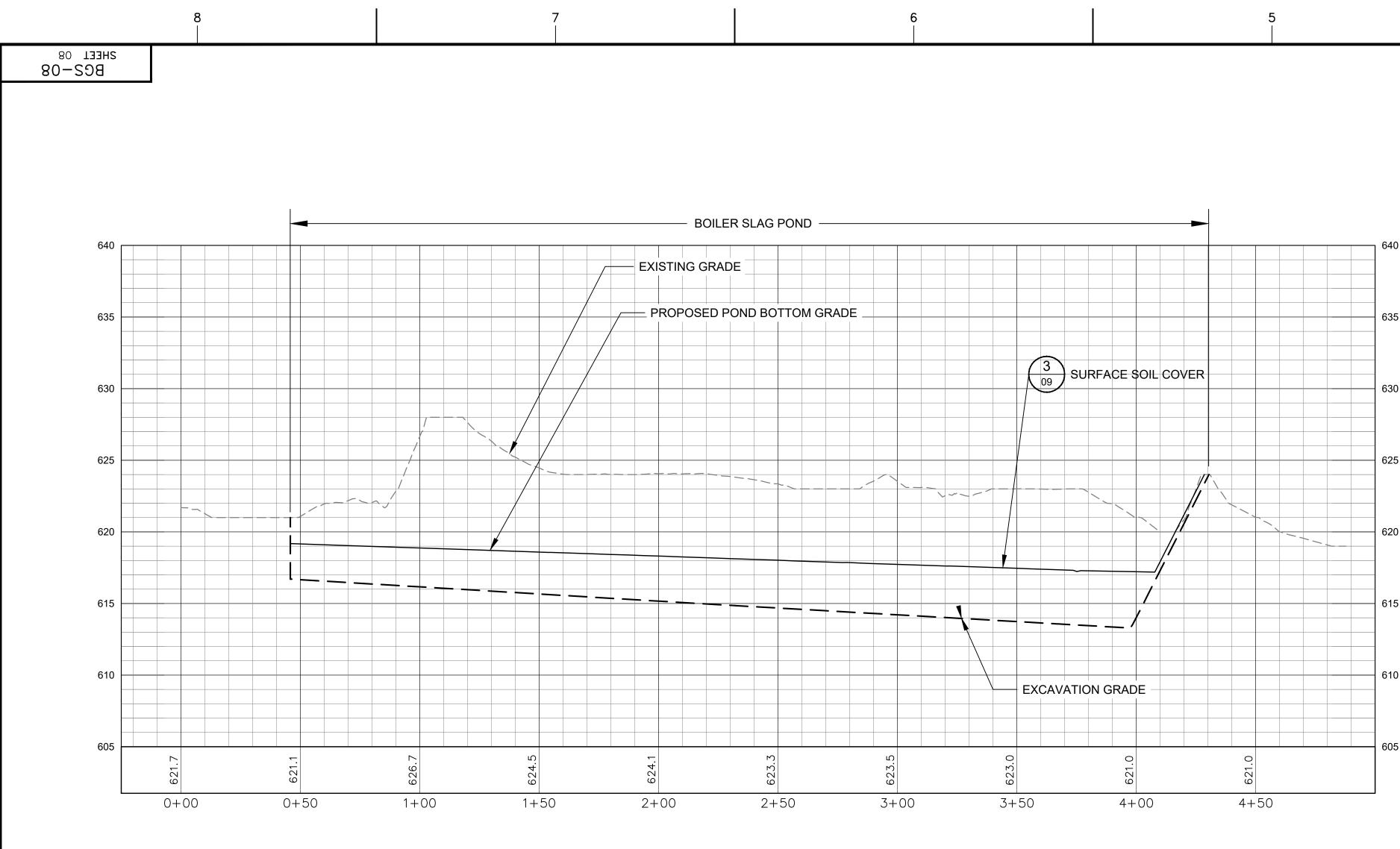
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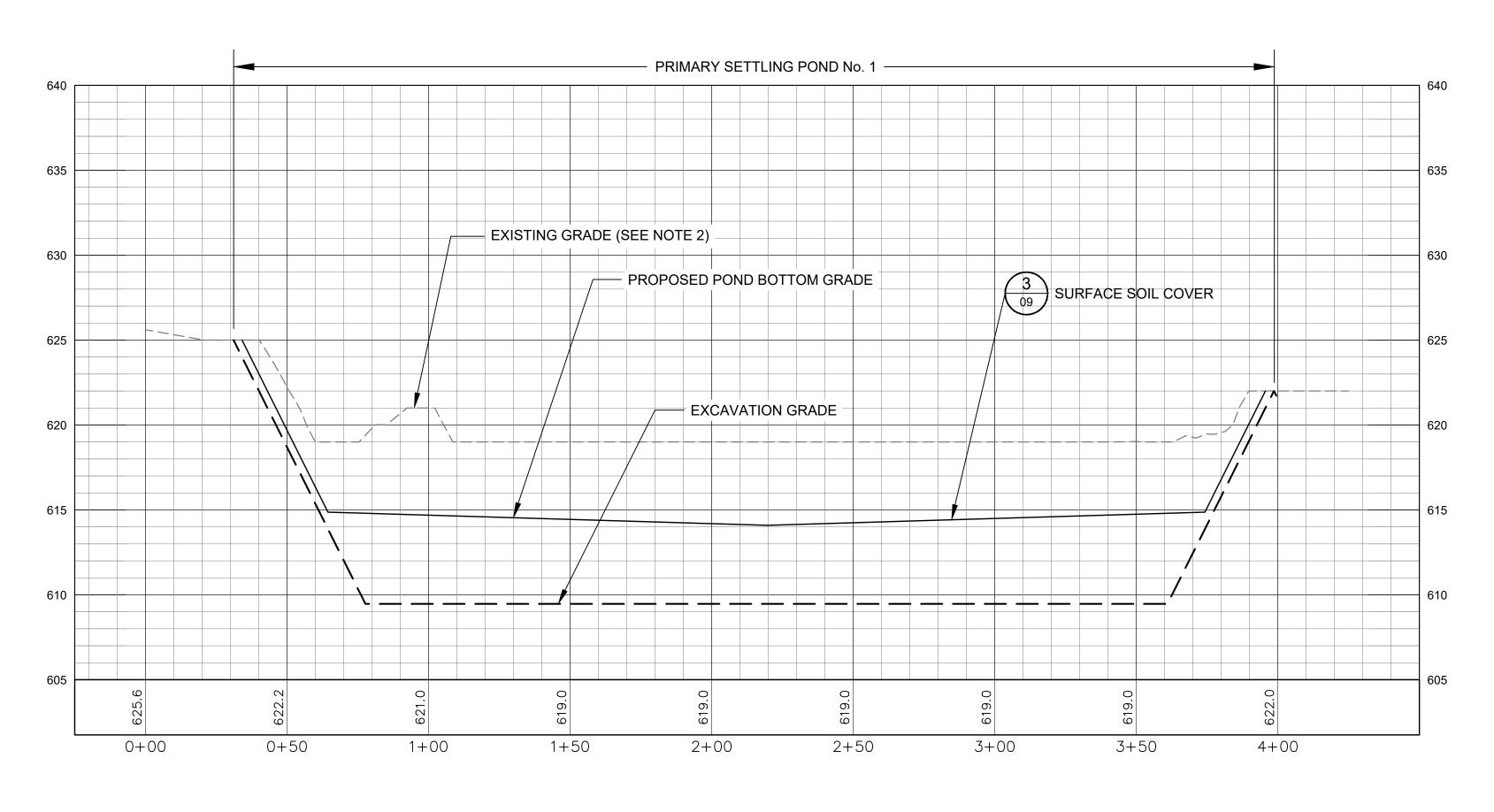
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<u>BOILER SLAG POND</u> SCALE: 1"=30', HORIZONTAL; 1"=10', VERTICAL



PRIMARY SETTLING POND No. 1 SCALE: 1"=30', HORIZONTAL; 1"=10', VERTICAL

## NOTES:

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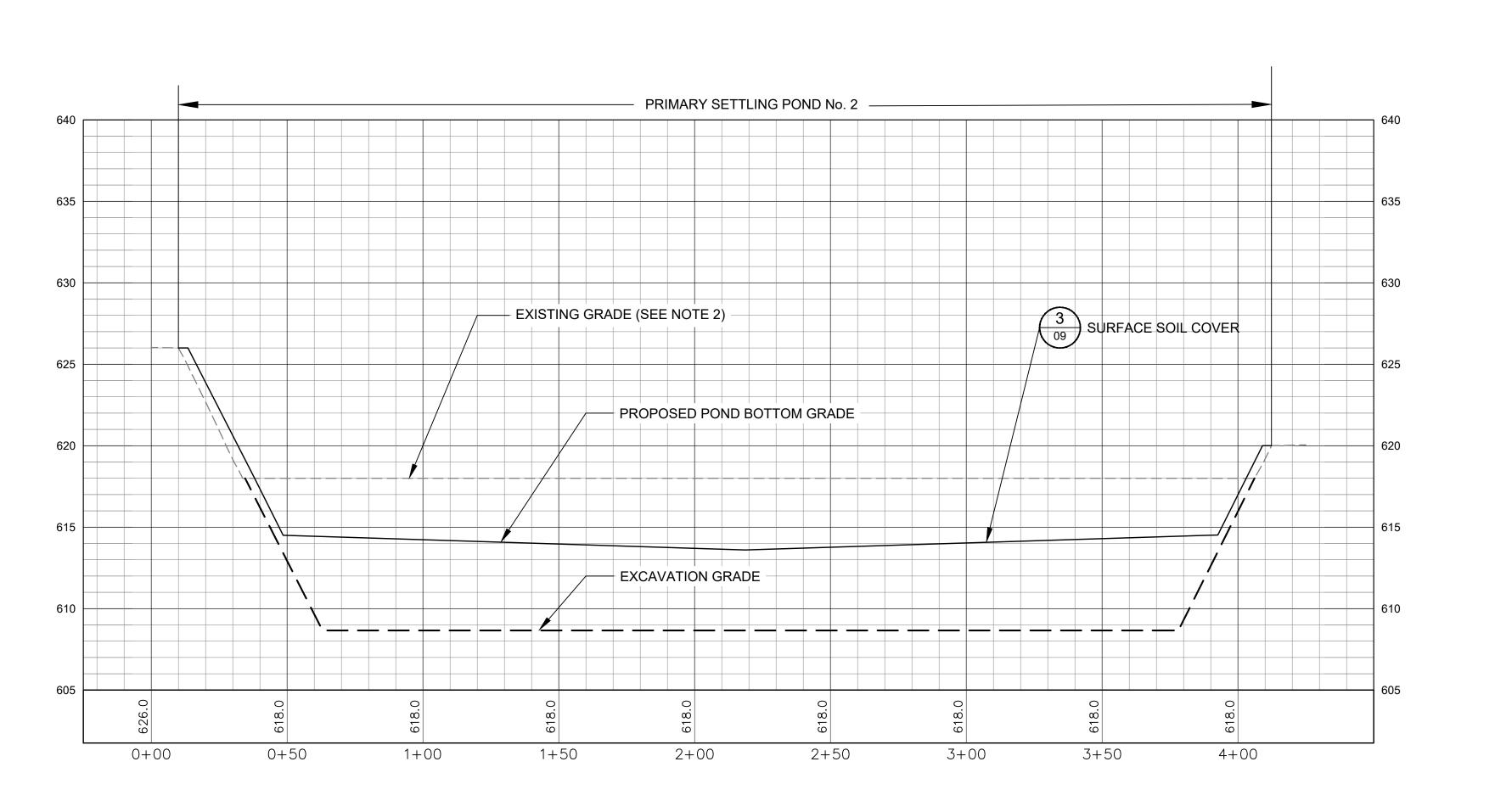
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Α-

- 1. FOR GENERAL NOTES AND LEGEND, SEE DRAWING BGS-02. 2. EXISTING GRADE SHOWN REFLECTS THE WATER SURFACE ELEVATION
- (WHERE PRESENT) AT THE TIME THE TOPOGRAPHIC SURVEY WAS PERFORMED, AND DOES NOT DEPICT THE CCR SURFACE WITHIN THE
- PRIMARY SETTLING PONDS Nos. 1 & 2, AND SECONDARY SETTLING POND No. 1. 3. THE BOTTOM OF LINER ELEVATION SHOWN WAS ESTIMATED FROM SARGENT & LUNDY DRAWING B-565.



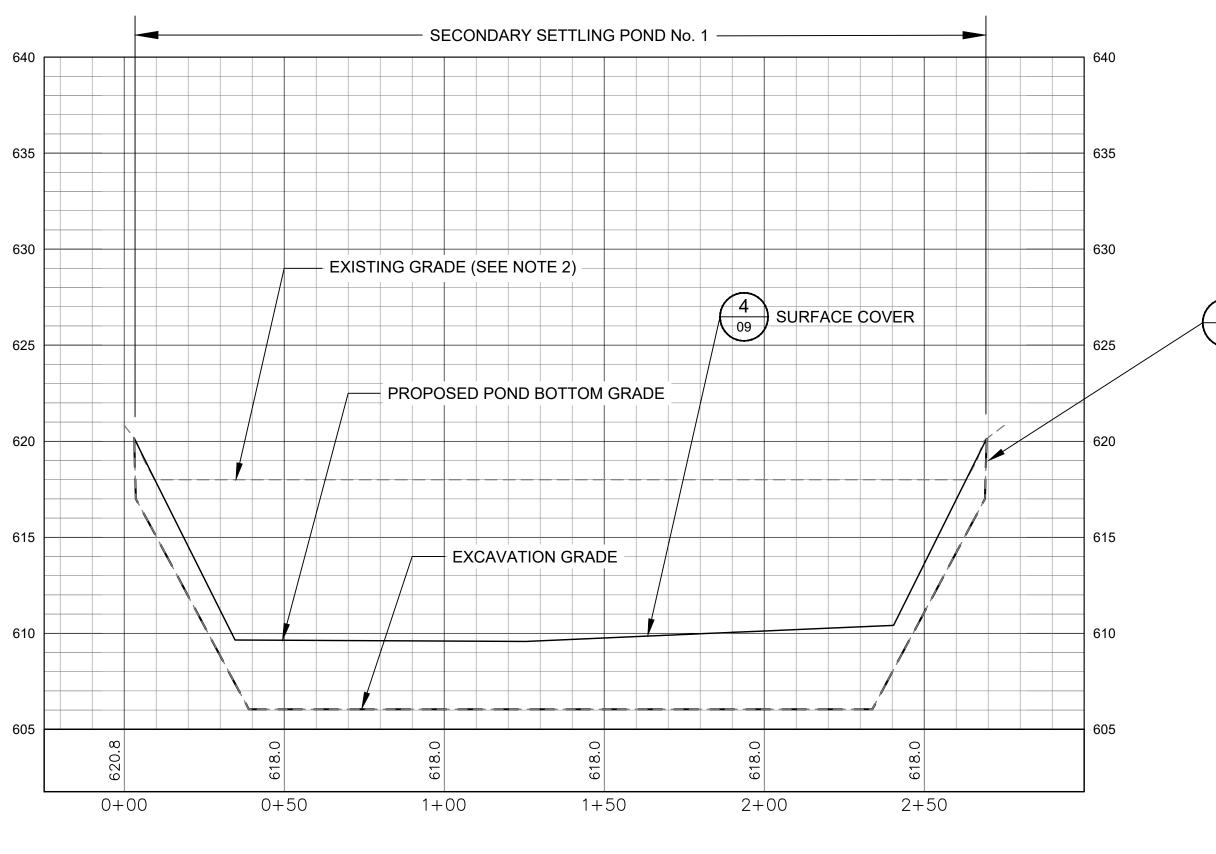




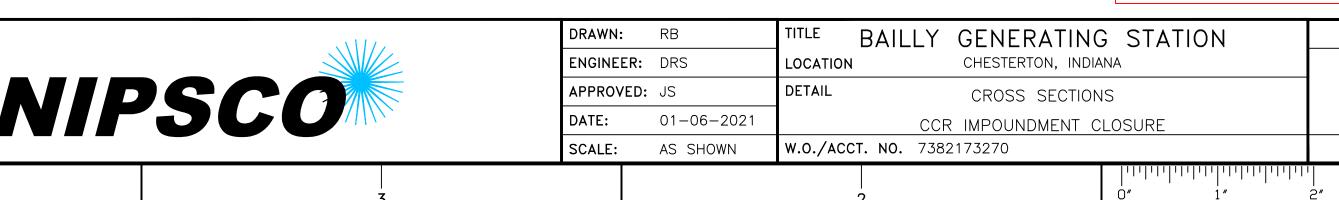


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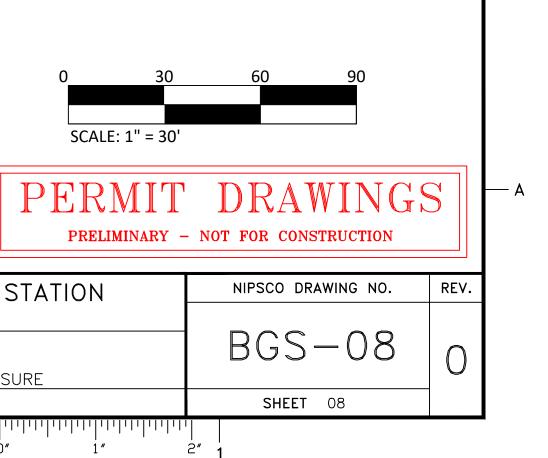
SECONDARY SETTLING POND No. 1 SCALE: 1"=30', HORIZONTAL; 1"=10', VERTICAL

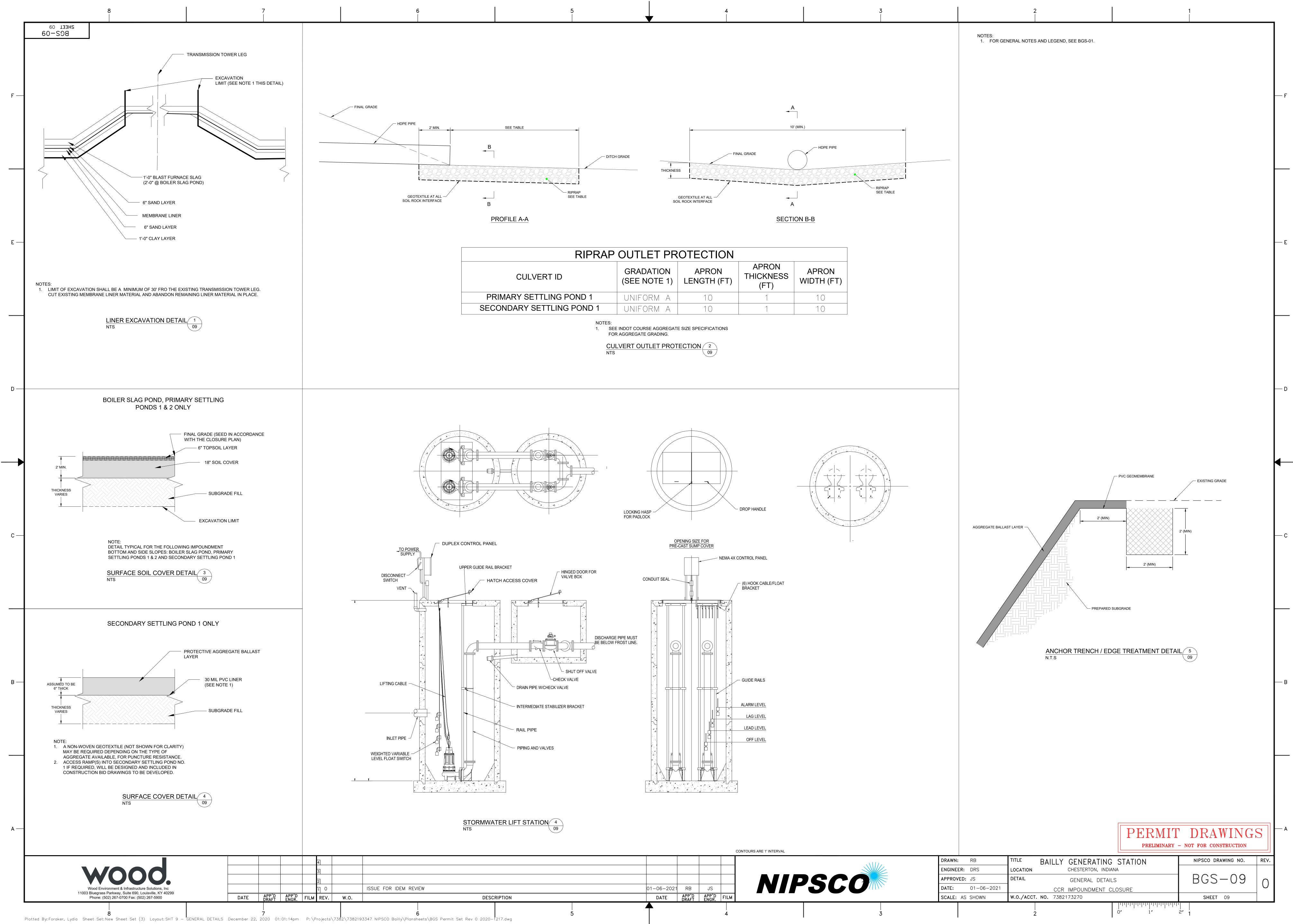




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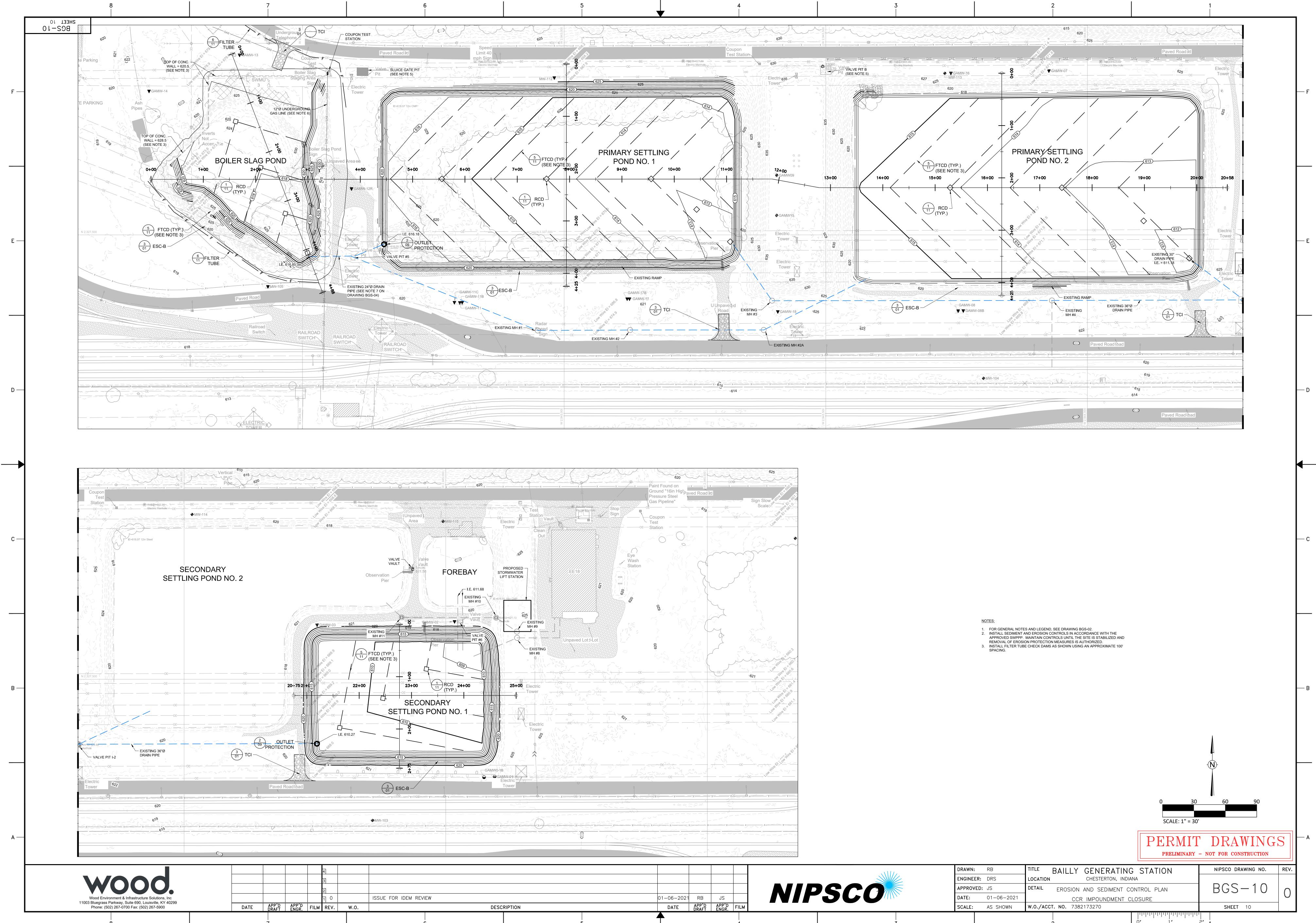
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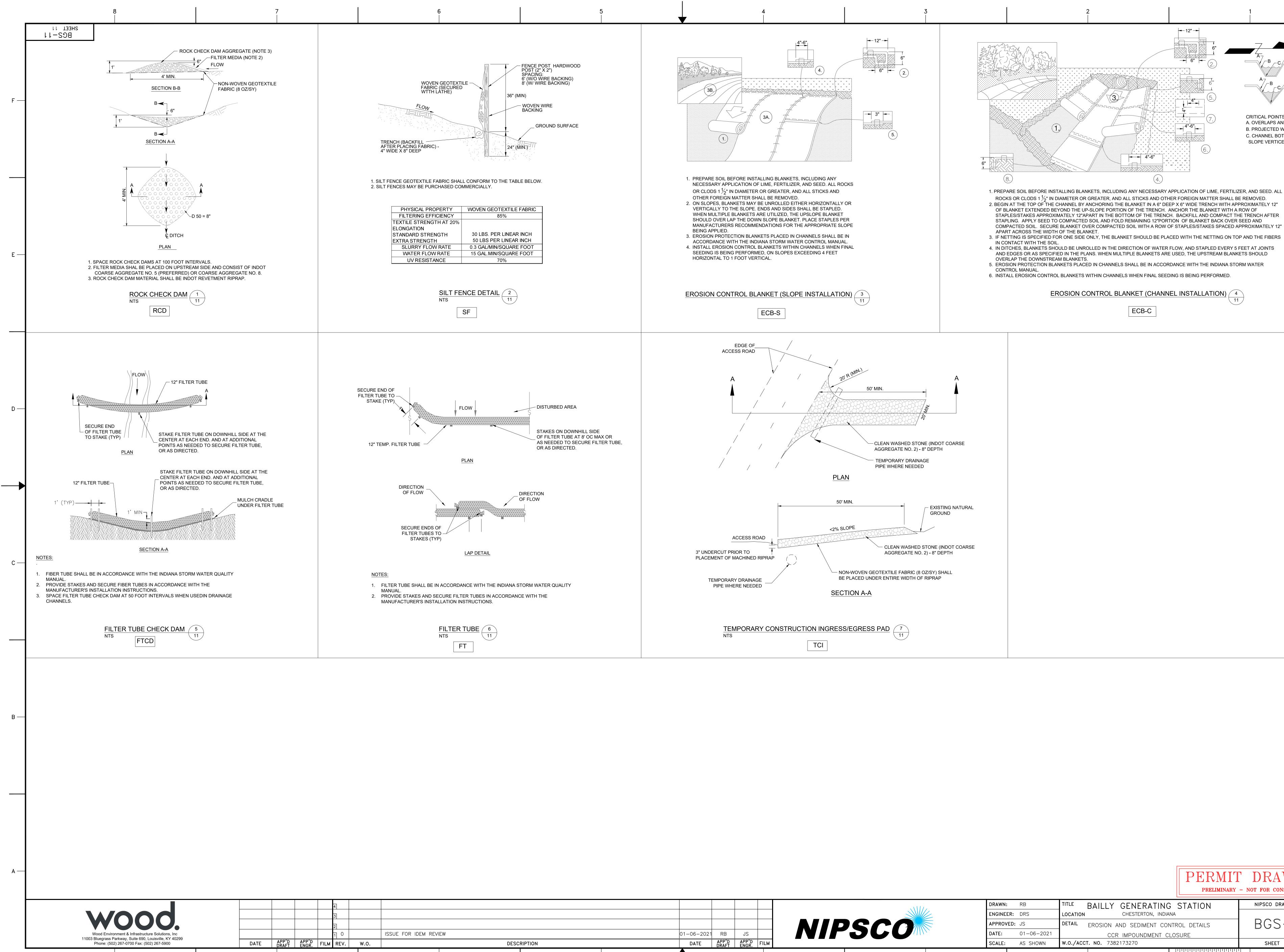
RIPRAP OUTLET PROTECTION						
CULVERT ID	GRADATION (SEE NOTE 1)	APRON LENGTH (FT)	APROI THICKNE (FT)			
PRIMARY SETTLING POND 1	UNIFORM A	10	1			
SECONDARY SETTLING POND 1	UNIFORM A	10	1			
NOTES:						

					CONTOURS ARE 1' INT
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	DRAWN: RB	TITLE BAILLY GENERATING	G STATION
	ENGINEER: DRS	LOCATION CHESTERTON, INDI	ANA
<b>IPSCO</b>	APPROVED: JS	DETAIL EROSION AND SEDIMENT CC	NTROL DETAILS
	<b>DATE:</b> 01-06-2021	CCR IMPOUNDMENT (	CLOSURE
	SCALE: AS SHOWN	W.O./ACCT. NO. 7382173270	
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~C /// ∕ __B ~C/// CRITICAL POINTS A. OVERLAPS AND SEAMS **B. PROJECTED WATER LINE** C. CHANNEL BOTTOM/SIDE SLOPE VERTICES — E 11 — D — C — B IIT DRAWINGS — A IARY - NOT FOR CONSTRUCTION NIPSCO DRAWING NO. REV. BGS-1 SHEET 11 

2″ **1** 

Appendix B

PROJECT: NIPSCO Bailly PROJECT NO.: 164-8171 HOLE DEPTH: 23 DEPTH TO BEDROCK:

# BOREHOLE LOG: GAMW-01

BOREHOLE LOCATION: N/A COORDINATES: N: 2327313.72 E: 2945093.535 GROUND SURFACE ELEV.: 621.26 TOP OF CASING ELEV.: 624.53 DATUM: Indiana West Zone NAD 83 PAGE 1 of 1 THOD: Direct Push

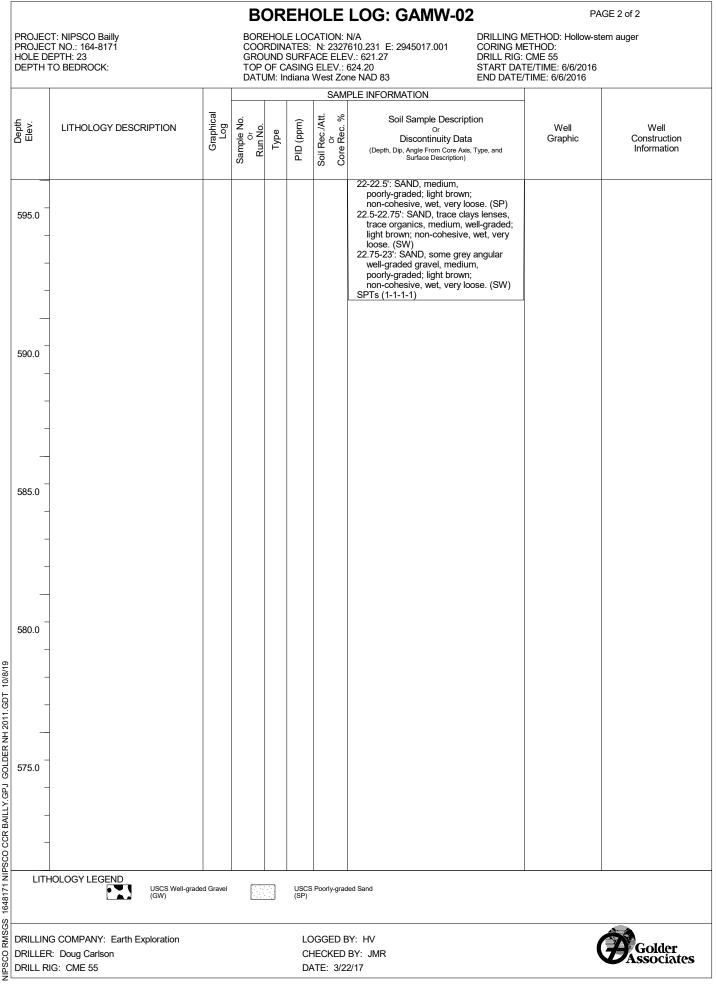
DRILLING METHOD: Direct Push CORING METHOD: DRILL RIG: Geoprobe 7720DT START DATE/TIME: 6/6/2016 END DATE/TIME: 6/6/2016

							PLE INFORMATION	-	
Leptn Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{Or} Run No.	Type	PID (ppm)	Soil Rec./Att. or Core Rec. %	Soil Sample Description Or Discontinuity Data (Depth, Dip, Angle From Core Axis, Type, and Surface Description)	Well Graphic	Well Construction Information
620.0 -	light brown to black fine to medium SAND, some silt, trace gravel		1	DP		2/4	<ul> <li>0-2.8': SAND, trace gravel, fine to medium, poorly-graded; brown; non-cohesive, dry, loose. (SP)</li> <li>2.8-3.5': SAND, fine, poorly-graded; light brown, orange mottling; non-cohesive, moist, dense. (SP)</li> <li>3.5-3.75': SAND, some silt, fine, poorly-graded; black; non-cohesive, moist, dense. (SP)</li> <li>3.75-4': SAND, fine; light brown; non-cohesive, dry, loose. (SP)</li> </ul>		Bentonite grout mix 0-9 ft-bgs
615.0 –	orange to light brown fine to medium SAND, some silt, trace gravel		2	DP		3.8 / 4	<ul> <li>4-5.4': SAND, trace fine rounded gravel, fine to medium, poorly-graded; light brown; non-cohesive, moist, dense. (SP)</li> <li>5.4-6.3': SAND, fine to medium, poorly-graded; orange; non-cohesive, moist, dense. (SP)</li> <li>6.3-8': SAND, fine to medium, poorly-graded; light tan, orange mottling. (SP)</li> </ul>		
- - 610.0			3	DP		2.1/4	<ul> <li>8-10.1': SAND, fine to medium, poorly-graded; light brown, dark brown streaking; non-cohesive, moist, dense. (SP)</li> <li>10.1-12': SAND, fine to medium, poorly-graded; light brown, orange mottling; non-cohesive, moist, dense. (SP)</li> </ul>		Bentonite chips 9-1 ft-bgs Filter Pack #5 Sand 11-23 ft-bgs
-			4	DP		3.8 / 4	<ul> <li>12-13.3': SAND, little fine subrounded gravel, fine to medium, poorly-graded; orange to light brown; non-cohesive, dry, loose. (SP)</li> <li>13.3-16': SAND, fine to medium, poorly-graded; orange; non-cohesive, wet, dense. (SP)</li> </ul>		2 PVC Screen slot 0.010 13-23 ft-bg
605.0 - - - -	light brown to black fine to		5	DP		2.6 / 4	16-19.25': SAND, fine to medium, poorly-graded; light orange; non-cohesive, wet, dense. (SP) 19.25-19.3': SAND and SILT, poorly-graded; black; non-cohesive, wet, dense. (SM) 19.3-19.75': SAND, fine to medium, poorly-graded; light brown, black streaking; non-cohesive, wet, dense. (SP) 19.75-19.8': SAND and SILT,		
600.0	medium SAND, some silt		6	DP		3/3	<ul> <li>19.75-19.6 : SAND and SIL1, poorly-graded; black; non-cohesive, wet, dense. (SM)</li> <li>19.8-20': SAND, fine to medium, poorly-graded; light brown, black streaking; non-cohesive, wet, dense. (SP)</li> <li>20-23': SAND, 3-inch black sand and silt band, fine to medium, poorly-graded; brown; non-cohesive, wet, dense. (SP)</li> </ul>		
LITH	HOLOGY LEGEND USCS Poorly-gra (SP)	ded Sand							
ORILLER	G COMPANY: Earth Exploration R: Zach IG: Geoprobe 7720DT				Cł	GGED B HECKED ATE: 3/22	BY: JMR	(	Golder

	BOREHOLE LOG: GAMW-01B PAGE 1 of 2												
PROJEC HOLE DE	T: NIPSCO Bailly T NO.: 164-8171 EPTH: 32 "O BEDROCK:		COOI GROI TOP	RDIN/ UND \$ OF C/	ATES: SURFA ASING	CE ELE	312.628 E: 2845073.317 V.: 621.08	CORING MI DRILL RIG: START DAT	METHOD: ROTOSC ETHOD: Track Mounted Die FE/TIME: 9/14/2019 TIME: 9/14/2019 12	drich D-50 11:05:00 PM			
						SAM	PLE INFORMATION						
Depth Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{Or} Run No.	Type	PID (ppm)	Soil Rec./Att. or Core Rec. %	Soil Sample Descripti Or Discontinuity Data (Depth, Dip, Angle From Core Axis, Surface Description)		Well Graphic	Well Construction Information			
	dark brown fine SAND			RS			0' to 0.5': SAND, trace organi	ics, some		Bentonite grout mix			
620.0	gray coarse SAND and GRAVEL dark brown fine SAND and CLAY			RS RS			rounded gravel < 1 inch, fir graded; dark brown; dry, lo			0-24 ft-bgs			
-	tan and brown fine to medium SAND			RS			(FILL) 0.5' to 0.8' SAND and GRAVI medium sand; coarse, gray gravel < 1 inch, well-graded loose. (FILL) 0.8' to 1.1': SAND and CLAY,	y, rounded d; dry, , fine,					
tan and gray fine to medium SAND SAND SAND tan and gray fine to medium SAND SAND SAND SAND SAND SAND													
615.0 -							3.3' to 5.8': SAND, fine to me graded; tan; moist, loose. (	dium, well (SW)					
610.0 -				RS			10' to 11': SAND, fine to med graded; tan and gray; mois (SW) 11' to 14.6': SAND, fine to me	st, loose.					
-				RS			graded; tan and gray; mois (SW)						
_		••••••		RS			14.6' to 15.6': SAND, fine to r well graded; tan; moist, loo						
-	dark brown fine to medium SAND	*****		RS			15.6' to 15.8': SAND, fine to r	. ,					
605.0 -	light brown to yellowish-brown fine to medium SAND			RS			well-graded; light brown; w compact. (SW)						
_							15.8' to 17.1': SAND, fine to r well-graded; light brown; w (SW)	medium, et, loose.					
600.0 -							20' to 27.5': SAND, fine to me well-graded; light brown; w (SW)						
-				RS						Bentonite chips			
										24-25.8 ft-bgs			
LITH	LITHOLOGY LEGEND Fill (made ground) USCS Well-graded Sand USCS Poorly-graded Sand (SP)												
DRILLER	G COMPANY: LAYNE t: C. Stoizenbach G: Track Mounted Diedrich D-50				CH	GGED E IECKED .TE: 9/23	BY: AMH			Golder			

			BO	RE	EHC	DLE L	.OG: GAMW-01B	PA	GE 2 of 2
PROJEC	ST: NIPSCO Bailly ST NO.: 164-8171 EPTH: 32 TO BEDROCK:		COOF GROL TOP (	rdin/ JND : DF C/	ATES: SURF# ASING	CE ELE	312.628         E: 2845073.317         CORING M           V.: 621.08         DRILL RIG           523.76         START DA	METHOD: ROTOSC IETHOD: : Track Mounted Die TE/TIME: 9/14/2019 /TIME: 9/14/2019 12	drich D-50 11:05:00 PM
						SAM	PLE INFORMATION	_	
Depth Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{Or} Run No.	Type	PID (ppm)	Soil Rec./Att. or Core Rec. %	Soil Sample Description Or Discontinuity Data (Depth, Dip, Angle From Core Axis, Type, and Surface Description)	Well Graphic	Well Construction Information
595.0 -	light brown to yellowish-brown fine to medium SAND			RS					Filter Pack #5 Sand 25.8-32 ft-bgs 2 PVC Screen slot
				RS			30' to 32' SAND, trace fines, fine to medium, poorly-graded; yellowish-brown. (SP)		0.010 27-32 ft-bgs
-									
585.0 -									
580.0 -									
575.0 -									
575.0 - 575.0 - - 	HOLOGY LEGEND Fill (made ground	a)		<u>کې</u>	USCS (SW)	Well-gradeo	I Sand USCS Poorly-graded Sand (SP)		
	G COMPANY: LAYNE R: C. Stoizenbach IG: Track Mounted Diedrich D-50				CH	GGED B IECKED ATE: 9/23	BY: AMH		Golder

			B	OR	EH	OLE	LOG: GAMW-02		PA	GE 1 of 2
PROJEC HOLE DI	CT: NIPSCO Bailly CT NO.: 164-8171 EPTH: 23 TO BEDROCK:		COO GRO TOP	rdin Und Of C	ATES: SURF. ASING	ACE ELE' G ELEV.: (	610.231 E: 2945017.001 0 V.: 621.27 E 624.20 S	CORING MI DRILL RIG: START DAT	/IETHOD: Hollow-ste ETHOD: CME 55 FE/TIME: 6/6/2016 TIME: 6/6/2016	em auger
						SAM	PLE INFORMATION			
Depth Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{Or} Run No.	Type	PID (ppm)	Soil Rec./Att. or Core Rec. %	Soil Sample Description Or Discontinuity Data (Depth, Dip, Angle From Core Axis, Ty Surface Description)		Well Graphic	Well Construction Information
620.0	grey GRAVEL		1	SS		1.3 / 2	0-1.4': GRAVEL, angular, well- grey; non-cohesive, dry, loos 1.4-2': SAND, medium, poorly- brown; non-cohesive, moist, (SP)	se. (GW) araded:		Bentonite grout mix 0-9 ft-bgs
- - 615.0 -	some organics, trace gravel		2	SS		1.8/2	5-6': SAND, organics, fine to m well-graded; dark brown; non-cohesive, dry, loose. (S) 6-6.25': GRAVEL, angular, well grey; non-cohesive, dry, loos 6.25-7': SAND, medium, poorly brown; non-cohesive, dry, loo (SP)	W) I-graded; se. (GW) /-graded:		
- 			3	SS		1.6/2	SPTs (1-3-2-3) 10-10.7': SAND, organics, fine medium, well-graded; dark b non-cohesive, dry, very loose 10.7-10.75': GRAVEL, angular, well-graded; grey; non-cohes very loose. (GW) 10.75-12': SAND, medium, poorly-graded; light brown to non-cohesive, moist, very loo (SP)	orown; e. (SW) , sive, dry, o brown;		Bentonite chips 9-11 ft-bgs Filter Pack #5 Sand 11-23 ft-bgs 2 PVC Screen slot 0.010 13-23 ft-bgs
- 605.0 -	light brown medium SAND		4	SS		1.3 / 2	SPTs (1-2-2-3) 15-15.9': SAND, trace gravel, n well-graded; grey; non-cohes very loose. (SW) 15.9-17': SAND, medium, poorly-graded; light brown; non-cohesive, wet, very loos SPTs (2-2-2-2)	sive, wet,		
600.0			5	SS		2/2	20-22': SAND, trace gravel, me poorly-graded; light brown; non-cohesive, wet, very loos SPTs (1-1-1-2)			
_		-	6	SS		1/1				
LITH	HOLOGY LEGEND	aded Gravel			USCS (SP)	S Poorly-grad	ed Sand			
DRILLEF	G COMPANY: Earth Exploration R: Doug Carlson IG: CME 55				Cl	DGGED B HECKED ATE: 3/22	BY: JMR		(	Golder

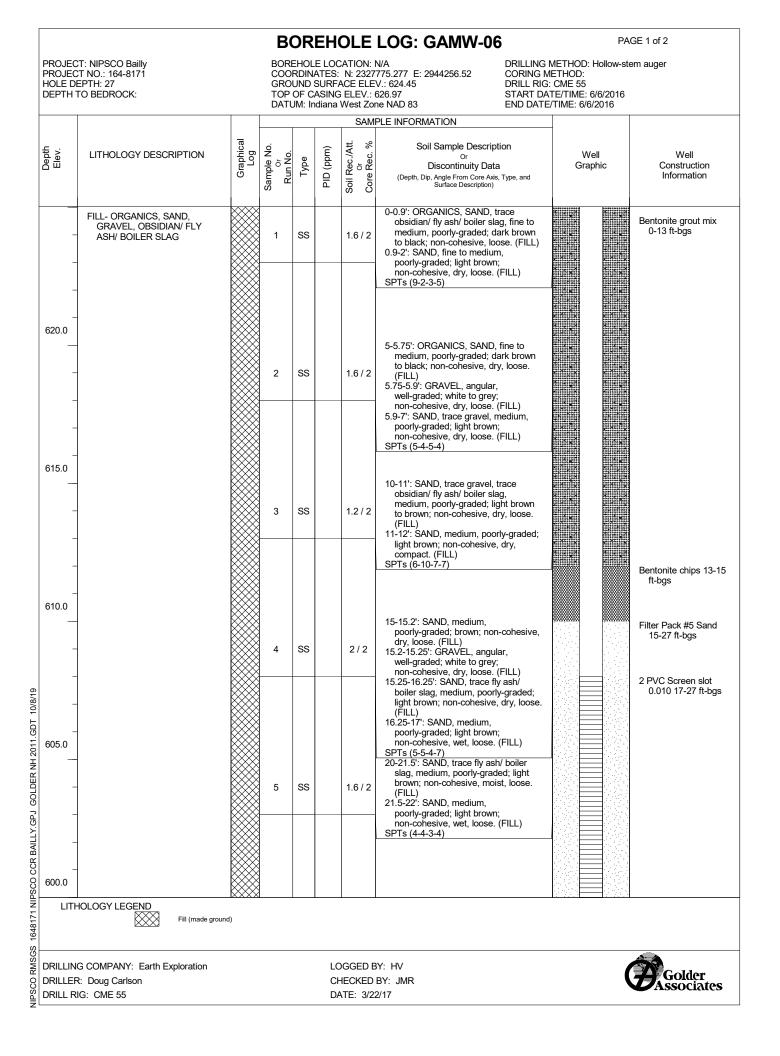


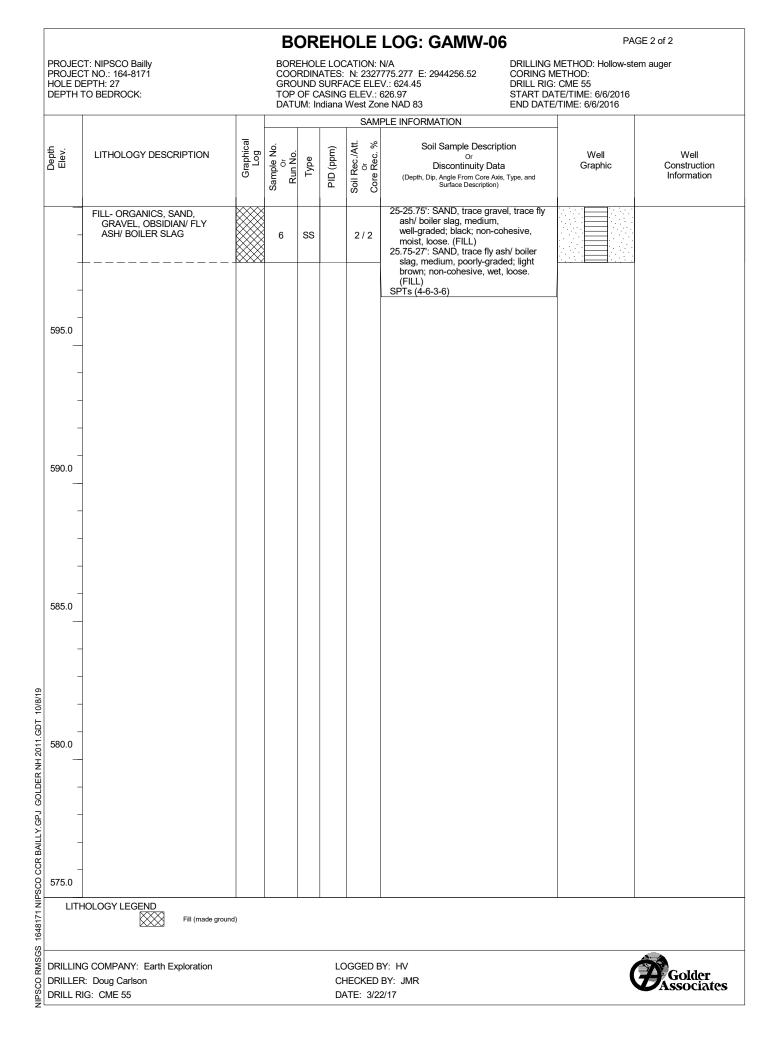
RMSGS

PROJEC	T: NIPSCO Bailly T NO.: 164-8171 EPTH: 23 TO BEDROCK:		BOR COC GRC TOP	EHOL RDIN UND S	E LOC ATES: SURF/ ASING	CATION: I N: 2327 ACE ELE GELEV.: (	603.697 E: 2944754.25 V.: 620.95	DRILLING N CORING MI DRILL RIG: START DAT	/IETHOD: Hollow-ste ETHOD:	GE 1 of 1 em auger
Depth Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. Or Run No.	Type	PID (ppm)	Soil Rec./Att. or Core Rec. %	DLE INFORMATION Soil Sample Descrip Or Discontinuity Data (Depth, Dip, Angle From Core Axis Surface Description)	а	Well Graphic	Well Construction Information
620.0 -	grey GRAVEL light brown medium SAND		1	SS		1.1/2	0-1.3': GRAVEL, angular, we grey; non-cohesive, dry, lo 1.3-2': SAND, medium, poor light brown; non-cohesive, (SP) SPTs (2-2-4-5)	oose. (GW) ly-graded;		Bentonite grout mix 0-9 ft-bgs
- 	light brown to black medium SAND, grey gravel		2	SS		0.8/2	5-6.8': SAND, grey angular v gravel, medium, well-grad non-cohesive, dry, loose. 6.8-7': SAND, medium, poor light brown; non-cohesive, (SP) SPTs (2-4-3-4)	led; black; (SW) ly-graded;		
- 610.0 - -	grey to dark grey GRAVEL		3	SS		1.3 / 2	10-11.1': GRAVEL, angular, well-graded; grey to dark of non-cohesive, dry, loose. 11.1-12': SAND, medium, poorly-graded; light brown non-cohesive, moist, loose SPTs (2-4-4-4)	grey; (GW) n;		Bentonite chips 9-11 ft-bgs Filter Pack #5 Sand 11-23 ft-bgs 2 PVC Screen slot
	grey GRAVEL		4	SS		1.4 / 2	15-15.9': GRAVEL, angular, well-graded; grey; non-col loose. (GW) 15.9-17': SAND, medium, poorly-graded; light brown non-cohesive, moist, very (SP) SPTs (2-2-2-4)	hesive, dry, n;		0.010 13-23 ft-bgs
- 600.0 -			5	SS		1.7 / 2	20-22': SAND, medium, pool light brown; non-cohesive, loose. (SP) SPTs (1-1-1-1)			
	IOLOGY LEGEND USCS Well-grad	led Gravel			USCS (SP)	Poorly-grad	ed Sand	II-graded Sand	1991 <u>- 199</u> 1	
DRILLEF	G COMPANY: Earth Exploration t: Zach G: CME 55				Cł	)GGED B HECKED ATE: 3/22	BY: JMR		(	Golder

			B	OR	EHO	OLE	LOG: GAMW-04		PA	GE 1 of 2				
PROJEC HOLE DE	T: NIPSCO Bailly T NO.: 164-8171 EPTH: 23 'O BEDROCK:		COO GRO TOP	RDIN/ UND \$ OF C/	ATES: SURFA ASING	CE ELEV ELEV.: 6 West Zor	464.582 E: 2944724.465 C V: 620.88 D 524.12 S Ne NAD 83 E	oring Me Rill Rig: Start Dat	IETHOD: Direct Pus ETHOD: Geoprobe 7720DT 'E/TIME: 6/6/2016 TIME: 6/6/2016	sh				
							PLE INFORMATION							
Depth Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{Or} Run No.	Type	PID (ppm)	Soil Rec./Att. or Core Rec. %	Soil Sample Description Or Discontinuity Data (Depth, Dip, Angle From Core Axis, Tyj Surface Description)		Well Graphic	Well Construction Information				
620.0 _	FILL- BALLAST, SAND, fine GRAVEL, FLY ASH, BOILER SLAG		1	DP		1.3/4	0-3.4': BALLAST, fine gravel, lit medium poorly-graded; light t non-cohesive, dry, loose. (FIL 3.4-4': SAND, fine to medium, poorly-graded; brown; non-co moist, loose. (FILL)	brown; LL)		Bentonite grout mix 0-9 ft-bgs				
615.0 _			2	DP		1.3 / 4	<ul> <li>4-6.75': CLAY, little fine rounded gravel, little fine poorly-graded dark grey; cohesive, wet, firm 6.75-7.4': SAND, little fly ash/ buslag, fine to medium, poorly-glight brown; non-cohesive, dr. (FILL)</li> <li>7.4-8': SAND, fly ash, fine to me poorly-graded; dark brown; non-cohesive, dry, loose. (FIL</li> </ul>	d sand; n. (FILL) oiler graded; y, loose. edium,						
610.0 _			3	DP		1.3/4	8-11.2': SAND, fly ash, fine to m poorly-graded; dark brown; non-cohesive, moist, loose. (I 11.2-12': SAND, trace fly ash, fi medium, poorly-graded; tan, mottling; non-cohesive, moist compact. (FILL)	FILL) ne to orange		Bentonite chips 9-11 ft-bgs Filter Pack #5 Sand 11-23 ft-bgs				
605.0	tan to orange fine to medium SAND, some silt, trace gravel		4	DP		2.7 / 4	<ol> <li>12-13.8': SAND, little black silt, 'poorly-graded; tan, orange m non-cohesive, moist, compace 13.8-14.2': SAND, trace gravel, medium, poorly-graded; tan, 'mottling; non-cohesive, moist compact. (SP)</li> <li>14.2-14.75': SILT, some fine poorly-graded sand, trace or g black; cohesive, moist, very s (ML)</li> </ol>	ottling; ct. (SP) fine to orange t, ganics;		2 PVC Screen slot 0.010 13-23 ft-bgs				
-	tan to dark brown fine to medium SAND, some silt		5	DP		3.75 / 4	<ol> <li>14.75-15.2': SAND, some silt, fi medium, poorly-graded; dark non-cohesive, wet, compact.</li> <li>15.2-15.6': SAND, fine to mediu poorly-graded; light orange; non-cohesive, wet, compact.</li> <li>15.6-16': SAND, fine to medium poorly-graded; tan; non-cohe moist, compact. (SP)</li> <li>16-18.5': SAND, fine to medium poorly-graded; tan; non-cohe</li> </ol>	orange; (SP) Im, (SP) h, sive,						
600.0 _	light grey fine to medium SAND, some silt		6	DP		3/3	wet, compact. (SP) 18.5-18.6': SILT and SAND, poorly-graded; black; non-cot wet, compact. (ML) 18.6-20': SAND, fine to medium poorly-graded; tan; non-cohe wet, compact. (SP)	۱,						
-														
LITH	LITHOLOGY LEGEND VICS Poorly-graded Sand (SP)													
DRILLER	DRILLING COMPANY: Earth Exploration       LOGGED BY: DSD         DRILLER: Zach       CHECKED BY: JMR         DRILL RIG: Geoprobe 7720DT       DATE: 3/22/17													

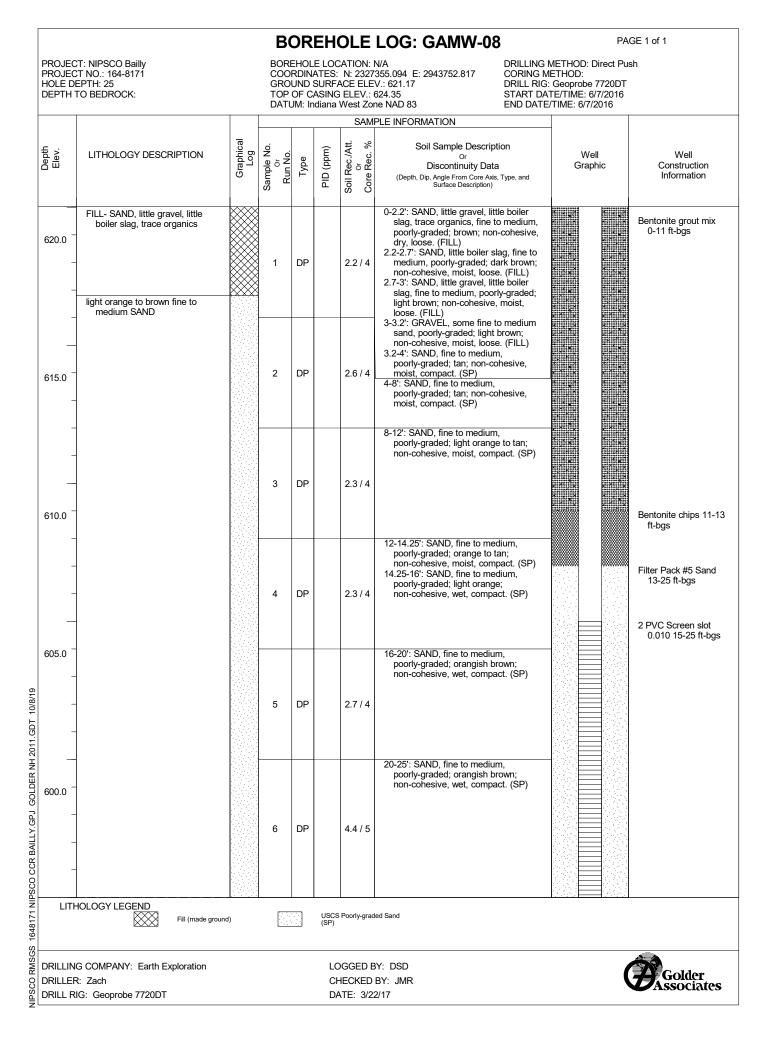
BOREHOLE LOG: GAMW-04 PAGE 2 of 2												
PROJECT: NIPSCO Bailly     BOREHOLE LOCATION: N/A     DRILLING METHOD: Direct Push       PROJECT NO.: 164-8171     COORDINATES: N: 2327464.582 E: 2944724.465     CORING METHOD: Direct Push       HOLE DEPTH: 23     GROUND SUFFACE ELEV.: 620.88     DRILL RIG: Geoprobe 7720DT       DEPTH TO BEDROCK:     TOP OF CASING ELEV.: 624.12     START DATE/TIME: 6/6/2016       DATUM: Indiana West Zone NAD 83     END DATE/TIME: 6/6/2016												
				SAM	PLE INFORMATION							
	Graphical Log Sample No.	Run No. Type	PID (ppm)	Soil Rec./Att. or Core Rec. %	Soil Sample Description Or Discontinuity Data (Depth, Dip, Angle From Core Axis, Type, a Surface Description)	Well Graphic	Well Construction Information					
595.0 _ - - -					<ul> <li>20-20.75': SAND, fine to medium, poorly-graded; brown; non-cohes wet, compact. (SP)</li> <li>20.75-20.8': SILTY SAND, poorly-graded; dark brown; non-cohesive, wet, compact. (SI</li> <li>20.8-23': SAND, fine to medium, poorly-graded; light grey; non-cohesive, wet, compact. (SI</li> </ul>	м)						
590.0 _ - - -												
 585.0 												
580.0 _												
575.0 _ - - - LITHOLOGY LEGEND Fill (made ground)												
	)		USCS (SP)	Poorly-grad	ed Sand							
DRILLING COMPANY: Earth Exploration DRILLER: Zach DRILL RIG: Geoprobe 7720DT			CH	GGED B IECKED ATE: 3/22	BY: JMR		Golder					





BOREHOLE LOG: GAMW-07 PAGE 1 of 2 PROJECT: NIPSCO Bailly BOREHOLE LOCATION: N/A DRILLING METHOD: Direct Push COORDINATES: N: 2327813.592 E: 2943926.623 GROUND SURFACE ELEV.: 625.99 PROJECT NO.: 164-8171 CORING METHOD: HOLE DEPTH: 29 DRILL RIG: Geoprobe 7720DT DEPTH TO BEDROCK: TOP OF CASING ELEV .: 629.04 START DATE/TIME: 6/7/2016 DATUM: Indiana West Zone NAD 83 END DATE/TIME: 6/7/2016 SAMPLE INFORMATION % /Att. Sample No. ^{Or} Run No. Graphica Soil Sample Description Depth Elev. (mdd) LITHOLOGY DESCRIPTION Log Rec. Well Well Type Or **Discontinuity Data** Construction Graphic PID ( Core F Information (Depth, Dip, Angle From Core Axis, Type, and Surface Description) Soil 0-2.6': SAND, some gravel, trace fly FILL- FLY ASH, BOILER SLAG, ash, fine to medium, poorly-graded; Bentonite grout mix SAND, GRAVEL, BRICK brown; non-cohesive, dry, loose. 0-15 ft-bgs 625.0 FRAGMENTS (FILL) 2.6-2.7': SAND, fine to medium, poorly-graded; orange to tan; non-cohesive, dry, loose. (FILL) 2.7-4': FLY ASH/ BOILER SLAG, brick 1.75/4 1 DP fragments, 1-inch poorly-graded sand lens; black; non-cohesive, dry, loose. (FILL) 4-6.75': SAND, fine to medium, poorly-graded; brown; non-cohesive, moist, loose. (FILL) 6.75-8': SAND, fine to medium, poorly-graded; orange to tan; 620.0 2 DP 2.8/4 non-cohesive, moist, loose. (SP) orange to tan fine to medium SAND 8-12': SAND, fine to medium, poorly-graded; light orange to tan, black lens at 11.2'; non-cohesive, moist, loose. (SP) DP 3 27/4 615.0 12-16': SAND, fine to medium, poorly-graded; orange to tan; non-cohesive, moist, compact. (SP) Δ DP 2.7/4Bentonite chips 15-17 ft-bgs 610.0 16-19': SAND, fine to medium, poorly-graded; orange to tan; non-cohesive, moist, compact. (SP) Filter Pack #5 Sand 19-20': SAND, fine to medium, 17-29 ft-bgs poorly-graded; orange to tan; 5 DP 2/4 non-cohesive, wet, compact. (SP) 2 PVC Screen slot 0.010 19-29 ft-bgs 20-21.25': SAND, fine to medium, poorly-graded; grey; non-cohesive, wet, compact. (SP) 605.0 21.25-22.8': PEAT; dark reddish brown; R' dark reddish brown PEAT cohesive, moist, very stiff. (Pt) 22.8-23.25': SAND, fine to medium, DP <u>^</u> 6 3.25/4 poorly-graded; grey, black lenses; non-cohesive, moist, compact. (SP) Ś. grey to light brown fine to 23.25-24': SAND, fine to medium, medium SAND poorly-graded; light brown; non-cohesive, wet, compact. (SP) 7 DP 4/5 LITHOLOGY LEGEND USCS Poorly-graded Sand (SP) RS". Peat Fill (made ground) DRILLING COMPANY: Earth Exploration LOGGED BY: DSD Golder DRILLER: Zach CHECKED BY: JMR ssociates DATE: 3/22/17 DRILL RIG: Geoprobe 7720DT

	BOREHOLE LOG: GAMW-07 PAGE 2 of 2												
PROJEC	T: NIPSCO Bailly T NO.: 164-8171 EPTH: 29 FO BEDROCK:		COO GRO TOP	RDIN UND : OF C	ATES: SURF# ASING	CE ELE	813.592 E: 2943926.623 V.: 625.99	CORING M DRILL RIG: START DA	METHOD: Direct Pus ETHOD: Geoprobe 7720DT TE/TIME: 6/7/2016 /TIME: 6/7/2016	sh			
						SAM	PLE INFORMATION						
Depth Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{Or} Run No.	Type	PID (ppm)	Soil Rec./Att. Or Core Rec. %	Soil Sample Descripti Or Discontinuity Data (Depth, Dip. Angle From Core Axis, Surface Description)		Well Graphic	Well Construction Information			
600.0	grey to light brown fine to medium SAND		7	DP		4 / 5	24-29': SAND, fine to mediun poorly-graded; light brown; non-cohesive, wet, compac						
595.0 - - -													
580.0 - - - - LITH													
	LITHOLOGY LEGEND VISCS Poorly-graded Sand (SP) Peat												
DRILLIN	G COMPANY: Earth Exploration 8: Zach G: Geoprobe 7720DT				CH	GGED E IECKED ATE: 3/2	BY: JMR		(	<b>B</b> Golder Associates			



PROJECT: NIPSCO Bailly PROJECT NO.: 164-8171 HOLE DEPTH: 40 DEPTH TO BEDROCK:

# BOREHOLE LOG: GAMW-08B

BOREHOLE LOCATION: N/A COORDINATES: N: 2327355.257 E: 2943762.735 GROUND SURFACE ELEV.: 620.80 TOP OF CASING ELEV.: 623.73 DATUM: Indiana West Zone NAD 83 DRILLING METHOD: ROTOSONIC CORING METHOD: DRILL RIG: Track Mounted Diedrich D-50 START DATE/TIME: 9/9/2019 12:30:00 PM END DATE/TIME: 9/9/2019 9:10:00 AM

PAGE 1 of 2

						SAM	PLE INFORMATION		
Uepth Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{Or} Run No.	Type	PID (ppm)	Soil Rec./Att. or Core Rec. %	Soil Sample Description Or Discontinuity Data (Depth, Dip, Angle From Core Axis, Type, and Surface Description)	Well Graphic	Well Construction Information
	brown to tan fine SAND			RS			0 to 0.25': SAND, some organics, fine, poorly-graded; brown; moist, loose.		Bentonite grout mix
620.0 _				RS			(SP)		0-26 ft-bgs
							0.25' to 1.7': SAND, fine, poorly-graded; brown; dry, loose. (SP) 1.7' to 3.3': SAND, some rounded		
_				RS			<ol> <li>f to 3.3": SAND, some rounded gravel &lt; 1 inch, fine, poorly-graded; light brown; dry, loose. (SP)</li> </ol>		
				RS			3.3' to 3.6': SAND, fine, poorly graded;		
-							brown; dry, loose. (SP) 3.6' to 6.7': SAND, fine, poorly graded;		
				<b>D</b> 0			tan; dry, loose. (SP)		
615.0				RS					
015.0 _									
_				RS			6.7' to 7.7': SAND, trace rounded		
				RS			gravel <1 cm, fine, poorly graded; brown and tan; dry, loose. (SP)		
-	dark brown to tan fine to medium SAND, trace gravel						7.7' to 8': SAND, trace rounded gravel <1 cm, fine to medium, well graded;		
-							dark brown; wet, loose. (SW)		
				RS			10' to 10.8': SAND, trace gravel rounded <1 cm, fine to medium, well		
610.0 _				RS	-		graded; light brown; wet, loose. (SW) 10.8' to 11': SAND, fine to medium, well		
	light brown to tan fine to medium SAND						graded; dark brown; wet, loose. (SW) 11' to 15.3': SAND, fine to medium,		
_							well-graded; light brown to tan. (SW)		
-				RS					
_									
605.0 _									
_									
_									
-									
							20' to 21.25': SAND, fine to medium,		
600.0				RS			poorly-graded; tan. (SP)		
000.0 _							21.25' to 26.3': SAND. trace fines, fine		
_							to medium, poorly-graded; yellow-ish brown. (SP)		
_				RS					
-									
LITH	HOLOGY LEGEND USCS Poorly-gra (SP)	aded Sand			USCS (SW)	Well-grade	d Sand USCS Poorly-graded Sand with Clay (SP-SC)	prostagoog Előlöfligili	
ORILLIN	G COMPANY: LAYNE				LC	)GGED E	IY: DFS		
	R: C. Stoizenbach						BY: AMH		<b>B</b> Associates
RILL R	IG: Track Mounted Diedrich D-50				D4	ATE: 9/20	0/40		

	BOREHOLE LOG: GAMW-08B PAGE 2 of 2												
PROJEC	ST: NIPSCO Bailly ST NO.: 164-8171 EPTH: 40 TO BEDROCK:		COOI GRO TOP	RDIN/ UND \$ OF C/	ATES: SURF/ ASING	ACE ELE G ELEV.: (	355.257         E: 2943762.735         CORING           V.: 620.80         DRILL RIG           623.73         START D	METHOD: ROTOSC METHOD: G: Track Mounted Die ATE/TIME: 9/9/2019 ⁻⁷ E/TIME: 9/9/2019 9:1	drich D-50 12:30:00 PM				
						SAM	PLE INFORMATION						
Depth Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{or} Run No.	Type	PID (ppm)	Soil Rec./Att. or Core Rec. %	Soil Sample Description Or Discontinuity Data (Depth, Dip, Angle From Core Axis, Type, and Surface Description)	Well Graphic	Well Construction Information				
595.0 _	light brown to tan fine to medium SAND			RS					Bentonite chips 26-28 ft-bgs				
-									Filter Pack #5 Sand 28-40 ft-bgs				
 590.0				RS			30' to 33' SAND, fine to medium, well-graded; tan; wet, loose. (SW)		2 PVC Screen slot 0.010 30-40 ft-bgs				
-	brown fine SAND and CLAY brown fine to coarse SAND			RS RS			33' to 33.6': SAND, fine to medium, well-graded; tan to brown; wet, cohesive. (SW) 33.6' to 34': SAND and CLAY, fine, poorly graded; brown; wet, cohesive. (SP)						
585.0 _				RS			34' to 36.8': SAND, fine to coarse, well graded; brown; wet, loose. (SW)						
				RS			40': SAND, fine to coarse, well graded; brown; wet, loose. (SW)						
LITH	OLOGY LEGEND USCS Poorly-gra (SP)	aded Sand			USCS (SW)	i Well-grade	d Sand USCS Poorly-graded Sand with Clay (SP-SC)		_				
DRILLEF	RILLING COMPANY: LAYNELOGGED BY: DFSRILLER: C. StoizenbachCHECKED BY: AMHRILL RIG: Track Mounted Diedrich D-50DATE: 9/20/19												

PROJECT: NIPSCO Bailly PROJECT NO.: 164-8171 HOLE DEPTH: 31 DEPTH TO BEDROCK:

# **BOREHOLE LOG: GAMW-10**

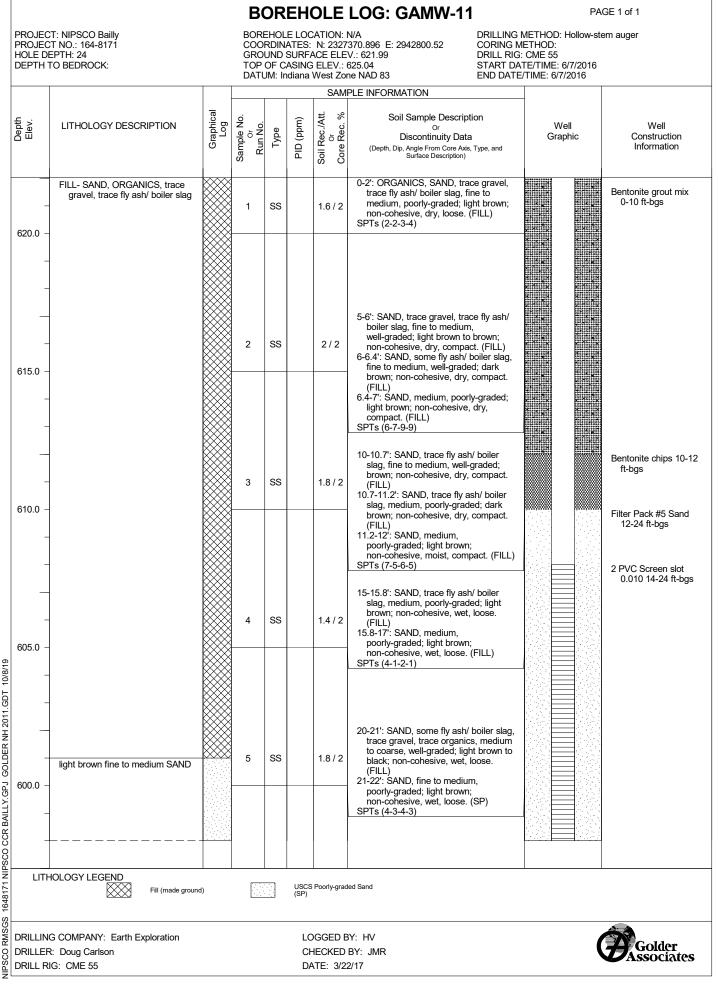
BOREHOLE LOCATION: N/A COORDINATES: N: 2327809.736 E: 2943347.679 GROUND SURFACE ELEV.: 629.34 TOP OF CASING ELEV.: 631.94 DATUM: Indiana West Zone NAD 83

DRILLING METHOD: Direct Push CORING METHOD: DRILL RIG: Geoprobe 7720DT START DATE/TIME: 6/7/2016 END DATE/TIME: 6/8/2016

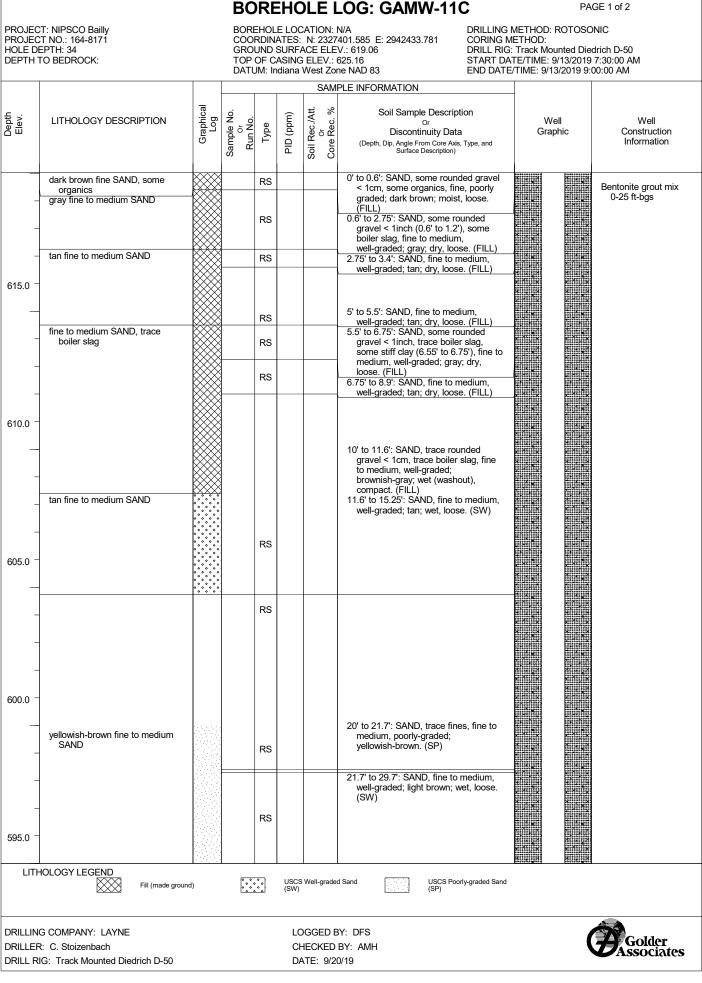
PAGE 1 of 2

Lepin Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{Or} Run No.	Type	PID (ppm)	Soil Rec./Att. or Core Rec. %	Soil Sample Description Or Discontinuity Data (Depth, Dip, Angle From Core Axis, Type, and Surface Description)	Well Graphic	Well Construction Information
-	FILL- SAND, some gravel, some boiler slag light tan to orange fine to medium SAND		1	DP		3/4	<ul> <li>0-1.75': SAND, some gravel, some boiler slag, fine to medium, well-graded; brown; non-cohesive, dry, loose. (FILL)</li> <li>1.75-2.1': SAND, boiler slag, fine, poorly-graded; black; non-cohesive, dry, loose. (FILL)</li> <li>2.1-2.3': SAND, fine to medium,</li> </ul>		Bentonite grout mix 0-17 ft-bgs
625.0 			2	DP		2.75/4	<ul> <li>poorly-graded; orange, black</li> <li>banding; non-cohesive, moist, compact. (SP)</li> <li>2.3-3.2': SAND, fine to medium, poorly-graded; orange; non-cohesive, moist, compact. (SP)</li> <li>3.4-4': SAND, fine to medium, poorly-graded; black; non-cohesive, moist, compact. (SP)</li> <li>4-6.8': SAND, fine to medium, poorly-graded; orange; non-cohesive, moist, compact. (SP)</li> <li>6.8-8': SAND, fine to medium, poorly-graded; orange to tan;</li> </ul>		
- 620.0 			3	DP		2.7 / 4	<ul> <li>poorly-graded; orange to tan; non-cohesive, moist, compact. (SP)</li> <li>8-12': SAND, fine to medium, poorly-graded; orange to tan; non-cohesive, moist, compact. (SP)</li> </ul>		
- - 615.0 			4	DP		2.6 / 4	12-16': SAND, fine to medium, poorly-graded; light tan; non-cohesive, moist, compact. (SP)		
- - 610.0			5	DP		2.5 / 4	16-20': SAND, fine to medium, poorly-graded; light tan; non-cohesive, moist, compact. (SP)		Bentonite chips 17-1 ft-bgs Filter Pack #5 Sand 19-31 ft-bgs
-			6	DP		3/4	<ul> <li>20-22': SAND, fine to medium, poorly-graded; tan; non-cohesive, wet, compact. (SP)</li> <li>22-24': SAND, fine to medium, poorly-graded; light orange to tan; non-cohesive, wet, loose. (SP)</li> </ul>		2 PVC Screen slot 0.010 21-31 ft-bgs
605.0 LITH	HOLOGY LEGEND	d)	7	DP	USCS (SP)	4 / 4	ed Sand		

			B	OR	EH	OLE	LOG: GAMW-10	PAG	E 2 of 2
PROJEC	ST: NIPSCO Bailly ST NO.: 164-8171 EPTH: 31 TO BEDROCK:		COO GRO TOP	RDIN UND : OF C	ATES: SURF/ ASING	ACE ELE	809.736         E: 2943347.679         CORING I           V.: 629.34         DRILL RIC           531.94         START D/	METHOD: Direct Push METHOD: G: Geoprobe 7720DT ATE/TIME: 6/7/2016 E/TIME: 6/8/2016	1
						SAM	PLE INFORMATION	_	
Depth Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{Or} Run No.	Type	PID (ppm)	Soil Rec./Att. or Core Rec. %	Soil Sample Description or Discontinuity Data (Depth, Dip, Angle From Core Axis, Type, and Surface Description)	Well Graphic	Well Construction Information
	light tan to orange fine to medium SAND		7	DP		4/4	24-28': SAND, fine to medium, poorly-graded; light orange; non-cohesive, wet, compact. (SP)		
600.0			8	DP		3/3	28-31': SAND, fine to medium, poorly-graded; tan, orange mottling; non-cohesive, saturated, dense. (SP)		
- - 595.0 									
585.0 	HOLOGY LEGEND	) I)			USCS (SP)	Poorly-grad	ed Sand		
DRILLIN DRILLEF DRILL R	G COMPANY: Earth Exploration R: Zach IG: Geoprobe 7720DT				CH	OGGED E HECKED ATE: 3/22	BY: JMR	C	Golder



GOLDER NH 2011.GDT BAILLY.GPJ 1648171 NIPSCO CCR RMSGS



10/8/19

GOLDER NH 2011.GDT

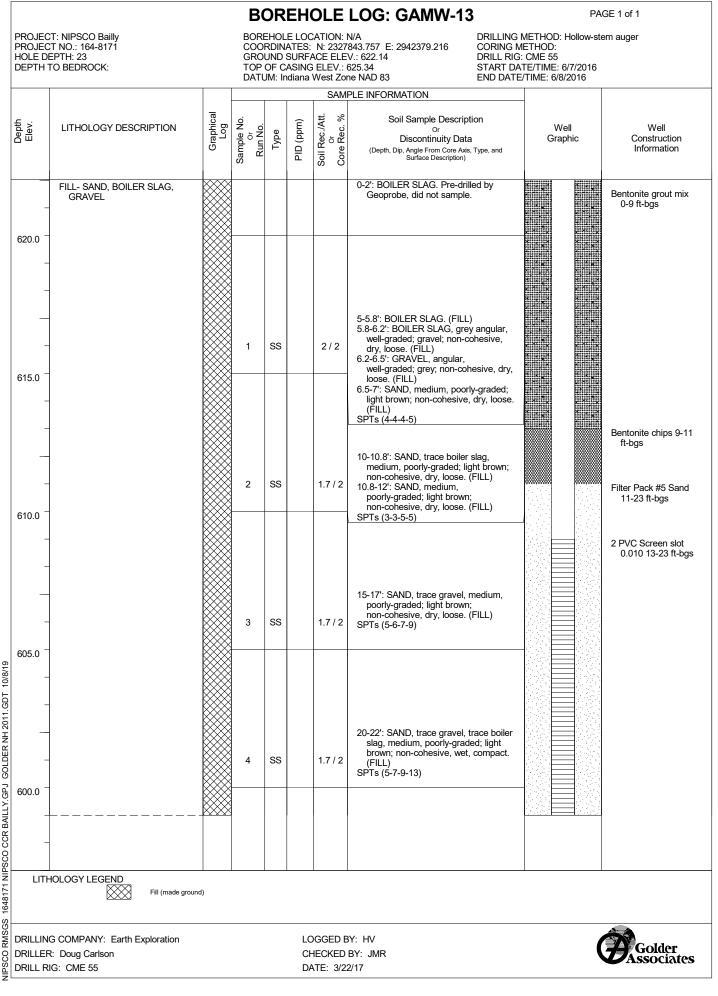
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1648171 NIPSCO CCR

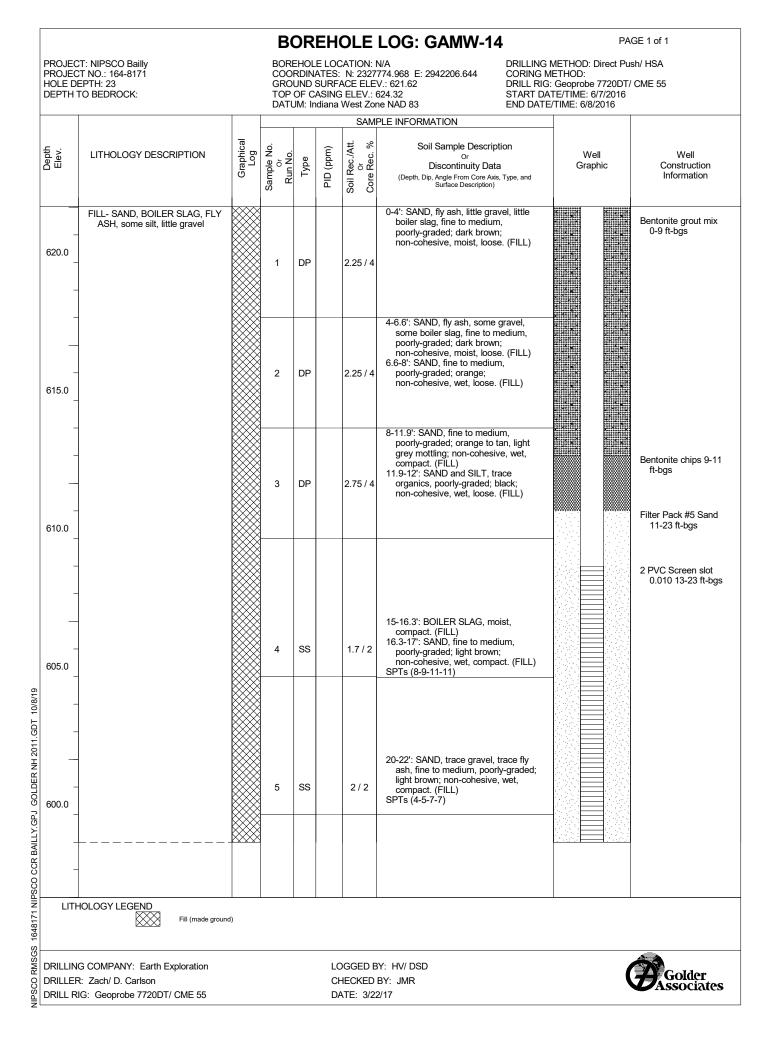
RMSGS

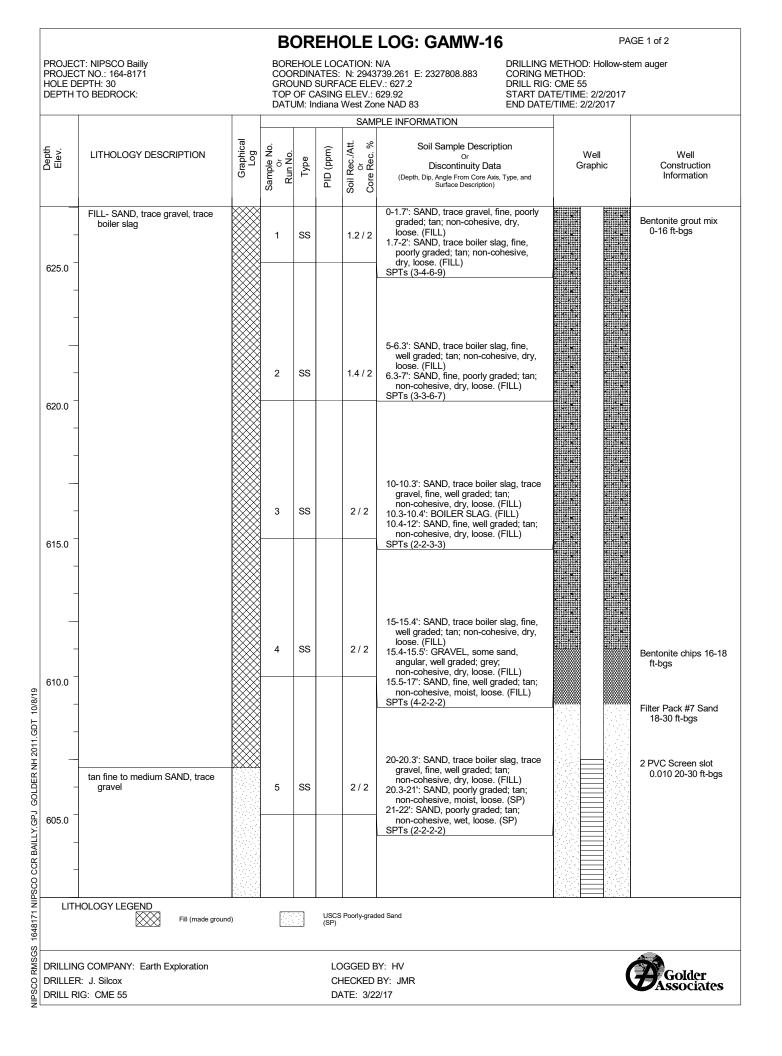
VIPSCO

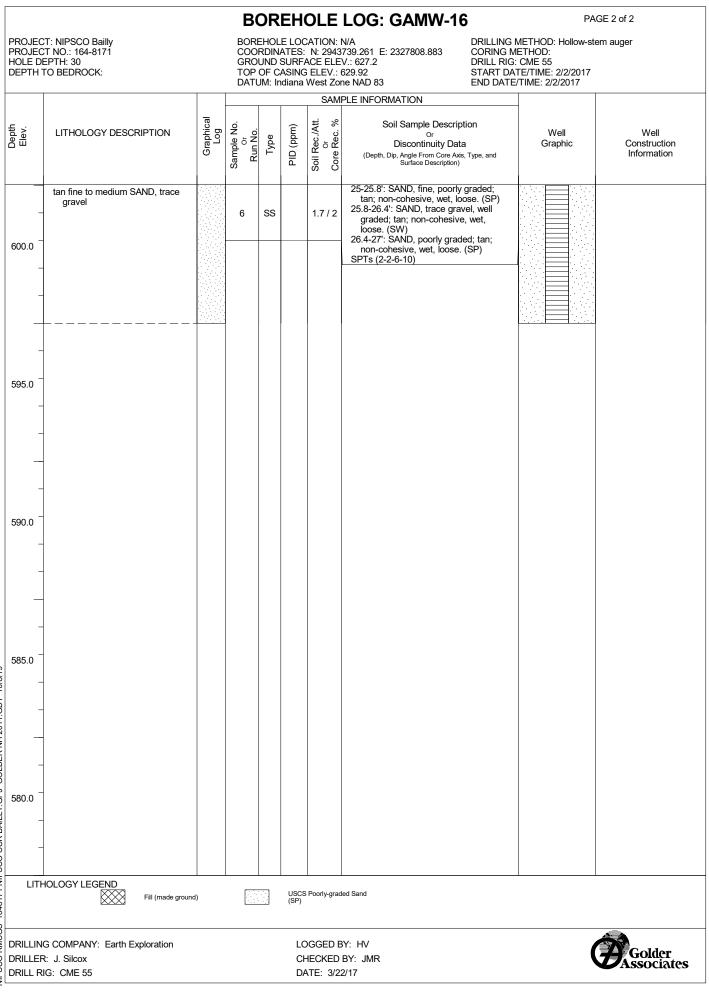
			BO	RE	EHC	DLE L	.OG: GAMW-11C	PA	GE 2 of 2
PROJEC	XT: NIPSCO Bailly XT NO.: 164-8171 EPTH: 34 TO BEDROCK:		COOF GROU TOP (	RDIN/ UND \$ OF C/	ATES: SURF# ASING	ACE ELE	401.585 E: 2942433.781 CORING M V.: 619.06 DRILL RIG: 525.16 START DA	METHOD: ROTOSO ETHOD: Track Mounted Die TE/TIME: 9/13/2019 /TIME: 9/13/2019 9:0	drich D-50 7:30:00 AM
Depth Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{Or} Run No.	Type	PID (ppm)	Soil Rec./Att. or Core Rec. %	PLE INFORMATION Soil Sample Description Or Discontinuity Data (Depth, Dip, Angle From Core Axis, Type, and Surface Description)	Well Graphic	Well Construction Information
	yellowish-brown fine to medium SAND			RS					Bentonite chips 25-27 ft-bgs Filter Pack #5 Sand 27-34 ft-bgs 2 PVC Screen slot 0.010 29-34 ft-bgs
				RS			<ul> <li>30' to 32.7': SAND, trace fines, fine to medium, poorly-graded; yellowish-brown. (SP)</li> <li>32.7' to 34': SAND, fine to medium,</li> </ul>		0.010 20-04 (1993
585.0 -				RS			poorly-graded; yellowish-brown to gray. (SP)		
- -									
570.0 - 570.0 - LITH	HOLOGY LEGEND			· • • •	USCS	Well-graded	I Sand [고고고] USCS Poorly-graded Sand		
	Fill (made ground)       USCS Well-graded Sand       USCS Poorly-graded Sand         DRILLING COMPANY: LAYNE       LOGGED BY: DFS         DRILLER: C. Stoizenbach       CHECKED BY: AMH         DRILL RIG: Track Mounted Diedrich D-50       DATE: 9/20/19								



1648171 NIPSCO CCR RMSGS VIPSCO



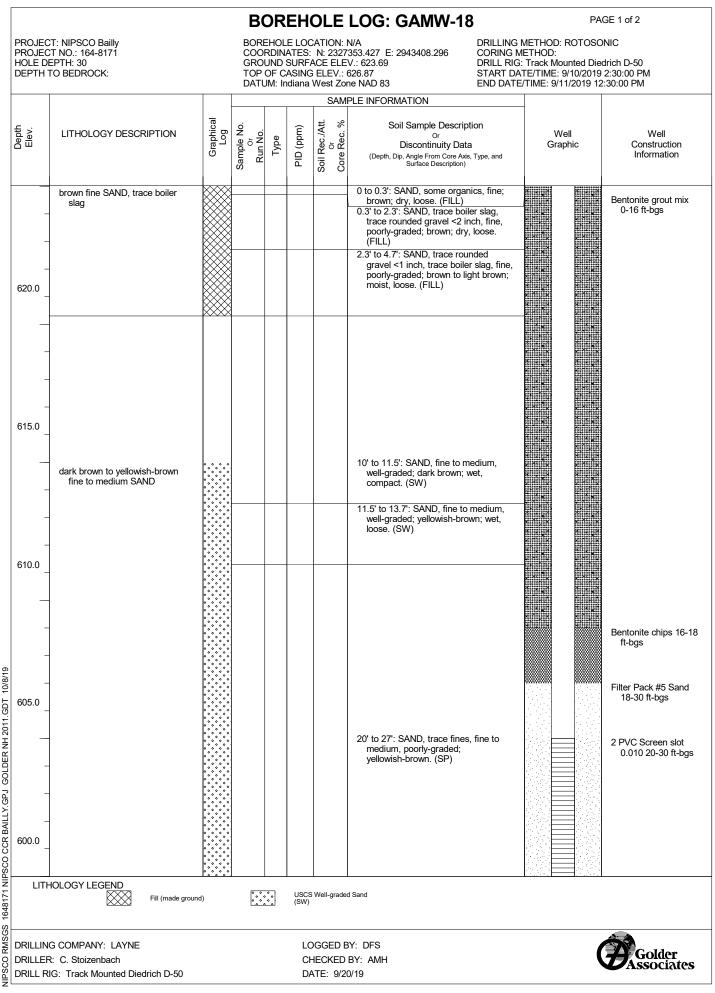




	BOREHOLE LOG: GAMW-17 PAGE 1 of 1									
PROJEC	CT: NIPSCO Bailly CT NO.: 164-8171 EPTH: 25 TO BEDROCK:		COOI GRO TOP	rdin/ Und \$ Of C/	ATES: SURFA ASING	CE ELE ELEV.:	377.935 E: 2943124.864 V.: 620.67	CORING M DRILL RIG: START DA	METHOD: ROTOS ETHOD: Track Mounted Di TE/TIME: 9/12/201 /TIME: 9/14/2019 9	edrich D-50 9 7:45:00 AM
						SAM	PLE INFORMATION		_	
Depth Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{or} Run No.	Type	PID (ppm)	Soil Rec./Att. or Core Rec. %	Soil Sample Descript Or Discontinuity Data (Depth, Dip. Angle From Core Axis, Surface Description)	1	Well Graphic	Well Construction Information
	brown fine SILTY SAND, some			RS			0' to 0.3': SILTY SAND, some fine; brown; moist, loose. (			Bentonite grout mix
620.0 _	organics brown fine SAND, trace boiler slag			RS			0.3' to 3': SAND, trace boiler rounded gravel < 1 cm, fin poorly-graded; brown; dry, (FILL)	slag, trace e, loose.		0-11 ft-bgs
615.0	brown fine to medium SAND, trace boiler slag, trace gravel			RS			3' to 7.5': SAND, trace boiler rounded gravel < 1 inch, fi medium, well-graded; brow loose. (FILL)	ne to		
610.0				RS			10' to 11.7': SAND, trace boil trace rounded gravel < 1 ir medium, well-graded; brow (washout), loose. (FILL)	nch, fine to		Bentonite chips 11-13
-				RS			11.7' to 13': SAND, trace boil fine to medium, well-grade moist, loose. (FILL)			ft-bgs
-	gray to dark gray CLAY			RS			13' to 13.2': CLAY, gray, coh (FILL)	esive, stiff.		Filter Pack #5 Sand 13-25 ft-bgs
				RS			13.2' to 14.3': CLAY, gray, so rounded gravel < 3 inch. (F			
_				RS			14.3' to 15': CLAY, some fine dark gray, cohesive. (FILL)	e sand,		2 PVC Screen slot 0.010 14.5-24.5
605.0 _	light brown to yellowish-brown fine to medium SAND			RS			15' to 16.7': SAND, fine to me well-graded; light brown; m loose. (SW)	edium,		ft-bgs
-							20' to 23.2': SAND, trace fine	es, fine to		
600.0 _				RS			medium, poorly-graded; yellowish-brown. (SP)			
-	pale grayish-brown fine to medium SAND			RS			23.2' to 24': SAND, fine to me poorly-graded; gray. (SP)	edium,		
LITH	HOLOGY LEGEND Fill (made ground	d)			USCS (SP)	Poorly-grac	led Sand			.]
DRILLEF	G COMPANY: LAYNE R: C. Stoizenbach IG: Track Mounted Diedrich D-50				CH		BY: DFS BY: AMH D/19			Golder

	BOREHOLE LOG: GAMW-17B PAGE 1 of 2										
PROJEC	T: NIPSCO Bailly T NO.: 164-8171 EPTH: 34 TO BEDROCK:		COOI GROI TOP	rdin/ Und \$ Of C/	ATES: SURF# ASING	CE ELE ELEV.: (	377.87 E: 2943120.346 V.: 620.74	CORING ME DRILL RIG: START DAT	DRILLING METHOD: ROTOSONIC CORING METHOD: DRILL RIG: Track Mounted Diedrich D-50 START DATE/TIME: 9/12/2019 7:45:00 AM END DATE/TIME: 9/14/2019 9:50:00 AM		
	SAMPLE INFORMATION										
Depth Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{Or} Run No.	Type	PID (ppm)	Soil Rec./Att. Or Core Rec. %	Soil Sample Descriptio Or Discontinuity Data (Depth, Dip, Angle From Core Axis, Surface Description)		Well Graphic	Well Construction Information	
	brown fine SILTY SAND, some			RS			0' to 0.3': SILTY SAND, some	organics,	0.000.000.000 D.000.000.000 D000.000.000 D.000.000000 D000.000.000 D.000.00000 D000.0000000 D000.0000000 D000.0000000 D000.0000000 D000.00000000	Bentonite grout mix	
620.0	organics brown fine SAND, trace boiler slag			RS			fine; brown; moist, loose. (F 0.3' to 3': SAND, trace boiler s rounded gravel < 1 cm, fine poorly-graded; brown; dry, I (FILL)	slag, trace e, loose.		0-26 ft-bgs	
615.0	brown fine to medium SAND, trace boiler slag, trace gravel			RS			3' to 7.5': SAND, trace boiler s rounded gravel < 1 inch, fin medium, well-graded; brown loose. (FILL)	ne to			
-											
610.0 _				RS			10' to 11.7': SAND, trace boile trace rounded gravel < 1 in medium, well-graded; brow (washout), loose. (FILL) 11.7' to 13': SAND, trace boile fine to medium, well-graded moist, loose. (FILL)	ch, fine to n; wet er slag,			
-	gray to dark gray CLAY			RS			13' to 13.2': CLAY, gray, cohe	esive, stiff.			
_				RS RS			(FILL) 13.2' to 14.3': CLAY, gray, so rounded gravel < 3 inch. (F 14.3' to 15': CLAY, some fine	ILL)			
605.0	light brown to yellowish-brown fine to medium SAND			RS			dark gray, cohesive. (FILL) 15' to 16.7': SAND, fine to me well-graded; light brown; mo loose. (SW)	dium,			
  600.0				RS			20' to 23.2': SAND, trace fines medium, poorly-graded; yellowish-brown. (SP)	s, fine to			
-	pale grayish-brown fine to medium SAND						23.2' to 26': SAND, fine to me poorly-graded; gray. (SP)	dium,			
				RS							
	IOLOGY LEGEND Fill (made ground	() 			(SP)	Poorly-grad	(CL)	Plasticity Clay	enagai khaiga		
DRILLER	G COMPANY: LAYNE R: C. Stoizenbach G: Track Mounted Diedrich D-50				CH	GGED B IECKED TE: 9/20	BY: AMH			Golder	

	BOREHOLE LOG: GAMW-17B PAGE 2 of 2									
PROJEC	T: NIPSCO Bailly T NO.: 164-8171 EPTH: 34 "O BEDROCK:		COORE GROUN TOP OF	DINATES ND SURF = CASIN	FACE ELE G ELEV.:	'377.87         E: 2943120.346         CORING           V.: 620.74         DRILL R         DRILL R           624.12         START         Image: Control of the start of the st	G METHOD: ROTOSC 6 METHOD: IG: Track Mounted Die DATE/TIME: 9/12/2019 TE/TIME: 9/14/2019 9:	drich D-50 7:45:00 AM		
				1	SAM	PLE INFORMATION				
Depth Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{Or} Run No.	PID (ppm)	Soil Rec./Att. or Core Rec. %	Soil Sample Description Or Discontinuity Data (Depth, Dip, Angle From Core Axis, Type, and Surface Description)	Well Graphic	Well Construction Information		
595.0	pale grayish-brown fine to medium SAND		F	RS						
						30' to 33.7': SAND, trace fines, fine to		Bentonite chips 26-27.5 ft-bgs Filter Pack #5 Sand 27.5-33.5 ft-bgs 2 PVC Screen slot 0.010 28.5-33.5 ft-bgs		
590.0	gray CLAY			85		coarse, poorly-graded; pale grayish-brown. (SP) 33.7' to 34': CLAY, gray, w ~ PL, hard. (CL)				
580.0										
- 575.0 _ -										
LITH	IOLOGY LEGEND Fill (made ground	))		] USC ] (SP)	S Poorly-grad	ied Sand USCS Low Plasticity Cla (CL)	/	_		
DRILLER	G COMPANY: LAYNE t: C. Stoizenbach G: Track Mounted Diedrich D-50			C	ogged i Hecked Ate: 9/2	BY: AMH		Golder		



BAILLY.GPJ 1648171 NIPSCO CCR RMSGS VIPSCO

	BOREHOLE LOG: GAMW-18 PAGE 2 of 2										
PI H	ROJEC	T: NIPSCO Bailly T NO.: 164-8171 EPTH: 30 FO BEDROCK:		COOI GRO TOP	rdin. Und : Of C.	ATES: SURF/ ASING	ACE ELE B ELEV.: (	353.427 E: 2943408.296 V.: 623.69	CORING ME DRILL RIG: START DAT	METHOD: ROTOSC ETHOD: Track Mounted Die TE/TIME: 9/10/2019 TIME: 9/11/2019 12	edrich D-50 9 2:30:00 PM
							SAM	PLE INFORMATION			
Depth	Elev.	LITHOLOGY DESCRIPTION	Graphical Log	Sample No. ^{Or} Run No.	Type	PID (ppm)	Soil Rec./Att. or Core Rec. %	Soil Sample Descript Or Discontinuity Data (Depth, Dip, Angle From Core Axis, Surface Description)	l	Well Graphic	Well Construction Information
		dark brown to yellowish-brown fine to medium SAND									
5	- 95.0 _ 							30': SAND, fine to medium, poorly-graded; yellowish-br	rown. (SP)		
5	;90.0 										
5	- 585.0 _ 										
11.GDT 10/8/19 c1	- - 580.0 _										
NIPSCO RMSGS 1648171 NIPSCO CCR BAILLY.GPJ GOLDER NH 2011.GDT 10/8/19	-										
I NIPSCO CCR E	575.0 _ 	HOLOGY LEGEND									
S 1648171		Fill (made groun	d)		<u>.</u>	USCS (SW)	Well-grade	d Sand			
	RILLER	G COMPANY: LAYNE R: C. Stoizenbach G: Track Mounted Diedrich D-50				Cł	)gged e Hecked Ate: 9/20	BY: AMH			Golder

	ing No			105			ng: 2327402.24				
	t Name: NI				Project Number: 377880004		g: 2942433.55		m		5
					rth and Environmental		Elevation: 622.65	a	$\mathbf{n}$	20	
	g Contractor		-	-			eight AGL: 3.48	-			
	g Method: H			Auger	Well Type: Monitoring Well		ble Depth: 18				
	Boring Starte				Date Boring Completed: 6/22/05	Ground	d Surface Elevation: 61	9.17	Pag	ge 1 o	of 1
AC	neck by: NV	VE/JIVIC	ر ر		Notes:						
epth feet)	Lithology	Legend	uscs		Description		Well Construction		PID (ppm)	Blow Count	Elevati (feet AMSL
	SAND FILL SAND		SP PT SP	SANE subro	<ul> <li>PILL, fine grained, subangular to subro, medium dense, sand with little gravel, d</li> <li>p. 2.5YR 7/8 light red, fine grained, subar unded, moist to very moist.</li> <li>p. 2.5YR 7/8 light red, fine grained, subar unded.</li> </ul>	ry. ngular to e wood,		ASING DNITE SEAL	0.5 0.8 0.7 0.6 1.1 0.8 0.9 0.9 1.5	10 13 24 41 33 35 10 2	
											F
18–									1.1	6	F
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PID_N NIPSCO.GPJ AMEC MNPLS.GDT 8/5/05

	ring No			112		1	ig: 23278							
	ct Name: NI				Project Number: 377880004	Easting: 2942980.97 Riser Elevation: 628.59 TOR Height AGL: 3.66								
					rth and Environmental		m	20	-					
	g Contracto				Moll Type: Maritaria - M-II									
	g Method: H			Auger	Well Type: Monitoring Well		ole Depth:				-f ^			
	Boring Starte heck by: NV				Date Boring Completed: 6/29/05 Notes:	Ground	Surface	Elevation: 624.93	Pag	je 1 (	012			
	HECK Dy. INV		C		Notes.									
Depth (feet)	Lithology	Legend	USCS		Description			Well Construction	PID (ppm)	Blow Count	Elevatio (feet AMSL			
(IEEL)	TOPSOIL	. <u> </u>		TOPS	SOIL.		₽ 4			oount	AMSL			
-		$\frac{I_{f}}{I_{f}} = \frac{\sqrt{1}I_{f}}{2}$									-			
-	SAND	<u>, 16, 11</u>	SP	SAND	), dark brown, fine grained, wet at 22 fee	et, logged			Ħ		-624			
-				soil fro	om cuttings due to overhead utilities.						-			
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# Appendix C



# **Storm**water Runoff Analysis

Surface Impoundments Closure

Bailly Generating Station

#### Prepared for:

Northern Indiana Public Service Company Merrillville, Indiana

#### Prepared by:

Wood Environment & Infrastructure Solutions, Inc. 11003 Bluegrass Parkway Suite 690 Louisville, Kentucky 40299

October 01, 2020



### **Bailly Generating Station Stormwater Runoff Analysis**

#### 1. Background

The Bailly Generating Station (BGS) owned by the Northern Indiana Public Service Company (NIPSCO) is located on the southern shore of Lake Michigan on approximately 350 acres near Chesterton, Indiana. The street address is 246 Bailly Station Road, Chesterton, IN 46304.

The BGS generated electricity using coal-fired boilers from 1962 until 2018. The coal-fired electricity generating process produced coal combustion residuals (CCR) in the form of boiler slag and fly ash. The CCR materials were sluiced to surface impoundments located on-site. The BGS has six surface impoundments located on-site that were used to manage CCR and non-CCR discharges (**Table 1**). The Secondary Settling Pond No. 2 (SSP #2) was used to manage air-heater wash flow as well as other non-CCR discharges and was not determined to be a CCR impoundment. The Forebay is a holding (wet well) facility for the pump station and not determined to be a CCR impoundment. Secondary Settling Pond No. 2 and the Forebay are not subject to closure under the Federal CCR Rule or State of Indiana regulations. The remaining four CCR surface impoundments identified in **Table 1** are scheduled for closure in response to regulations enacted by the U.S. EPA and the Indiana Department of Environmental Management (IDEM).

#### Table 1: Bailly Generating Station Surface Impoundments

BGS Surface Im	poundments
CCR Surface Impoundments	Non-CCR Impoundments
Boiler Slag Pond	Secondary Settling Pond No. 2
Primary Settling Pond No. 1	Forebay
Primary Settling Pond No. 2	
Secondary Settling Pond No. 1	

The surface impoundments are primarily incised and constructed below ground surface, with interior side slopes to the pond bottoms. They were constructed with a bottom liner system, consisting of (in descending order): blast furnace slag, a synthetic membrane liner placed in between sand layers, and a compacted clay liner. A piping system was constructed to convey boiler slag and fly ash from the plant to the impoundments by sluicing CCR material mixed with water. Specifically, boiler slag was sluiced from the plant to the Boiler Slag Pond (BSP), allowed to settle, and decant water was conveyed via gravity flow to either Primary Settling Pond No. 1 (PSP #1) or 2 (PSP #2). Fly ash was sluiced from the plant to PSP #1 or PSP #2. Decant water from the primary settling ponds was subsequently conveyed via gravity flow to Secondary Settling Pond No. 1 (SSP #1) and into the Forebay for discharge via pumping to the permitted discharge point on Lake Michigan or returned to the station as makeup water for operations. BGS operations transitioned fly ash management to a dry handling system in 1981, further limiting use of the impoundments for CCR storage.

This report reviews the planned stormwater drainage design for the closed CCR impoundments. Locations of the impoundments can be found on the Drawings Sheet **BGS-03** *Overall Site Plan*.

#### 2. Closure Method

Removing the surface impoundment contents (CCR) is the proposed closure method. CCR material will be excavated and transported to the NIPSCO R.M. Schahfer Generating Station (RMSGS) onsite CCR-compliant





landfill for disposal, or possibly sold for beneficial use. Grading and placing soil/topsoil material to a minimum depth of 2 feet (18 inches of soil material and 6 inches of topsoil) will create a soil cover and promote storm water runoff. The cover will be vegetated with grass to limit soil erosion of the cover. Positive drainage will be provided to limit ponding on the soil cover. The existing piping system and Forebay pumping station will be used to provide post-closure surface drainage. The final grading plan (closure condition) is shown on the Drawing Sheet (**BGS-06** *Proposed Grading Plan*). The final drainage plan is shown in **Attachment 1** Drainage Map.

#### 3. Runoff Calculations

Drainage area boundaries were determined from the most recent topographic data of the site (**BGS-04** *Existing Conditions Plan*) and from the proposed grading plan (**BGS-06** *Proposed Grading Plan*) in the BGS CCR Impoundment Closure Application drawings set. The project area was divided into six (6) primary drainage basins to account for runoff occurring within each surface impoundment as shown in **Attachment 1** Drainage Map.

**Table 2** lists the rainfall totals data used for this study; rainfall totals were referenced from NOAA Atlas 14, tabular precipitation frequency for Station Ogden Dunes, IN (**Attachment 7**). The SCS Type 2 rainfall distribution was used for the 24-hour storm events.

Storm runoff volumes were calculated using the SCS Curve Number method. The runoff curve number used for the closed conditions considered the impoundments to have a vegetated grass cover (fair condition) and a hydrologic soil group C (CN = 79) taken from the Indiana Department of Transportation Drainage Manual (IDOT, 2013). Because of their disturbed nature the soils were assigned a hydrologic soil group C. **Table 3** below shows the drainage area, curve number, and runoff volumes for each of the CCR drainage basins. **Attachment 2** provides the runoff depth and volume calculations for each CCR basin.

The SCS unit hydrograph method was used in determining peak runoff flowrates for each basin. The time of concentration were calculated using the TR-55 velocity method. **Attachment 3** provides a report of the time of concentration and peak runoff calculation for each of the CCR basins using the WinTR-55 application.

Design Storm	Rainfall	Storm
Design Storm	Depth (in)	Distribution
2-year, 24-hour	2.77	SCS Type 2
5-year, 24-hour	3.58	SCS Type 2
10-year, 24-hour	4.24	SCS Type 2
25-year, 24-hour	5.21	SCS Type 2

Table 2: Rainfall Depths from NOAA Atlas 14 Station Ogden Dunes





Basin ID	Drainage Area (ac)	$CN^1$	25-year Runoff Depth ² (ft)	25-year Runoff Volume ² (ac-ft)			
Boiler Slag Pond	3.7	79	2.98	0.92			
Primary Settling Pond No. 1	8.87	79	2.98	2.21			
Primary Settling Pond No. 2	10.91	79	2.98	2.71			
Secondary Settling Pond No. 1	3.28	79	2.98	0.82			
1) Curve Number from INDOT drainage manual for "grass fair condition"							
2) 25-year, 24-hour rainfall depth 5.21-in							

Table 3: Runoff Volume Summary

## 4. Stormwater Drainage Plan

The stormwater drainage plan design focuses on the four (4) CCR impoundments planned to be closed. The existing piping system will be utilized to convey stormwater runoff through the CCR impoundments. The final (closure) grading plan for the CCR impoundments was designed to the elevations of the existing piping infrastructure to allow for gravity flow. The existing pipe system will convey stormwater runoff from the BSP, PSP#1, PSP#2, and SSP#1; a lift station will be placed in SSP #1 to pump the collected stormwater to the Forebay. The design of the pumping lift station connecting SSP #1 to the Forebay will occur in a future design submittal. The SSP#2 was not part of the closure design as it is not a CCR impoundment.

Several segments of the existing piping system have been abandoned or will not be used for stormwater management of the closed impoundments. **Attachment 1** Drainage Map provides the layout of the existing pipe system with identification of the segments of the pipe system to be abandoned or not used. **Table 4** provides information on the existing pipe system that will be utilized. As part of the closure activities Wood recommends inspection of the existing pipe network to verify the condition and determination of the invert elevations. The outlet of the stormwater pipe system is the SSP #1. Stormwater will be temporarily stored within the closed impoundments; until it is pumped from the SSP #1 to the Forebay where it will ultimately be pumped to the permitted discharge on Lake Michigan.

Surface Impoundment Closure Pipe Network Information						
Dine Cehedule ID ¹	from	to	Inlet elev ²	Outlet	Diameter	
Pipe Schedule ID ¹	monn	to	(ft)	elev ² (ft)	(in)	
5	BSP	VP #5	616.85	616.68	24	
18	VP #5	PSP #1	616.68	616.18	24	
10	PSP #1	MH #3	611.93	611.81	36	
11	MH #3	MH #4	611.81	611.23	36	
12	MH #4	VP #1-2	611.23	610.85	36	
13	PSP #2	VP #1-2	611.18	610.85	30	
14	VP #1-2	SSP #1	610.85	610.27	36	
1) Referenced from Sarg	gent & Lund	y Drawings	B-565, B-56	6		
2) Elevations in NAVD88						
Note) BSP = Boiler Slag Pond; PSP #1 = Primary Settling Pond #1; PSP #2 =						
Primary Settling Pond #2; SSP #1 = Secondary Settling Pond #1; VP = Valve Pit;						
MH = Manhole						

Table 4: Piping System Information





The 25-year storm was used as the design basis for surface runoff within the closed CCR impoundments. The closed impoundments will have available storage to contain the entire 25-year runoff volume (shown in **Table 3**). **Table 5** provides the storage available within each basin per the final grading plan and shows the maximum pool depth during the 25-year storm. The results in the **Table 5** indicates the runoff will be contained in a shallow pool (equalize) within the closed impoundments until being pumped out from SSP #1 to the Forebay. **Attachment 4** provides the stormwater model calculations of the pipe system from the stormwater management model (SWMM 5.0). Note, the Attachment 4 calculations assume the pipes listed in **Table 4** are in working condition and the Sargent and Lundy design drawings B-566 accurately represent existing conditions. As noted above, Wood recommends inspection of the existing pipe network to verify the condition and determination of the invert elevations, if modifications are needed to rehab any of the pipes, new calculation can be performed and provided to IDEM.

The surface cover of the closed impoundments will be vegetated with grass and will serve as an open channel during storm events, conveying runoff across the length of the impoundment. The peak flow rates within the closed impoundments are shown **Attachment 4**. The slope across the impoundments in the direction of flow was set to 0.5 %. **Figure 1** provides a cross section sketch of the PSP #1 and #2 in the direction of flow. **Figure 2** provides a cross section sketch of the BSP and SSP #1 in the direction of flow. **Attachment 5** provides the channel hydraulics calculations over the impoundment covers. The calculated velocities on the cover will be less than 1 feet per second and grass was determined to be acceptable cover within the runoff flow paths.

Culvert outlet protection at Pipe 18 into PSP #1 and Pipe 14 into SSP #1 will consist of riprap apron of INDOT Uniform A riprap. The riprap gradation information for Uniform A riprap can be found in **Attachment 6** and based on this gradation information the Uniform A riprap was estimated to have a median diameter between 3 and 6 inches. The peak flow through Pipe 18 into PSP #1 was 10 cfs which is the peak flow into the BSP, this is conservative as runoff will be attenuated as it moves through the BSP. The peak flow of 22 cfs through Pipe 14 into SSP #2 was determined by the stormwater model (**Attachment 4**). For both Pipe 18 and Pipe 14 this peak flow in the pipe is subcritical and the outlet flow calculations (**Attachment 5**) show Uniform A riprap apron to be stable. The riprap apron will dissipate the energy at the pipe outlets before going onto the soil cover.

Surface Impoundment Closure Information						
Surface impoundmentImpoundmentImpoundment sizeVolume1Ntype(acres)(ac-ft)(ac-ft)						
Boiler Slag Pond	Partially incised	1.2	2.6	0.5		
Primary Settling Pond No. 1	Incised	5.6	27.5	0.8		
Primary Settling Pond No. 2	Incised	7.2	33.8	1.3		
Secondary Settling Pond No. 1 Incised 2.5 15.8 3.0						
1) App. closed impoundment storage volume below elev 620'						

Table 5: Surface Impoundment Closure Information



# wood.

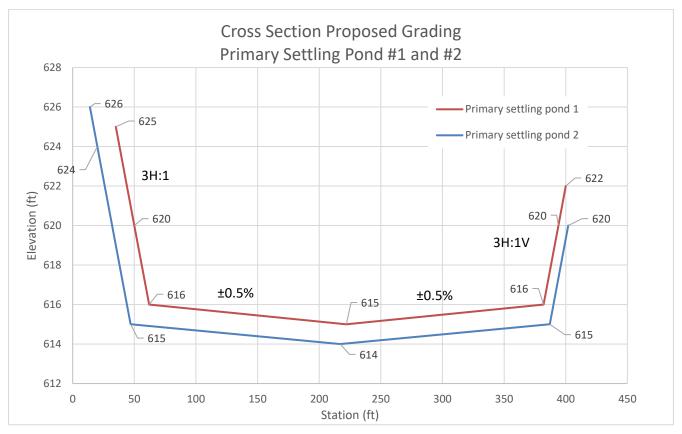


Figure 1: Cross Section sketch PSP#1 and #2



# wood.

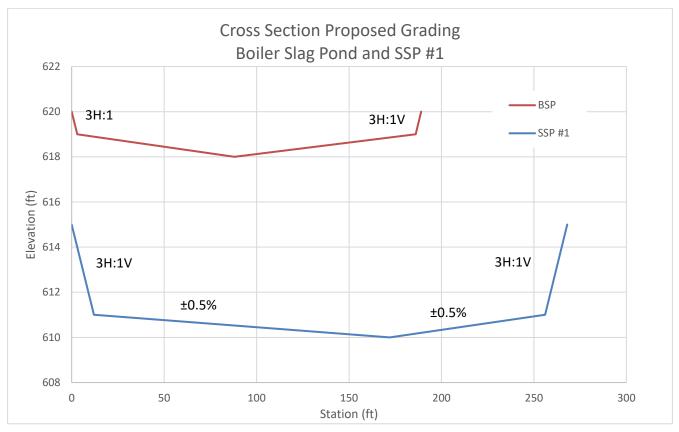


Figure 2: Cross Section sketch BSP and SSP#1

## 5. References

(IDOT, 2013). Indiana Department of Transportation, 2013 Design Manual. Chapter 202 Hydrology

(S&L Engineers). Sargent & Lundy Engineers, Drawings Bailly Generating Station. Drawings # B-565, B-566, B-569

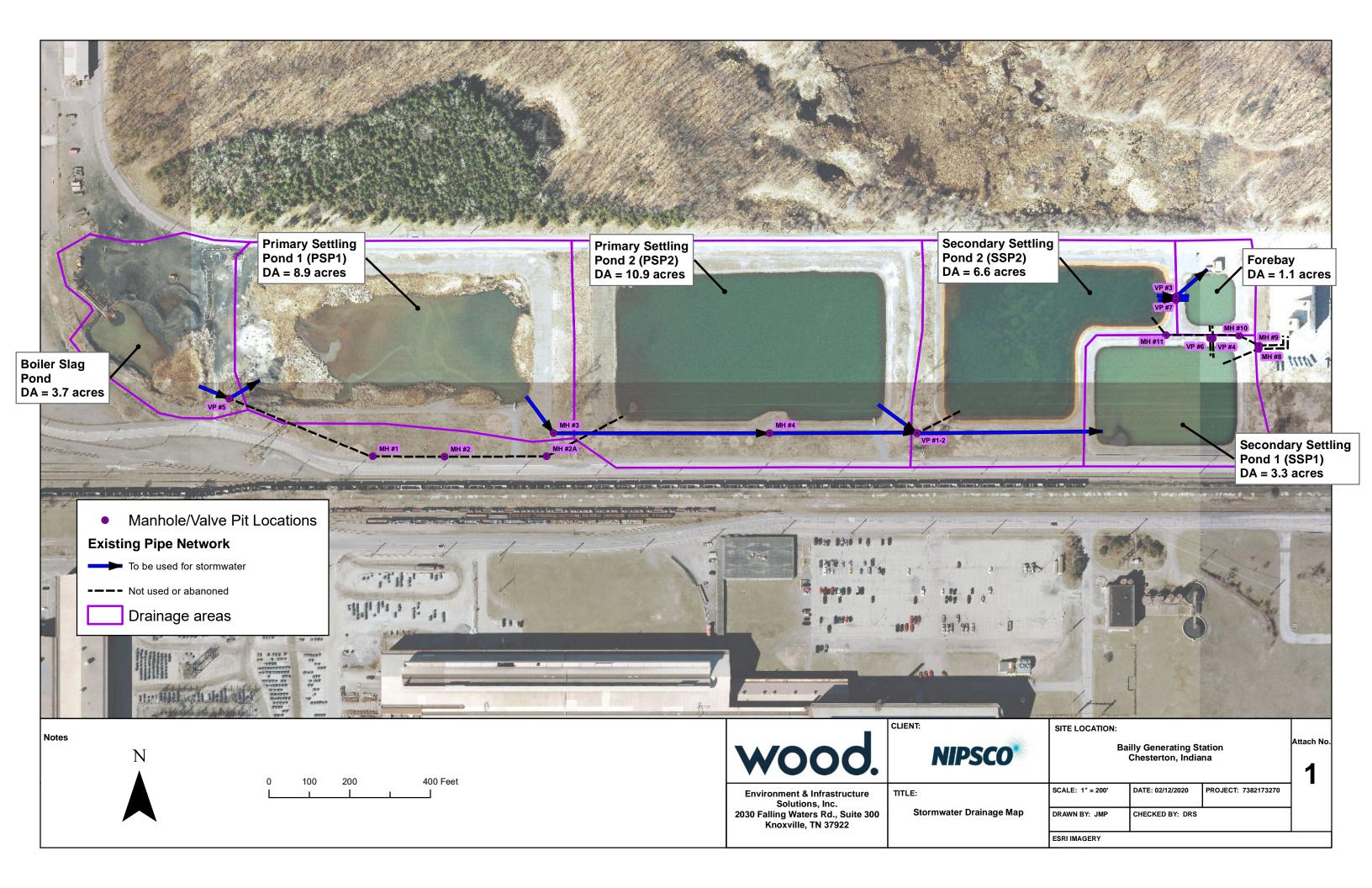




6. Attachments

Attachment 1: Drainage Map







Attachment 2: Direct Runoff Calculation



# **Direct Runoff Calculations**

# Rainfall Depths from NOAA Atlas 14 (Location: Ogden Dunes, Station ID: 12-6542)

Design Storm	Rainfall Depth (in)	Storm	
5	,	Distribution	
2-year, 24-hour	2.77	SCS Type 2	
5-year, 24-hour	3.58	SCS Type 2	
10-year, 24-hour	4.24	SCS Type 2	
25-year, 24-hour	5.21	SCS Type 2	

Curve Number selection for project area Indiana Department of Transportation 2013 Design Manual Chapter 202 Hydrology Figure 202-2F (Runoff Curve Number for Urban Area) Developing Urban Area Grass open space fair condition 79

National Engineering Handbook, Chapter 10

Equation 10-12

Max potential retention, S (in)	
CN = (1000) / (10 + S)	
CN	79
S	2.66

Equation 10-11

Runoff equation		
$Q = (P - 0.2S)^2 / (P + 0.8S)$		
Direct runoff, Q (in)		
Rainfall depth, P (in)		
Initial abstraction, Ia (in)	0.2S	
Direct runoff design s	torms (in)	
Q2 (in)	1.0	)2
Q5 (in)	1.6	53
Q10 (in)	2.1	16
Q25 (in)	2.9	98

Runoff Volume (ac-ft) = Direct runoff (in) * (ft / 12 in) * Drainage area (ac)

Runoff Summary table

Subbasin ID	Drainage Area (ac)	$CN^1$	2-year Runoff volume (ac-ft)	5-year Runoff volume (ac-ft)	10-year Runoff volume (ac-ft)	25-year Runoff volume (ac-ft)		
Boiler Slag Pond	3.7	79	0.32	0.50	0.67	0.92		
Primary Settling Pond #1	8.87	79	0.76	1.20	1.60	2.21		
Primary Settling Pond #2	10.91	79	0.93	1.48	1.96	2.71		
Secondary Settling Pond #1	3.28	79	0.28	0.45	0.59	0.82		
Secondary Settling Pond #2	6.56	79	0.56	0.89	1.18	1.63		
Forebay	1.05	79	0.09	0.14	0.19	0.26		
Note 1) IDOT Drainage Manual 2	Note 1) IDOT Drainage Manual 2013; grass cover fair condition type C soil = CN 79							



Attachment 3: TR-55 Peak Flow and Time Concentration calcs



#### WinTR-55 Current Data Description

#### --- Identification Data ---

User: Joe Date: 9/11/2020 Project: Units: English SubTitle: Areal Units: Acres State: Indiana County: Porter NOAA-B Filename: P:\projects\ENGINEERING\NIPSCO\7382173270_BGS\5 Supporting Materials\Stormwater Calcs_Permit App

#### --- Sub-Area Data ---

Name	Description	Reach	Area(ac)	RCN	Тс
BSP		Outlet	3.7	79	.494
PSP1		Outlet	8.87	79	.582
PSP2		Outlet	10.91	79	.578
SSP1		Outlet	3.28	79	.486

Total area: 26.76 (ac)

#### --- Storm Data --

#### Rainfall Depth by Rainfall Return Period

2-Yr	5-Yr	10-Yr	25-Yr	50-Yr	100-Yr	l-Yr
(in)	(in)	(in)	(in)	(in)	(in)	(in)
2.85	3.67	4.35	5.21	6.18	7.08	2.33

Storm Data Source:User-provided custom storm dataRainfall Distribution Type:Type IIDimensionless Unit Hydrograph:<standard>

#### Storm Data

## Rainfall Depth by Rainfall Return Period

2-Yr	5-Yr	10-Yr	25-Yr	50-Yr	100-Yr	1-Yr
(in)	(in)	(in)	(in)	(in)	(in)	(in)
2.85	3.67	4.35	5.21	6.18	7.08	2.33

User-provided custom storm data
Type II
<standard></standard>

Joe

#### Watershed Peak Table

Sub-Area or Reach Identifier	2-Yr	5-Yr	Rainfall R 10-Yr (cfs)	25-Yr	100-Yr	
SUBAREAS BSP	3.44	5.53	7.40	9.83	15.29	
PSP1	7.38	11.97	15.97	21.32	33.19	
PSP2	9.15	14.77	19.78	26.33	41.06	
SSP1	3.08	4.97	6.63	8.81	13.71	
REACHES						
OUTLET	22.84	36.92	49.40	65.60	102.22	

#### Hydrograph Peak/Peak Time Table

or Reach Identifier	2-Yr (cfs) (hr)	5-Yr (cfs) (hr)	10-Yr (cfs) (hr)	25-Yr (cfs) (hr)	(cfs)	Period
SUBAREAS BSP		5.53 12.18				
PSP1		11.97 12.24				
PSP2	9.15 12.25	14.77 12.22				
SSP1		4.97 12.19				
REACHES						
OUTLET	22.84	36.92	49.40	65.60	102.22	

Joe

#### Sub-Area Summary Table

Sub-Area Identifier	Drainage Area (ac)	Time of Concentration (hr)	Curve Number	Receiving Reach	Sub-Area Description
BSP PSP1 PSP2 SSP1	3.70 8.87 10.91 3.28	0.494 0.582 0.578 0.486	79 79 79 79 79 79	Outlet Outlet Outlet Outlet Outlet	

Total Area: 26.76 (ac)

Joe

#### Sub-Area Time of Concentration Details

Sub-Area Identifier/	Length	Slope (ft/ft)	n	Area (sq ft)	Perim		city Time
BSP SHEET SHALLOW	100 225	0.0050	0.240				0.439 0.055
				Ti	me of	Concentratio	on .494 ======
PSP1 SHEET SHALLOW			0.240 2.85				0.439 0.143
				Ti	me of	Concentratio	on .582 ======
PSP2 SHEET SHALLOW	100 569		0.240 2.85				0.439 0.139
				Ti	me of	Concentratio	on .578 ======
SSP1 SHEET SHALLOW	100 193		0.240 2.85				0.439 0.047
				Ti	me of	Concentratio	on .486

#### Sub-Area Land Use and Curve Number Details

Sub-Area Identifie		Hydrologic Soil Group	Sub-Area Area (ac)	Curve Number
BSP	Open space; grass cover 50% to 75% (1	fair) C	3.7	79
	Total Area / Weighted Curve Number		3.7	79 ==
PSP1	Open space; grass cover 50% to 75% (1	fair) C	8.87	79
	Total Area / Weighted Curve Number		8.87	79 ==
PSP2	Open space; grass cover 50% to 75% (1	fair) C	10.91	79
	Total Area / Weighted Curve Number		10.91	79 ==
SSP1	Open space; grass cover 50% to 75% (1	fair) C	3.28	79
	Total Area / Weighted Curve Number		3.28	79 ==



Attachment 4: Stormwater Model calculation



# [TITLE]

[OPTIONS] ;;Options	Value					
;; FLOW_UNITS INFILTRATION FLOW_ROUTING LINK_OFFSETS MIN_SLOPE ALLOW_PONDING SKIP_STEADY_STATE START_DATE START_TIME REPORT_START_DATE REPORT_START_DATE REPORT_START_TIME END_DATE END_TIME SWEEP_START SWEEP_END DRY_DAYS REPORT_STEP WET_STEP DRY_STEP ROUTING_STEP INERTIAL_DAMPING NORMAL_FLOW_LIMITED FORCE_MAIN_EQUATION VARIABLE_STEP LENGTHENING_STEP MIN_SURFAREA MAX_TRIALS HEAD_TOLERANCE SYS_FLOW_TOL LAT_FLOW_TOL MINIMUM_STEP THREADS	CFS CURVE_NUMBER DYNWAVE ELEVATION 0 NO 001/28/2020 00:00:00 01/28/2020 00:00:00 01/31/2020 00:00:00 01/01 12/31 0 00:01:00 00:05:00 1 PARTIAL BOTH H-W 0.75 0 0 8 0.005 5 5 5 0.5 4					
[EVAPORATION] ;;Type Par;;	ameters					
ĆÓNSTANT 0.0 DRY_ONLY NO						
;;	pe Intrvl 	Snow Data Catch Source				
;25-yr, 24-hr storm 25-yr CU	MULATIVE 0:06	1.0 TIMESER	LES SCS_Ty	/pe_II_5.2	lin	
[SUBCATCHMENTS]			Total	Pcnt.		Pcnt.
Curb Snow	ingage 	Outlet	Area	Imperv		Slope
	 -yr	BSP	3.7	0	1343.1	0.5
0 Forebay_runoff 25 0	-yr	Forebay	1.05	0	213.729	0.5
		Page 1				

PSP1_runoff	25-yr	В J200	ailly.inp	8.87	0	2492.756 0.5
0 PSP2_runoff	-	J300		10.91	0	3066.062 0.5
0	25-yr					
SSP1_runoff	25-yr	SSP1		3.28	0	1190.64 0.5
SSP2_runoff 0	25-yr	SSP2		6.56	0	534.119 0.5
[SUBAREAS] ;;Subcatchment PctRouted ;;	N-Imperv	N-Perv	S-Imperv	S-Perv	PctZero	RouteTo
BSP_runoff Forebay_runoff PSP1_runoff PSP2_runoff SSP1_runoff SSP2_runoff	0.01 0.01	0.24 0.24	0.05 0.05 0.05 0.05 0.05 0.05	0.43 0.2 0.43 0.43 0.43 0.43	0 0 0 0 0	OUTLET OUTLET OUTLET OUTLET OUTLET OUTLET
[INFILTRATION] ;;Subcatchment ;;		HydCon	DryTime			
BSP_runoff Forebay_runoff PSP1_runoff PSP2 runoff	79 79 79 79 79 79 79	0.5 0.5 0.5 0.5 0.5 0.5 0.5	7 7 7 7 7 7			
[JUNCTIONS]	Tablesat	Max	Tait	Curchange	Dondod	
,,Name	Invert Elev.		Init. Depth	Surcharge Depth	e Ponded Area	
;; dummy dummy2 dummy3 J200 J201 J202 J203 J300 J301 J302 MH#1 MH#2 MH#2A MH#2A MH#3 MH#4 VP#12 VP#3 VP#4 VP#5 VP#6 VP#7	$\begin{array}{c} 616.68\\ 0\\ 0\\ 616\\ 615\\ 613.2\\ 614\\ 614.6\\ 612.7\\ 613\\ 616.18\\ 615.18\\ 615.18\\ 614.18\\ 611.51\\ 611.18\\ 610.85\\ 611.93\\ 611.93\\ 616.68\\ 611.68\\ 611.68\\ \end{array}$	5 0 4 5 6.8 6 5.4 7.3 7 4.5 5.5 6.5 9.17 9.5 10.83 9.75 9.75 5 10 10	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
[OUTFALLS] ;;	Invert	Outfall	Stage/Ta	ble 1	Tide	
;;Name		TUDO	T-me Ce	- AC (		
;; reuse	Elev. 608.2	Туре  FREE	Time Ser		Gate Route  NO	То

[STORAGE] ;; Evap ;;Name Frac	). 2. II	Flev	Denth	Init. Depth eters	Curve		Params			
;;	·			eters						-
BSP 0		618		0	TABULAR	र	BSP			0
Forebay 0		608.2	12	0	TABULAR	ર	Foreba	У		0
;normal po PSP1 0	ol 618	.3 613	9	5.3	TABULAR	ર	PSP1			0
;normal po PSP2 0	ol 617	.7	9	5.7	TABULAF	र	PSP2			0
;normal po SSP1 0	ol 617	.6 611	8	0	TABULAR	ર	SSP1			0
;normal po SSP2 0	ol 617	.4	11.8	0	TABULAR	ર	SSP2			0
[CONDUITS]		<b>T</b> = ] = +		0+1.++					<b>T</b> u] o t	
;; Outlet	Init.	Inlet Max	_	Outlet				Manning	Inlet	
Outlet ;;Name Offset		Node	-	Node		Len	gth	Ν	Offset	
0††set	Flow	F10	N 							
,, 										
P1 611.68	0	dummy2 0		VP#6		44		0.01	611.68	
Р10		J202		мн#3		120		0.01	611.93	
611.81 P11	0	0 мн#3		мн#4		578		0.01	611.81	
611.23	0	0								
P12 610.85	0	мн#4 0		VP#12		360		0.01	611.23	
P13		J301		VP#12		120		0.01	611.18	
610.85 P14	0	0 VP#12		SSP1		460		0.01	610.85	
610.27	0	0 VP#5						0.02		
P18 616.18	0	vp#5 0		J200		88		0.02	616.68	
P2 611.68	0	VP#6 0		dummy3		32		0.01	611.68	
Р23		SSP2		VP#3		48		0.01	612.18	
611.93 P25	0	0 VP#3		reuse		32		0.01	611.93	
611.68	0	0								
P26 611.93	0	dummy2 0		VP#4		48		0.01	612.18	
Р27		VP#4		dummy3		32		0.01	611.93	
611.68 P3	0	0 SSP2		VP#7		44		0.01	611.68	
611.68	0	0								
P4 611.68	0	VP#7 0		reuse2		32		0.01	611.68	
Р5		BSP		VP#5		82		0.02	616.85	
616.68 P6	0	0 dummy		MH#1		374		0.01	616.68	
		,		Page	3	-				

	0	Bailly.i	пр			
615.92 0 P7	0 MH#1	MH#2	178	0.01	615.9	2
615.56 0 P8	0 мн#2	MH#2A	254	0.01	615.5	6
615.04 0 P9	0 мн#2а	J300	214	0.01	615.0	4
614.6 0 PSP1_surface1	0 200 و20	J201	162	0.08	616	
615    0 PSP1_surface2	J201	J202	368	0.08	615	
613.2 0 PSP1_surface3	J203	J202	130	0.08	614	
613.2 0 PSP2_surface1	J 300 0	J301	460	0.08	615	
608.7  0 PSP2_surface2 608.7  0	о J302 0	J301	170	0.08	609	
[XSECTIONS] ;;Link Barrels ;;	Shape	Geom1	Geom2	Geom3	Geom4	_
 P1	CIRCULAR	2.5	0	0	0	1
Р10	CIRCULAR	3	0	0	0	1
P11	CIRCULAR	3	0	0	0	1
P12	CIRCULAR	3	0	0	0	1
Р13	CIRCULAR	2.5	0	0	0	1
Р14	CIRCULAR	3	0	0	0	1
P18	CIRCULAR	2	0	0	0	1
P2	CIRCULAR	2.5	0	0	0	1
P23	CIRCULAR	2	0	0	0	1
P25	CIRCULAR	2	0	0	0	1
P26	CIRCULAR	2	0	0	0	1
P27	CIRCULAR	2	0	0	0	1
Р3	CIRCULAR	2.5	0	0	0	1
P4	CIRCULAR	2.5	0	0	0	1
Р5	CIRCULAR	2	0	0	0	1
Р6	CIRCULAR	2	0	0	0	1
Р7	CIRCULAR	2	0	0	0	1
Р8	CIRCULAR	2	0	0	0	1
Р9	CIRCULAR	2	0	0	0	1
PSP1_surface1	IRREGULAR	PSP1	0	0	0	1

PSP1_surface2	IRREGULAR	PSP1	Bailly.in	р 0	0	0	1
PSP1_surface3	IRREGULAR	PSP1		0	0	0	1
PSP2_surface1	IRREGULAR	PSP2		0	0	0	- 1
PSP2_surface2	IRREGULAR	PSP2		0	0	0	1
[TRANSECTS]							
NC 0.08 0.0 X1 PSP1	80.08 5	12	332	0.0	0.0	0.0	0.0
0.0 GR 5 0 344	1	12	0	172	1	332	5
NC 0.08 0.0 X1 PSP2	8 0.08 5	27	367	0.0	0.0	0.0	0.0
0.0 GR 10 0	1	27	0	197	1	367	10
394	-	27	Ū	197	-	501	10
[LOSSES] ;;Link	Inlet	Outlet	Average	Flap	Gate	SeepageRate	
P10 P11 P12 P13 P14 P18 P5 P9	0.9 0.4 0.2 0.2 0.2 0.4 0.9 0	0.4 0.2 0.4 0.4 1 0.4 1	0 0 0 0 0 0 0	NO NO NO NO NO NO		0 0 0 0 0 0 0	
[CURVES] ;;Name	Туре	r X-Value	v Y-Value			0	
;; ;invert = 618 ( BSP BSP BSP	 NAVD88) Storage	0 1 2	9171 59847 100759				
;invert = 608.2 Forebay Forebay Forebay Forebay Forebay Forebay Forebay Forebay Forebay Forebay Forebay Forebay Forebay	(NAVD88) Storage	0 1 2 3 4 5 6 7 8 9 10 11 12	6294 7145 8026 8936 9874 10840 11834 12857 13910 14992 16105 17250 18424				
;invert = 613 ( PSP1 PSP1 PSP1 PSP1 PSP1	NAVD88) Storage	0 1 2 3	8114 65002 133865 199240 Page 5				

PSP1 PSP1 PSP1 PSP1 PSP1 PSP1	B 5 6 7 8 9	ailly.inp 219862 225760 231713 237723 243788 249909
;invert = 612 (NAVD88) PSP2 Storage PSP2 PSP2 PSP2 PSP2 PSP2 PSP2 PSP2 PSP	0 1 2 3 4 5 6 7 8 9	5256 42684 125334 197332 234235 240241 246304 252424 258601 266015
;invert = 611 (NAVD88) SSP1 Storage SSP1 SSP1 SSP1 SSP1 SSP1 SSP1 SSP1 SSP	0 1 2 3 4 5 6 7 8	5641 54223 73421 76673 79983 83351 86776 90259 93799
;invert = 608.2 (NAVD88) SSP2 Storage SSP2 SSP2 SSP2 SSP2 SSP2	0 1 9.8 10.8 11.8	0 123735 161833 168972 174616
[TIMESERIES] ;;Name Date ::	Time	Value
;SCS_Type_II_5.21in design minutes, rain units = in. SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in SCS_Type_II_5.21in	storm, tota 0:00 0:06 0:12 0:18 0:24 0:30 0:36 0:42 0:48 0:54 1:00 1:06 1:12 1:18 1:24 1:30 1:36 1:42 1:48 1:54 2:00	<pre>Al rainfall = 5.21 in, rain interval = 6         0.00526         0.01052         0.01589         0.02126         0.02673         0.0322         0.03777         0.04335         0.04903         0.0547         0.06049         0.06627         0.07216         0.07805         0.08404         0.09003         0.09612         0.10842         0.11462         0.12092 Page 6</pre>

		Bailly.inp
SCS_Type_II_5.21in	2:06	0.12723
SCS_Type_II_5.21in	2:12	0.13364
SCS_Type_II_5.21in	2:18	0.14004
SCS_Type_II_5.21in	2:24 2:30	0.14656
SCS_Type_II_5.21in SCS_Type_II_5.21in	2:30	0.15307 0.15969
SCS_Type_II_5.21in	2:30	0.1663
SCS_Type_II_5.21in	2:42	0.17302
SCS_Type_II_5.21in	2:54	0.17974
SCS_Type_II_5.21in	3:00	0.18657
SCS Type II 5.21in	3:06	0.1934
SCS_Type_II_5.21in	3:12	0.20032
SCS_Type_II_5.21in	3:18	0.20725
SCS_Type_II_5.21in	3:24	0.21429
SCS_Type_II_5.21in	3:30	0.22132
SCS_Type_II_5.21in	3:36 3:42	0.22846 0.2356
SCS_Type_II_5.21in SCS_Type_II_5.21in	3:42	0.24284
SCS_Type_II_5.21in	3:54	0.25008
SCS_Type_II_5.21in	4:00	0.25743
SCS_Type_II_5.21in	4:06	0.26488
SCS_Type_II_5.21in	4:12	0.27243
SCS_Type_II_5.21in	4:18	0.28009
SCS_Type_II_5.21in	4:24	0.28785
SCS_Type_II_5.21in	4:30	0.29572
SCS_Type_II_5.21in SCS_Type_II_5.21in	4:36 4:42	0.30369 0.31177
SCS_Type_II_5.21in	4:42	0.31995
SCS_Type_II_5.21in	4:54	0.32823
SCS_Type_II_5.21in	5:00	0.33662
SCS_Type_II_5.21in	5:06	0.34511
SCS_Type_II_5.21in	5:12	0.35371
SCS_Type_II_5.21in	5:18	0.36241
SCS_Type_II_5.21in	5:24 5:30	0.37121
SCS_Type_II_5.21in SCS_Type_II_5.21in	5:36	0.38012 0.38913
SCS_Type_II_5.21in	5:42	0.39825
SCS_Type_II_5.21in	5:48	0.40747
SCS_Type_II_5.21in	5:54	0.4168
SCS_Type_II_5.21in	6:00	0.42623
SCS_Type_II_5.21in	6:06	0.43576
SCS_Type_II_5.21in	6:12	0.4454
SCS_Type_II_5.21in SCS_Type_II_5.21in	6:18 6:24	0.45515 0.46499
SCS_Type_II_5.21in	6:30	0.47494
SCS_Type_II_5.21in	6:36	0.485
SCS_Type_II_5.21in	6:42	0.49516
SCS_Type_II_5.21in	6:48	0.50542
SCS_Type_II_5.21in	6:54	0.51579
SCS_Type_II_5.21in	7:00	0.52626
SCS_Type_II_5.21in	7:06	0.53684
SCS_Type_II_5.21in SCS_Type_II_5.21in	7:12 7:18	0.54752 0.5583
SCS_Type_II_5.21in	7:24	0.56919
SCS_Type_II_5.21in	7:30	0.58019
SCS_Type_II_5.21in	7:36	0.59128
SCS_Type_II_5.21in	7:42	0.60248
SCS Type II 5.21in	7:48	0.61379
SCS_Type_II_5.21in	7:54	0.6252
SCS_Type_II_5.21in SCS_Type_II_5.21in	8:00 8:06	0.63692 0.64917
SCS_Type_II_5.21in	8:12	0.66193
SCS_Type_II_5.21in	8:18	0.67522
- <b>,</b> - <b>-</b>		Page 7

		Bailly.inp
SCS_Type_II_5.21in	14:42	4.41475
SCS_Type_II_5.21in	14:48	4.43095
SCS_Type_II_5.21in	14:54	4.44674
SCS_Type_II_5.21in	15:00	4.46221
$SCS_Type_{II}_{J,2IIII}$		
SCS_Type_II_5.21in	15:06	4.47727
SCS_Type_II_5.21in	15:12	4.49201
SCS_Type_II_5.21in	15:18	4.50634
SCS_Type_II_5.21in	15:24	4.52035
SCS_Type_II_5.21in	15:30	4.53395
SCS_Type_II_5.21in	15:36	4.54724
SCS_Type_II_5.21in	15:42	4.5601
SCS_Type_II_5.21in	15:48	4.57266
SCS_Type_II_5.21in	15:54	4.5848
SCS_Type_II_5.21in	16:00	4.59673
SCS_Type_II_5.21in	16:06	4.60851
SCS_Type_II_5.21in	16:12	4.62018
SCS_Type_II_5.21in	16:18	4.63169
SCS_Type_II_5.21in	16:24	4.6431
SCS_Type_II_5.21in	16:30	4.65435
SCS_Type_II_5.21in	16:36	4.6655
SCS_Type_II_5.21in	16:42	4.6765
$SCS_Type_II_J.21111$	16:48	4.68738
SCS_Type_II_5.21in		
SCS_Type_II_5.21in	16:54	4.69812
SCS_Type_II_5.21in	17:00	4.70875
SCS_Type_II_5.21in	17:06	4.71922
SCS_Type_II_5.21in	17:12	4.72959
SCS_Type_II_5.21in	17:18	4.7398
SCS_Type_II_5.21in	17:24	4.7499
SCS_Type_II_5.21in	17:30	4.75986
SCS_Type_II_5.21in	17:36	4.7697
SCS_Type_II_5.21in	17:42	4.77939
SCS_Type_II_5.21in	17:48	4.78898
SCS_Type_II_5.21in	17:54	4.79841
SCS_Type_II_5.21in	18:00	4.80774
SCS_Type_II_5.21in	18:06	4.81691
SCS_Type_II_5.21in	18:12	4.82597
SCS_Type_II_5.21in	18:18	4.83488
SCS_Type_II_5.21in	18:24	4.84368
SCS_Type_II_5.21in	18:30	4.85233
SCS_Type_II_5.21in	18:36	4.86088
SCS_Type_II_5.21in	18:42	4.86927
SCS_Type_II_5.21in	18:48	4.87755
SCS Type IT 5.21in	18:54	4.88568
SCS_Type_II_5.21in SCS_Type_II_5.21in	19:00	4.8937
SCS_Type_II_5.21in	19:06	4.90157
SCS_Type_II_5.21in	19:12	4.90933
SCS_Type_II_5.21in	19:12	4.91694
SCS_Type_II_5.21in	19:24	4.92444
$SCS_Type_{11_3.2111}$	19:24	
SCS_Type_II_5.21in		4.93179
SCS_Type_II_5.21in	19:36	4.93903
SCS_Type_II_5.21in	19:42	4.94611
SCS_Type_II_5.21in	19:48	4.95309
SCS_Type_II_5.21in	19:54	4.95992
SCS_Type_II_5.21in	20:00	4.96669
SCS_Type_II_5.21in	20:06	4.97341
SCS_Type_II_5.21in	20:12	4.98013
SCS_Type_II_5.21in	20:18	4.9868
SCS Type II 5,21in	20:24	4.99347
SCS_Type_II_5.21in	20:30	5.00009
SCS_Type_II_5.21in	20:36	5.00671
SCS_Type_II_5.21in	20:42	5.01327
SCS_Type_II_5.21in	20:48	5.01983
SCS_Type_II_5.21in	20:54	5.02635
		Page 9

SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21 SCS_Type_II_5.21	in 222	21:00 21:06 21:12 21:18 21:24 21:30 21:42 21:48 21:48 21:48 21:48 21:48 22:06 22:12 22:18 22:24 22:06 22:12 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48 22:48	Bailly.inp 5.03286 5.03932 5.04578 5.05219 5.0586 5.06495 5.07131 5.07761 5.08392 5.09017 5.09642 5.10262 5.10882 5.11497 5.12112 5.12721 5.13331 5.13935 5.1454 5.15139 5.15738 5.16322 5.16926 5.17515 5.18103 5.18687 5.1927 5.19849 5.20427 5.21		
[REPORT] INPUT YES CONTROLS NO SUBCATCHMENTS AL NODES ALL LINKS ALL	L				
[TAGS]					
[MAP] DIMENSIONS UNITS	2942018.557619 Feet	)19 23	25176.8296714	2945323.9939577	2325816.81299819
[COORDINATES] ;;Node	X-Coord	Y-	Coord		
,, dummy dummy2 dummy3 J200 J201 J202 J203 J300 J301 J302 MH#1 MH#2 MH#2 MH#2A MH#3 MH#4 VP#12	2942639.945 2944951.087 2944962.926 2942676.037 2942830.996 2943197.51 2943333.6 2943572.581 2944036.253 2944202.412 2942950.126 2943129.986 2943381.54 2943399.172 2943933.723 2944302.25	23 23 23 23 23 23 23 23 23 23 23 23 23 2	25323.804 25455.405 25587.513 25522.157 25521.992 25521.512 25526.026 25506.374 25505.08 25506.137 25233.575 25230.995 25232.147 25232.147 25291.033 25290.827 25293.198 Page 10		

PSP1	2944940.273 2945032.241 2942595.496 2945024.222 2944939.848 2945002.321 2945009.785 2942373.5 2945019.069 2943002.108 2943870.472 2944938.613 2944542.324	2325620.958 2325705.768 2325705.025 2325489.371 2325621.601 2325658.917
[VERTICES] ;;Link	X-Coord	Y-Coord
P1 P10 P13 P14 P18 P2 P23 P25 P26 P27 P3 P4 P5 P9	2945026.38 2943332.801 2944202.807 2944760.778 2942672.946 2945023.904 2944892.62 2944970.351 2945033.405	2325481.045 2325383.074 2325361.318 2325295.661 2325424.744 2325558.425 2325632.049 2325632.653 2325478.698 2325557.948 2325557.948 2325620.22 2325621.171 2325407.054
<pre>[POLYGONS] ;;Subcatchment ;;</pre>	X-Coord	Y-Coord
, BSP_runoff BSP_runoff BSP_runoff BSP_runoff BSP_runoff BSP_runoff BSP_runoff BSP_runoff BSP_runoff BSP_runoff BSP_runoff BSP_runoff BSP_runoff BSP_runoff BSP_runoff BSP_runoff Forebay_runoff Forebay_runoff Forebay_runoff Forebay_runoff Forebay_runoff Forebay_runoff Forebay_runoff Forebay_runoff Forebay_runoff	2942645.983 2942610.566 2942607.789 2942607.789 2942640.427 2942555.351	2325764.632 2325727.826 2325593.798 2325444.493 2325349.354 2325328.18 2325329.048 23253465.767 2325523.493 2325595.541 2325607.341 2325607.341 2325655.778 2325766.89 2325766.89 2325766.89 2325765.153 2325764.632 2325764.632 2325764.632 2325764.632 2325764.632 2325764.632 2325764.632 2325764.632 2325768.246 2325771.198 2325534.045 2325535.607 2325535.607 2325746.724 2325768.246 2325778.889 Page 11

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	NAGEMENT MODEL	- VERSION	5.1 (Bui	ld 5.1.012)	)	
EPA STORM WATER MA					-	
WARNING 04: minimu WARNING 03: negati WARNING 03: negati WARNING 03: negati WARNING 04: minimu WARNING 04: minimu WARNING 04: minimu WARNING 03: negati WARNING 03: negati WARNING 03: negati WARNING 03: negati WARNING 03: negati WARNING 03: negati WARNING 02: maximu WARNING 02: maximu WARNING 02: maximu	ve offset ignor ve offset ignor ve offset ignor m elevation dro m elevation dro ve offset ignor ve offset ignor ve offset ignor ve offset ignor ve offset ignor ve offset ignor m depth increas m depth increas	red for Lin red for Lin op used fo op used fo op used fo red for Lin red for Lin red for Lin red for Lin red for No sed for No sed for No	nk P10 nk P13 nk P14 r Conduit r Conduit r Conduit nk P5 nk P5 nk P5P2_si nk P5P2_si nk P5P2_si de J200 de J301	P2 P3 P4 urface1 urface2		
****						
Element Count						
Number of rain gag Number of subcatch Number of nodes	uments 6 29					
Number of links Number of pollutan Number of land use						
Number of pollutan Number of land use						
Number of pollutan Number of land use				Dette	Percenting	
Number of pollutan Number of land use	Data Source			Data Type	Recording Interval	
Number of pollutan Number of land use ************************************	nts 0 es 0	5.21in			Interval	
Number of pollutan Number of land use ************************************	Data Source SCS_Type_II_	_5.21in		Туре	Interval	
Number of pollutan Number of land use ************************************	Data Source SCS_Type_II_	5.21in Width	%Imperv	Туре	Interval 6 min.	
Number of pollutan Number of land use ************************************	Data Source SCS_Type_II_	Width		Type CUMULATIVE %Slope	Interval 6 min. Rain Gage	
Number of pollutan Number of land use ************************************	Data Source SCS_Type_II_ *** Area 3.70	Width 	0.00	Type CUMULATIVE %Slope 0.5000	Interval 6 min. Rain Gage 25-yr	
Number of pollutan Number of land use ************************************	Data Source SCS_Type_II *** Area 3.70 1.05	Width 1343.10 213.73	0.00	Type CUMULATIVE %Slope 0.5000 0.5000	Interval 6 min. Rain Gage 25-yr 25-yr	
Number of pollutan Number of land use ************************************	Data Source SCS_Type_II Area 3.70 1.05 8.87	Width 1343.10 213.73 2492.76	0.00 0.00 0.00	Type CUMULATIVE %Slope 0.5000 0.5000 0.5000	Interval E 6 min. Rain Gage 25-yr 25-yr 25-yr 25-yr	
Number of pollutan Number of land use ************************************	Data Source SCS_Type_II_ *** Area 3.70 1.05	Width 1343.10 213.73	0.00	Type CUMULATIVE %Slope 0.5000 0.5000	Interval E 6 min. Rain Gage 25-yr 25-yr 25-yr 25-yr	
Number of pollutan Number of land use ************************************	Data Source SCS_Type_II Area 3.70 1.05 8.87	Width 1343.10 213.73 2492.76	0.00 0.00 0.00	Type CUMULATIVE %Slope 0.5000 0.5000 0.5000 0.5000	Interval 6 min. Rain Gage 25-yr 25-yr 25-yr 25-yr 25-yr	

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# ***** Node Summary

Name	Туре	Invert Elev.	Max. Depth	Ponded Exte Area Infl	ernal ow
dummy dummy2 dummy3 J200 J201 J202 J203 J300 J301 J302 MH#1 MH#2 MH#2A MH#2A MH#2A MH#3 MH#4 VP#12 VP#3 VP#4 VP#5 VP#6 VP#7 reuse reuse2 BSP Forebay PSP1 PSP2 SSP1 SSP2	JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION	$\begin{array}{c} 616.68\\ 0.00\\ 0.00\\ 616.00\\ 615.00\\ 613.20\\ 614.00\\ 614.60\\ 612.70\\ 613.00\\ 616.18\\ 615.18\\ 615.18\\ 614.18\\ 611.51\\ 611.18\\ 610.85\\ 611.93\\ 611.93\\ 611.93\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 611.68\\ 608.20\\ 613.00\\ 612.00\\ 611.00\\ 608.20\\ \end{array}$	5.00 614.18 614.18 5.00 5.00 6.80 6.00 10.40 10.00 10.00 4.50 5.50 6.50 9.17 9.50 10.83 9.75 9.75 5.00 10.00 10.00 10.00 10.00 10.00 10.00 10.83 9.75 9.75 5.00 10.00 10.00 10.00 10.00 10.00 10.83 9.75 9.75 5.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.83 9.75 9.75 5.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 12.00 9.00 8.00 11.80	0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0	
*********** Link Summary *********** Name Slope Roughness		To Node	Туре	Length	
P1 .0023 0.0100 P10 .1584 0.0100 P11 .1003 0.0100 P12 .1056 0.0100 P13 .5418 0.0100 P14 0.0326 0.0100 P18 .5682 0.0200 P2	dummy2 J202 MH#3 MH#4 J301 VP#12 VP#5 VP#6	VP#6 MH#3 MH#4 VP#12 VP#12 SSP1 J200 dummy3	CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT	44.0 120.0 578.0 360.0 120.0 460.0 88.0 32.0	

	0.0100		Bailly.rpt				
0.5208 P25		VP#3	reuse	CON	DUIT	3	2.0
0.7813 P26	0.0100	dummy2	VP#4	CON	IDUIT	4	8.0
0.5208 P27	0.0100	VP#4	dummy3	CON	DUIT	3	2.0
0.7813 P3	0.0100	SSP2	VP#7	CON	DUIT	4	4.0
0.0023 P4	0.0100	VP#7	reuse2	CON	DUIT	3	2.0
0.0031 P5	0.0100	BSP	VP#5	CON	IDUIT	8	2.0
1.6100 P6	0.0200	dummy	MH#1	CON	IDUIT	37	4.0
0.1337 P7	0.0100	- MH#1	мн#2	CON	IDUIT	17	8.0
0.3483 P8	0.0100	мн#2	MH#2A	CON	IDUIT	25	4.0
0.2047 P9	0.0100	MH#2A	J300		IDUIT		4.0
0.2056	0.0100 urface1	J200	J201		DUIT		2.0
0.6173	0.0800 urface2	J201	J202		IDUIT		8.0
0.4891	0.0800 urface3	J203	J202		DUIT		0.0
0.6154	0.0800 urface1	J300	J301		DUIT		0.0
0.5000	0.0800 urface2	J302	J301		IDUIT		0.0
0.1765	0.0800	3302	1201	CON	IDOTI	17	0.0
	section Su						
	********** Section Su *******		Full	Full	Hyd.	Max.	No. of
	Section Su		Full Depth	Full Area	Hyd. Rad.	Max. Width	No. of Barrels
Cross S ****** Full Conduit	Section Su	ummary *****			-		
Cross S ****** Full Conduit Flow  P1	Section Su	ummary *****	Depth		Rad.		Barrels
Cross 5 ****** Full Conduit Flow  P1 2.54 P10	Section Su	ummary ***** Shape	Depth	Area	Rad.	Width	Barrels
Cross 5 ******* Full Conduit Flow  P1 2.54 P10 93.32 P11	Section Su	ummary ***** Shape  CIRCULAR	Depth  2.50	Area  4.91	Rad.	width  2.50	Barrels  1
Cross 9 ******* Full Conduit Flow  P1 2.54 P10 93.32 P11 27.47 P12	Section Su	ummary Shape CIRCULAR CIRCULAR	Depth 2.50 3.00	Area 4.91 7.07	Rad. 0.63 0.75	width  2.50 3.00	Barrels  1 1
Cross 9 ****** Full Conduit Flow  P1 2.54 P10 93.32 P11 27.47 P12 28.17 P13	Section Su	Immary Shape CIRCULAR CIRCULAR CIRCULAR CIRCULAR	Depth 2.50 3.00 3.00	Area 4.91 7.07 7.07	Rad. 0.63 0.75 0.75	width 2.50 3.00 3.00	Barrels  1 1 1
Cross 9 ****** Full Conduit Flow  P1 2.54 P10 93.32 P11 27.47 P12 28.17 P13 66.21 P14	Section Su	Immary Shape CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR	Depth 2.50 3.00 3.00 3.00 3.00	Area 4.91 7.07 7.07 7.07 7.07	Rad. 0.63 0.75 0.75 0.75	width 2.50 3.00 3.00 3.00 3.00	Barrels  1 1 1 1 1
Cross 9 ****** Full Conduit Flow  P1 2.54 P10 93.32 P11 27.47 P12 28.17 P13 66.21 P14 15.66 P18	Section Su	Shape CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR	Depth 2.50 3.00 3.00 3.00 2.50	Area 4.91 7.07 7.07 7.07 4.91	Rad. 0.63 0.75 0.75 0.75 0.75 0.63	width 2.50 3.00 3.00 3.00 2.50	Barrels  1 1 1 1 1 1
Cross 9 ****** Full Conduit Flow  P1 2.54 P10 93.32 P11 27.47 P12 28.17 P13 66.21 P14 15.66 P18 11.08 P2	Section Su	Shape CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR	Depth 2.50 3.00 3.00 3.00 2.50 3.00	Area 4.91 7.07 7.07 7.07 4.91 7.07	Rad. 0.63 0.75 0.75 0.75 0.63 0.75	width 2.50 3.00 3.00 3.00 2.50 3.00	Barrels  1 1 1 1 1 1 1 1
Cross 9 ******* Full Conduit Flow  P1 2.54 P10 93.32 P11 27.47 P12 28.17 P13 66.21 P14 15.66 P18 11.08 P2 2.98 P23	Section Su	Shape CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR	Depth 2.50 3.00 3.00 2.50 3.00 2.50 3.00 2.00	Area 4.91 7.07 7.07 7.07 4.91 7.07 3.14	Rad. 0.63 0.75 0.75 0.75 0.63 0.75 0.50	width 2.50 3.00 3.00 2.50 3.00 2.00	Barrels  1 1 1 1 1 1 1 1 1 1 1
Cross 9 ****** Full Conduit Flow  P1 2.54 P10 93.32 P11 27.47 P12 28.17 P13 66.21 P14 15.66 P18 11.08 P2 2.98	Section Su	Shape CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR CIRCULAR	Depth 2.50 3.00 3.00 2.50 3.00 2.50 2.00 2.50	Area 4.91 7.07 7.07 7.07 4.91 7.07 3.14 4.91	Rad. 0.63 0.75 0.75 0.75 0.63 0.75 0.50 0.63	width 2.50 3.00 3.00 2.50 3.00 2.00 2.00 2.50	Barrels  1 1 1 1 1 1 1 1 1 1 1

		Bailly.r	pt			
P26 21.22	CIRCULAR	2.00	3.14	0.50	2.00	1
P27 25.99	CIRCULAR	2.00	3.14	0.50	2.00	1
P3 2.54	CIRCULAR	2.50	4.91	0.63	2.50	1
P4 2.98	CIRCULAR	2.50	4.91	0.63	2.50	1
P5 18.66	CIRCULAR	2.00	3.14	0.50	2.00	1
Р6	CIRCULAR	2.00	3.14	0.50	2.00	1
10.75 P7 17.36	CIRCULAR	2.00	3.14	0.50	2.00	1
P8 13.31	CIRCULAR	2.00	3.14	0.50	2.00	1
P9 13.34	CIRCULAR	2.00	3.14	0.50	2.00	1
PSP1_surface1 5735.15	PSP1	5.00	1488.00	4.29	344.00	1
PSP1_surface2 5105.20	PSP1	5.00	1488.00	4.29	344.00	1
PSP1_surface3 5726.32	PSP1	5.00	1488.00	4.29	344.00	1
PSP2_surface1	PSP2	10.00	3473.00	8.71	394.00	1
19317.46 PSP2_surface2 11476.22	PSP2	10.00	3473.00	8.71	394.00	1

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Transect Summary

Transect PSP1 Area:

Area:					
	0.0011	0.0043	0.0097	0.0172	0.0269
	0.0387	0.0527	0.0688	0.0871	0.1075
	0.1291	0.1506	0.1722	0.1939	0.2156
	0.2373	0.2591	0.2809	0.3027	0.3246
	0.3465	0.3685	0.3905	0.4126	0.4346
	0.4568	0.4789	0.5012	0.5234	0.5457
	0.5680	0.5904	0.6128	0.6353	0.6578
	0.6803	0.7029	0.7255	0.7481	0.7708
	0.7936	0.8163	0.8392	0.8620	0.8849
	0.9078	0.9308	0.9538	0.9769	1.0000
Hrad:	0.3070	0.5500	0.5550	0.5705	1.0000
ni au.	0.0116	0.0232	0.0348	0.0464	0.0580
	0.0696	0.0812	0.0928	0.1044	0.1160
	0.1390	0.1619	0.1847	0.2076	0.2303
	0.2530	0.2757	0.2983	0.3209	0.3435
	0.3660	0.3884	0.4108	0.4332	0.4555
	0.4778	0.5000	0.5222	0.5443	0.5664
	0.5885	0.6105	0.6325	0.6544	0.6763
	0.6982	0.7200	0.7418	0.7635	0.7852
	0.8069	0.8285	0.8501	0.8716	0.8931
	0.9145	0.9360	0.9574	0.9787	1.0000
Width:					
	0.0930	0.1860	0.2791	0.3721	0.4651
	0.5581	0.6512	0.7442	0.8372	0.9302
	0.9320	0.9337	0.9355	0.9372	0.9390
	0.9407	0.9424	0.9442	0.9459	0.9477
	010101	0.0121	0.0112	010100	0.0177

Page 4

0 . 0 . 0 . 0 . 0 .	.9494 .9581 .9669 .9756 .9843 .9930	0.9512 0.9599 0.9686 0.9773 0.9860 0.9948	Bailly.rp 0.9529 0.9616 0.9703 0.9791 0.9878 0.9965	t 0.9547 0.9634 0.9721 0.9808 0.9895 0.9883	0.9564 0.9651 0.9738 0.9826 0.9913 1.0000
Transect PSP2 Area:					
0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	.0020 .0686 .1677 .2685 .3711 .4754 .5814 .6891 .7986 .9098	0.0078 0.0882 0.1877 0.2889 0.3918 0.4964 0.6028 0.7109 0.8207 0.9322	0.0176 0.1080 0.2078 0.3093 0.4126 0.5176 0.6243 0.7327 0.8429 0.9548	0.0313 0.1278 0.2280 0.3298 0.4334 0.5388 0.6458 0.7546 0.8651 0.9773	0.0489 0.1477 0.2482 0.3504 0.4544 0.5600 0.6674 0.7766 0.8874 1.0000
0.	.0114 .0797	0.0229 0.1023	0.0343 0.1247	0.0457 0.1470	0.0571 0.1693
0 . 0 . 0 . 0 . 0 . 0 . 0 . 0 .	1915 .3011 .4089 .5147 .6188 .7213 .8222 .9215	0.2136 0.3228 0.4302 0.5357 0.6395 0.7416 0.8422 0.9412	0.2356 0.3444 0.4514 0.5566 0.6600 0.7618 0.8621 0.9609	0.2575 0.3660 0.4726 0.5774 0.6805 0.7820 0.8820 0.9805	0.2794 0.3875 0.4937 0.5982 0.7009 0.8021 0.9018 1.0000
0.	.1726 .8660	0.3452 0.8690	0.5178 0.8721	0.6904 0.8751	0.8629 0.8782
0 . 0 . 0 . 0 . 0 . 0 . 0 . 0 .	.8812 .8964 .9117 .9269 .9421 .9574 .9726 .9878	0.8843 0.8995 0.9147 0.9299 0.9452 0.9604 0.9756 0.9909	0.8873 0.9025 0.9178 0.9330 0.9482 0.9635 0.9787 0.9939	0.8904 0.9056 0.9208 0.9360 0.9513 0.9665 0.9817 0.9970	0.8934 0.9086 0.9239 0.9391 0.9543 0.9695 0.9848 1.0000
**************************************	nary stati Its found	istics disp at everv c	layed in th omputationa	is report a 1 time step	re
Analysis Optic	ons ***	CFS			
Process Models Rainfall/Rur RDII Snowmelt Groundwater Flow Routing Ponding Allo Water Qualit Infiltration M	noff 	NO NO NO NO YES NO NO	NUMBER		
Flow Routing M					

Starting Date Ending Date Antecedent Dry Days Report Time Step Wet Time Step Dry Time Step Routing Time Step Variable Time Step Maximum Trials Number of Threads Head Tolerance	Bailly.rp 01/28/2020 00:00: 01/31/2020 00:00: 0.0 00:01:00 00:05:00 00:05:00 1.00 sec YES 8 4 0.005000 ft	00
**************************************	Volume acre-feet 14.922 0.000 5.931 8.522 0.474 -0.032	Depth inches 5.210 0.000 2.071 2.975 0.166
<pre>************************************</pre>	Volume acre-feet  0.000 8.529 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 38.908 47.829 -0.827	Volume 10^6 gal 0.000 2.779 0.000 0.000 0.000 0.000 0.000 0.000 12.679 15.586
<pre>************************************</pre>		
**************************************	S *	
Highest Flow Instability In All links are stable.		

******	*****	****	
Routing	тіme	Step Summary	

*********		
Minimum Time Step	:	0.50 sec
	:	1.00 sec
Maximum Time Step	:	1.00 sec
Percent in Steady State	:	0.00
Average Iterations per Step	:	2.00
Percent Not Converging	:	0.00

Total Total Peak Runoff Runoff Runoff Coeff Subcatchment in 10^6 gal CFS					
	Total Runon in	Total Evap in	Total Infil in	Total Runoff in	
BSP_runoff       5.21         0.30       10.11       0.573         Forebay_runoff       5.21         0.09       2.25       0.614         PSP1_runoff       5.21         0.72       21.14       0.571         PSP2_runoff       5.21         0.88       26.00       0.571         SSP1_runoff       5.21         0.27       8.97       0.573         SSP2_runoff       5.21	0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00 0.00 0.00	2.07 1.96 2.07 2.07 2.07 2.07 2.07	2.98 3.20 2.98 2.98 2.98 2.98 2.98 2.92	

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Node Depth Summary

Node Type	Average Depth Feet	Maximum Depth Feet	Maximum HGL Feet	Time of Max Occurrence days hr:min	Reported Max Depth Feet
dummy         JUNCT           dummy2         JUNCT           dummy3         JUNCT           J200         JUNCT           J201         JUNCT           J202         JUNCT           J203         JUNCT           J300         JUNCT           J301         JUNCT           J302         JUNCT           MH#1         JUNCT           MH#2A         JUNCT	ION         0.00           ION         0.00           ION         0.00           ION         0.05           ION         0.06           ION         0.64           ION         0.39           ION         1.03           ION         0.78           ION         0.32           ION         0.32	0.00 0.00 0.53 0.60 0.81 1.07 1.31 1.01 0.00 0.52 1.50	$\begin{array}{c} 616.68\\ 0.00\\ 0.00\\ 616.53\\ 615.60\\ 614.01\\ 614.01\\ 615.67\\ 614.01\\ 614.01\\ 614.01\\ 616.18\\ 615.70\\ 615.68\\ \end{array}$	$\begin{array}{c} 0 & 00:00 \\ 0 & 00:00 \\ 0 & 00:00 \\ 0 & 11:57 \\ 0 & 12:08 \\ 2 & 23:29 \\ 2 & 23:28 \\ 0 & 12:05 \\ 2 & 23:56 \\ 2 & 23:56 \\ 2 & 23:56 \\ 0 & 00:00 \\ 0 & 12:05 \\ 0 & 12:06 \end{array}$	$\begin{array}{c} 0.00\\ 0.00\\ 0.00\\ 0.53\\ 0.60\\ 0.81\\ 0.01\\ 1.07\\ 1.31\\ 1.01\\ 0.00\\ 0.52\\ 1.50\end{array}$

		Bailly	/.rpt				
мн#3	JUNCTION	2.03	2.50	614.01	2	23:30	2.50
MH#4	JUNCTION	2.30	2.83	614.01	2	23:57	2.83
VP#12	JUNCTION	2.57	3.16	614.01	2	23:58	3.16
VP#3	JUNCTION	0.00	0.00	611.93	0	00:00	0.00
VP#4	JUNCTION	0.00	0.00	611.93	0	00:00	0.00
VP#5	JUNCTION	0.10	0.81	617.49	0	12:36	0.81
VP#6	JUNCTION	0.00	0.00	611.68	0	00:00	0.00
VP#7	JUNCTION	0.00	0.00	611.68	0	00:00	0.00
reuse	OUTFALL	0.00	0.00	608.20	0	00:00	0.00
reuse2	OUTFALL	0.00	0.00	608.20	0	00:00	0.00
BSP	STORAGE	0.06	0.54	618.54	0	12:36	0.54
Forebay	STORAGE	1.39	1.73	609.93	1	08:20	1.73
PSP1	STORAGE	5.30	5.30	618.30	0	00:00	5.30
PSP2	STORAGE	5.70	5.70	617.70	0	00:00	5.70
SSP1	STORAGE	2.43	3.01	614.01	3	00:00	3.01
SSP2	STORAGE	0.85	1.06	609.26	1	14:40	1.06

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Node Inflow Summary

Total Inflow Volume Node gal	Flow Balance Error Percent	Туре	Maximum Lateral Inflow CFS	Maximum Total Inflow CFS	Time of Occurro days hr	ence	Lateral Inflow Volume 10^6 gal	10^6
dummy dummy 0 dummy 0 0 1.02 1.02 1.02 1.02 1.02 1.02 1.02 1.05 1.02 1.05 1.02 1.05 1.02 1.05 1.02 0 0 0 0 0 0 0 0 0 0 0 0 0	0.000 gal	JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION JUNCTION	0.00 0.00 21.14 0.00 0.00 26.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	0.00 0.00 22.19 24.25 27.20 0.09 26.00 30.05 4.63 0.00 0.09 0.34	0 00 0 00 0 12 0 12	0:00 0:00 2:00 2:01 2:14 2:44 2:44 2:00 2:14 2:20 0:00 2:03 2:01	0 0 0.718 0 0 0 0 0.883 0 0 0 0 0 0 0	
0.00237 MH#3	7.013	JUNCTION	0.00	11.33 e 8		2:48	0	

0.005	1 710		Bailly	.rpt			
0.865 МН#4	1.712	JUNCTION	0.00	12.62	0	12:45	0
0.852 VP#12	2.877	JUNCTION	0.00	22.60	0	12:46	0
1.16	2.238	JUNCTION	0.00	22.00	U		0
VP#3		JUNCTION	0.00	0.00	0	00:00	0
0 VP#4	0.000 gal	JUNCTION	0.00	0.00	0	00:00	0
0	0.000 gal		0 00	3.02	0	12:36	0
VP#5 0.3	-0.049	JUNCTION	0.00	5.02	0	12:30	0
VP#6		JUNCTION	0.00	0.00	0	00:00	0
0 VP#7	0.000 gal	JUNCTION	0.00	0.00	0	00:00	0
0	0.000 gal						
reuse 0	0.000 gal	OUTFALL	0.00	0.00	0	00:00	0
reuse2	· ·	OUTFALL	0.00	0.00	0	00:00	0
0 BSP	0.000 gal	STORAGE	10.11	10.11	0	12:00	0.3
0.3	-0.001	STORAGE	10.11	10.11	0	12.00	0.5
Foreba	у	STORAGE	2.25	2.25	0	12:00	0.0912
0.0912 PSP1	0.000	STORAGE	0.00	0.00	0	00:00	0
6.01	0.000						2
PSP2 6.67	0.000	STORAGE	0.00	0.00	0	00:00	0
SSP1		STORAGE	8.97	23.96	0	12:41	0.266
1.28 SSP2	0.947	STORAGE	6.36	6.36	0	12:00	0.521
0.521	0.000	STURAGE	0.30	0.30	U	12.00	0.321

Surcharging	occurs	when	water	rises	above	the	top	of	the	hiahest	conduit.

Node	туре	Hours Surcharged	Max. Height Above Crown Feet	Min. Depth Below Rim Feet
VP#12	JUNCTION	51.77	0.156	7.674

No nodes were flooded.

of Max	Maximum	Average	Avg	Evap	Exfil	Maximum	Мах	Time
or max	Max mium	Volume		Pcnt ge 9	Pcnt	Volume	Pcnt	

Occurrence Outflow Bailly.rpt									
Occurrence Storage hr:min		1000 ft3	Full	LOSS	Loss	1000 ft3	Full	days	
						12 505			
BSP 12:36	3.02	0.977	1	0	0	12.505	11	0	
Forebay	5.02	9.728	7	0	0	12.192	8	1	
08:20	0.00				-				
PSP1	0.00	802.902	48	0	0	802.902	48	0	
00:00 PSP2	0.00	891.988	51	0	0	891.988	51	0	
00:00	0.00				Ū			-	
SSP1	0.00	135.447	23	0	0	169.284	28	3	
00:00 SSP2	0.68	54.460	3	0	0	69.675	4	1	
14:40	0.00	511100	5	Ŭ	Ū	09.079		Ť	
	*****								
Outfall ******	Loading Summ *****	ary ***							
						 Totol			
		Flow Freq	A∨g Flow	M Fl	ax ow	Total Volume			

Outfall Node	Freq	Flow	Flow	Volume
	Pcnt	CFS	CFS	10^6 gal
reuse	0.00	0.00	0.00	0.000
reuse2	0.00	0.00	0.00	0.000
System	0.00	0.00	0.00	0.000

*****

Link Flow Summary

Link	Туре	Maximum  Flow  CFS	Time of Max Occurrence days hr:mir	Veloc	Max/ Full Flow	Max/ Full Depth
P1 P10 P11 P12 P13 P14 P18 P2 P23 P25 P26 P27 P3 P4 P5 P6 P7 P8	CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT CONDUIT	$\begin{array}{c} 0.00\\ 11.33\\ 12.62\\ 13.94\\ 11.40\\ 21.99\\ 3.02\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.09\\ \end{array}$	$\begin{array}{c} 0 & 00:00\\ 0 & 12:48\\ 0 & 12:45\\ 0 & 12:33\\ 0 & 12:46\\ 0 & 12:52\\ 0 & 12:52\\ 0 & 12:36\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 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00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & 00:00\\ 0 & $	$\begin{array}{c} 4.23\\ 2.45\\ 2.29\\ 3.54\\ 4.27\\ 3.05\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 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0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\$	$\begin{array}{c} 0.00\\ 0.12\\ 0.46\\ 0.49\\ 0.17\\ 1.40\\ 0.27\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.01\\ \end{array}$	$\begin{array}{c} 0.00\\ 0.50\\ 0.83\\ 0.96\\ 0.76\\ 1.00\\ 0.35\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.00\\ 0.19\\ \end{array}$
P9	CONDUIT	0.34	0 12:01		0.03	0.43

Page 10

PSP1_surface1 PSP1_surface2 PSP1_surface3 PSP2_surface1 PSP2_surface2		B 24. 27. 0. 30. 4.	20 09 05	0 12 0 12 0 12 0 12 0 12	:01 :14 :44 :14 :20	0.5 0.5 0.0 0.5 0.1	5 0 0 0 7 0	.00 .01 .00 .00	0.11 0.12 0.08 0.07 0.12
Flow Classificat	tion Summary								
	Adjusted			Fract	ion of	Time	in Flo	w Clas	S
Inlet	/Actual		Up	Down	Sub	Sup	Up	Down	Norm
Conduit Ctrl	Length	Dry	Dry	Dry	Crit	Crit	Crit	Crit	Ltd
- P1	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00 P10	1.00	0.16	0.00	0.00	0.83	0.00	0.00	0.00	0.01
0.00 P11	1.00	0.17	0.00	0.00	0.83	0.00	0.00	0.00	0.00
0.00 P12	1.00	0.16	0.01	0.00	0.83	0.00	0.00	0.00	0.00
0.00 P13	1.00	0.16	0.00	0.00	0.84	0.00	0.00	0.00	0.02
0.00 P14	1.00	0.16	0.00	0.00	0.84	0.00	0.00	0.00	0.00
0.00 P18	1.00	0.16	0.00	0.00	0.00	0.00	0.00	0.84	0.00
0.00 P2	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00 P23	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00 P25	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00 P26	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00 P27	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00 P3	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00 P4	1.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00 P5	1.00	0.16	0.00	0.00	0.84	0.00	0.00	0.00	0.84
0.00 P6	1.00	1.00	0.00	0.00	0.04	0.00	0.00	0.00	0.00
0.00 P7	1.00	0.96	0.00	0.00	0.00	0.00	0.00	0.00	0.00
0.00									
P8 0.00	1.00	0.68	0.28	0.00	0.04	0.00	0.00	0.00	0.83
P9 0.00	1.00	0.16	0.53	0.00	0.32	0.00	0.00	0.00	0.54
PSP1_surface1 0.00	1.00	0.16	0.00 Page	0.00	0.84	0.00	0.00	0.00	0.83

		В	ailly.	rpt					
PSP1_surface2	1.00	0.16	0.00	0.00	0.84	0.00	0.00	0.00	0.83
PSP1_surface3	1.00	0.16	0.01	0.00	0.82	0.00	0.00	0.00	0.33
PSP2_surface1	1.00	0.16	0.00	0.00	0.84	0.00	0.00	0.00	0.83
PSP2_surface2 0.00	1.00	0.16	0.01	0.00	0.83	0.00	0.00	0.00	0.00

Conduit		Hours Full Upstream		Hours Above Full Normal Flow	Hours Capacity Limited
P12 P13 P14	0.01 0.01 37.64	0.01 0.01 37.64	51.76 59.39 51.76	0.01 0.01 1.02	0.01 0.01 0.01 0.01

Analysis begun on: Thu Sep 10 13:57:47 2020 Analysis ended on: Thu Sep 10 13:57:55 2020 Total elapsed time: 00:00:08



Attachment 5: Cover Flow and outlet protection calculation



# **Hydraulic Analysis Report**

## Project Data

Project Title: Designer: Project Date: Tuesday, February 11, 2020 Project Units: U.S. Customary Units Notes:

## Channel Analysis: PSP1 Channel Analysis

Notes: Surface runoff on cover of the Primary settling pond 1

Peak flow (31 cfs) = BSP runoff (10 cfs) + PSP#1 runoff (21 cfs)

## **Input Parameters**

Channel Type: Custom Cross Section

## **Cross Section Data**

Elevation (ft)	Elevation (ft)	Manning's n
0.00	5.00	0.0903
12.00	1.00	0.0903
172.00	0.00	0.0903
332.00	1.00	0.0903
344.00	5.00	

Longitudinal Slope: 0.0050 ft/ft Flow: 31.0000 cfs

#### **Result Parameters**

Depth: 0.6072 ft Area of Flow: 58.9939 ft^2 Wetted Perimeter: 194.3130 ft Hydraulic Radius: 0.3036 ft Average Velocity: 0.5255 ft/s Top Width: 194.3092 ft Froude Number: 0.1681 Critical Depth: 0.2975 ft Critical Velocity: 2.1887 ft/s Critical Slope: 0.2245 ft/ft Critical Slope: 0.2245 ft/ft Calculated Max Shear Stress: 0.1895 lb/ft^2 Calculated Avg Shear Stress: 0.0947 lb/ft^2 Composite Manning's n Equation: Lotter method Manning's n: 0.0903

### **Channel Lining Analysis: PSP1 Channel Lining**

Notes:

#### **Lining Input Parameters**

Channel Lining Type: Vegetation Specific Weight of Water: 62.4 lb/ft^3 Height of Vegetation: 0.333 ft Vegetation Condition is good Growth Form of Vegetation is mixed Cf: 0.75 See HEC-15, Table 4.5 (default: 0.75 for Good cover factor and Mixed growth form) soil is noncohesive D75: 0.1 Safety Factor: 1

### **Lining Results**

Cn: 0.165205 Permissible Soil Shear Stress: 0.04 lb/ft^2 Mean Boundary Shear Stress: 0.0947239 lb/ft^2 Maximum Shear Stress on the Channel Bottom: 0.189451 lb/ft^2 Manning's n: 0.0903273 Soil Grain Roughness: 0.0177136 Effective Shear Stress: 0.00148607 lb/ft^2 Permissible Shear Stress on Vegetation: 4.16049 lb/ft^2 This value is compared with the maximum shear stress times the safety factor to determine lining stability

## **Channel Bottom Shear Results**

channel bottom is stable

## **Channel Lining Stability Results**

the channel is stable

## **Channel Summary**

Name of Selected Channel: PSP1 Channel Analysis

## Channel Analysis: PSP2 Channel Analysis

Notes: Surface runoff on cover of the Primary settling pond 2

Peak flow = 26 cfs

## Input Parameters

Channel Type: Custom Cross Section

## **Cross Section Data**

Elevation (ft)	Elevation (ft)	Manning's n
0.00	10.00	0.0932
27.00	1.00	0.0932
197.00	0.00	0.0932
367.00	1.00	0.0932
394.00	10.00	

Longitudinal Slope: 0.0050 ft/ft Flow: 26.0000 cfs

#### **Result Parameters**

Depth: 0.5621 ft Area of Flow: 53.7212 ft^2 Wetted Perimeter: 191.1326 ft Hydraulic Radius: 0.2811 ft Average Velocity: 0.4840 ft/s Top Width: 191.1293 ft Froude Number: 0.1609 Critical Depth: 0.2707 ft Critical Velocity: 2.0876 ft/s Critical Slope: 0.2465 ft/ft Critical Slope: 0.2465 ft/ft Calculated Max Shear Stress: 0.1754 lb/ft^2 Calculated Avg Shear Stress: 0.0877 lb/ft^2 Composite Manning's n Equation: Lotter method Manning's n: 0.0932

### **Channel Lining Analysis: PSP2 Channel Lining**

Notes:

#### **Lining Input Parameters**

Channel Lining Type: Vegetation Specific Weight of Water: 62.4 lb/ft^3 Height of Vegetation: 0.333 ft Vegetation Condition is good Growth Form of Vegetation is mixed Cf: 0.75 See HEC-15, Table 4.5 (default: 0.75 for Good cover factor and Mixed growth form) soil is noncohesive D75: 0.1 Safety Factor: 1

### **Lining Results**

Cn: 0.165205 Permissible Soil Shear Stress: 0.04 lb/ft^2 Mean Boundary Shear Stress: 0.0876931 lb/ft^2 Maximum Shear Stress on the Channel Bottom: 0.175389 lb/ft^2 Manning's n: 0.0931572 Soil Grain Roughness: 0.0177136 Effective Shear Stress: 0.00129345 lb/ft^2 Permissible Shear Stress on Vegetation: 4.42527 lb/ft^2 This value is compared with the maximum shear stress times the safety factor to determine lining stability

#### **Channel Bottom Shear Results**

channel bottom is stable

#### **Channel Lining Stability Results**

the channel is stable

#### **Channel Summary**

Name of Selected Channel: PSP2 Channel Analysis

#### **Channel Analysis: P18**

Notes: Peak Discharge from P18 from BSP runoff (10 cfs)

#### **Input Parameters**

Channel Type: Circular Pipe Diameter: 2.0000 ft Longitudinal Slope: 0.0057 ft/ft Manning's n: 0.0200 Flow: 10.0000 cfs

#### **Result Parameters**

Depth: 1.4844 ft Area of Flow: 2.5002 ft^2 Wetted Perimeter: 4.1529 ft Hydraulic Radius: 0.6020 ft Average Velocity: 3.9996 ft/s Top Width: 1.7497 ft Froude Number: 0.5896 Critical Depth: 1.1309 ft Critical Velocity: 5.4592 ft/s Critical Slope: 0.0123 ft/ft Critical Top Width: 1.98 ft Calculated Max Shear Stress: 0.5280 lb/ft^2 Calculated Avg Shear Stress: 0.2141 lb/ft^2

### Riprap Analysis: P18

Notes:

## **Input Parameters**

Riprap Type: Culvert Outlet Protection Flow: 10 cfs Culvert Diameter: 2 ft Normal Depth in Culvert: 1.48439 ft Tailwater Depth: 0.8 ft If tailwater is unknown, use 0.4D flow is sbcritical

#### **Result Parameters**

Tailwater Depth Used in Computations: 0.8 ft Culvert Diameter Used in Computations: 2 ft Computed D50: 2.53558 in

## **Riprap Class**

### **Riprap Name: CLASS I**

Riprap Class: I

The following values are an 'average' of the size fraction range for the selected riprap class.

d100: 12 in

d85: 9 in

d50: 6.5 in

d15: 4.5 in

## Layout Recommendations

Apron Length: 8 ft Apron Depth: 1.89583 ft Apron Width (at end): 11.3333 ft Name of Selected Channel: P18 No channel used in calculations

#### Channel Analysis: P14

Notes: Peak Discharge from P14 runoff (22 cfs)

#### **Input Parameters**

Channel Type: Circular Pipe Diameter: 3.0000 ft Longitudinal Slope: 0.0012 ft/ft Manning's n: 0.0100 Flow: 22.0000 cfs

#### **Result Parameters**

Depth: 1.9069 ft Area of Flow: 4.7400 ft^2 Wetted Perimeter: 5.5366 ft Hydraulic Radius: 0.8561 ft Average Velocity: 4.6414 ft/s Top Width: 2.8875 ft Froude Number: 0.6384 Critical Depth: 1.5088 ft Critical Velocity: 6.1786 ft/s Critical Slope: 0.0025 ft/ft Critical Top Width: 3.00 ft Calculated Max Shear Stress: 0.1428 lb/ft^2 Calculated Avg Shear Stress: 0.0641 lb/ft^2

### Riprap Analysis: P14

Notes:

## **Input Parameters**

Riprap Type: Culvert Outlet Protection Flow: 22 cfs Culvert Diameter: 3 ft Normal Depth in Culvert: 1.90695 ft Tailwater Depth: 1.2 ft If tailwater is unknown, use 0.4D flow is sbcritical

#### **Result Parameters**

Tailwater Depth Used in Computations: 1.2 ft Culvert Diameter Used in Computations: 3 ft Computed D50: 2.81684 in

## **Riprap Class**

### **Riprap Name: CLASS I**

Riprap Class: I

The following values are an 'average' of the size fraction range for the selected riprap class.

d100: 12 in

d85: 9 in

d50: 6.5 in

d15: 4.5 in

## Layout Recommendations

Apron Length: 12 ft Apron Depth: 1.89583 ft Apron Width (at end): 17 ft Name of Selected Channel: P14 No channel used in calculations

## Channel Analysis: BSP Channel Analysis

Notes: Surface runoff on cover of the BSP

Peak flow = 10 cfs

## Input Parameters

Channel Type: Custom Cross Section

## **Cross Section Data**

Elevation (ft)	Elevation (ft)	Manning's n
0.00	620.00	0.0973
3.00	619.00	0.0973
88.00	618.00	0.0973
186.00	619.00	0.0973
189.00	620.00	

Longitudinal Slope: 0.0050 ft/ft Flow: 10.0000 cfs

#### **Result Parameters**

Depth: 0.5038 ft Area of Flow: 23.2246 ft^2 Wetted Perimeter: 92.2021 ft Hydraulic Radius: 0.2519 ft Average Velocity: 0.4306 ft/s Top Width: 92.1966 ft Froude Number: 0.1512 Critical Depth: 0.2366 ft Critical Velocity: 1.9522 ft/s Critical Slope: 0.2815 ft/ft Critical Slope: 0.2815 ft/ft Calculated Max Shear Stress: 0.1572 lb/ft^2 Calculated Avg Shear Stress: 0.0786 lb/ft^2 Composite Manning's n Equation: Lotter method Manning's n: 0.0973

### **Channel Lining Analysis: BSP Channel Lining**

Notes:

#### **Lining Input Parameters**

Channel Lining Type: Vegetation Specific Weight of Water: 62.4 lb/ft^3 Height of Vegetation: 0.333 ft Vegetation Condition is good Growth Form of Vegetation is mixed Cf: 0.75 See HEC-15, Table 4.5 (default: 0.75 for Good cover factor and Mixed growth form) soil is noncohesive D75: 0.1 Safety Factor: 1

### **Lining Results**

Cn: 0.165205 Permissible Soil Shear Stress: 0.04 lb/ft^2 Mean Boundary Shear Stress: 0.0785891 lb/ft^2 Maximum Shear Stress on the Channel Bottom: 0.157188 lb/ft^2 Manning's n: 0.0973325 Soil Grain Roughness: 0.0177136 Effective Shear Stress: 0.0010619 lb/ft^2 Permissible Shear Stress on Vegetation: 4.83084 lb/ft^2 This value is compared with the maximum shear stress times the safety factor to determine lining stability

#### **Channel Bottom Shear Results**

channel bottom is stable

#### **Channel Lining Stability Results**

the channel is stable

#### **Channel Summary**

Name of Selected Channel: BSP Channel Analysis

## Channel Analysis: SSP1 Channel Analysis

Notes: Surface runoff on cover of the SSP1 from stormwater model 22 cfs (from P14)

## **Input Parameters**

Channel Type: Custom Cross Section

## **Cross Section Data**

Elevation (ft)	Elevation (ft)	Manning's n
0.00	615.00	0.0973
12.00	611.00	0.0973
172.00	610.00	0.0973
256.00	611.00	0.0973
268.00	615.00	

Longitudinal Slope: 0.0050 ft/ft Flow: 22.0000 cfs

#### **Result Parameters**

Depth: 0.6079 ft Area of Flow: 45.0812 ft^2 Wetted Perimeter: 148.3282 ft Hydraulic Radius: 0.3039 ft Average Velocity: 0.4880 ft/s Top Width: 148.3227 ft Froude Number: 0.1560 Critical Depth: 0.2891 ft Critical Velocity: 2.1583 ft/s Critical Slope: 0.2635 ft/ft Critical Slope: 0.2635 ft/ft Calculated Max Shear Stress: 0.1897 lb/ft^2 Calculated Avg Shear Stress: 0.0948 lb/ft^2 Composite Manning's n Equation: Lotter method Manning's n: 0.0973

### **Channel Lining Analysis: SSP1 Channel Lining**

Notes:

#### **Lining Input Parameters**

Channel Lining Type: Vegetation Specific Weight of Water: 62.4 lb/ft^3 Height of Vegetation: 0.333 ft Vegetation Condition is good Growth Form of Vegetation is mixed Cf: 0.75 See HEC-15, Table 4.5 (default: 0.75 for Good cover factor and Mixed growth form) soil is noncohesive D75: 0.1 Safety Factor: 1

### **Lining Results**

Cn: 0.165205 Permissible Soil Shear Stress: 0.04 lb/ft^2 Mean Boundary Shear Stress: 0.0785891 lb/ft^2 Maximum Shear Stress on the Channel Bottom: 0.157188 lb/ft^2 Manning's n: 0.0973325 Soil Grain Roughness: 0.0177136 Effective Shear Stress: 0.0010619 lb/ft^2 Permissible Shear Stress on Vegetation: 4.83084 lb/ft^2 This value is compared with the maximum shear stress times the safety factor to determine lining stability

#### **Channel Bottom Shear Results**

channel bottom is stable

#### **Channel Lining Stability Results**

the channel is stable

#### **Channel Summary**

Name of Selected Channel: BSP Channel Analysis



Attachment 6: INDOT Riprap Gradation



## **APPENDIX D** — INDOT COURSE AGGREGATE SIZE SPECIFICATIONS

0		Coarse Aggregate Sizes (Percent Passing)										
Sieve Sizes		Coarse Graded										
	2	5	8	9	11	12	43¹	91	53¹	73 ¹		
4 in. (100 mm)												
3½ in. (90 mm)												
2½ in. (63 mm)	100											
2 in. (50 mm)	80-100											
1½ in. (37.5 mm)		100					100		100			
1 in. (25 mm)	0-25	85-98	100				70-90	100	80-100	100		
¾ in. (19 mm)	0-10	60-85	75-95	100			50-70		70-90	90-100		
½ in. (12.5 mm)	0-7	30-60	40-70	60-85	100	100	35-50		55-80	60-90		
³ / ₈ in. (9.5 mm)		15-45	20-50	30-60	75-95	95-100						
No. 4 (4.75 mm)		0-15	0-15	0-15	10-30	50-80	20-40		35-60	35-60		
No. 8 (2.36 mm)		0-10	0-10	0-10	0-10	0-35	15-35		25-50			
No. 30 (600 Km)						0-4	5-20		12-30	12-30		
No. 200 (75 Km) ²							0-6		5-10	5-12		

Notes:

¹The liquid limit shall not exceed 25 (35 if slag) and the plasticity index shall not exceed 5. The liquid limit shall be determined in accordance with AASHTO T 89 and the plasticity index in accordance with AASHTO T 90.

 2  Includes the total amount passing the No. 200 (75 micrometers) sieve as determined by AASHTO T 11 and T 27.

## **APPENDIX D** — INDOT COURSE AGGREGATE SIZE SPECIFICATIONS

	Riprap Gradat	ion Requirem	ents (Percent	Smaller)	
Size, in. (mm)	Revetment	Class 1	Class 2	Uniform A	Uniform B
30 (750)			100		
24 (600)		100	85-100		
18 (450)	100	85-100	60-80		
12 (300)	90-100	35-50	20-40		
8 (200)				100	
6 (150)	20-40	10-30	0-20	35-80	95-100
3 (75)	0-10	0-10	0-10		35-80
1 (25)				0-20	0-20
			-	-	
Depth of Riprap, minimum	18 in. (450 mm)	24 in. (600 mm)	30 in. (750 mm)		



Attachment 7: NOAA Atlas 14





OGDEN DUNES Station ID: 12-6542 Location name: Portage, Indiana, USA* Latitude: 41.6167°, Longitude: -87.1833° Elevation: Elevation: Elevation (station metadata): 610 ft** * source: ESRI Maps ** source: USGS

NOAA Atlas 14, Volume 2, Version 3



G.M. Bonnin, D. Martin, B. Lin, T. Parzybok, M.Yekta, and D. Riley

NOAA, National Weather Service, Silver Spring, Maryland

PF_tabular | PF_graphical | Maps_&_aerials

## PF tabular

]	S-based point precipitation frequency estimates with 90% confidence intervals (in inches) ¹ Average recurrence interval (years)										
Duration	 1	2	5	Averaç 10	25	50	100	200	500	1000	
	0.367	0.434	0.516		0.674	0.746		0.884	0.979	1.05	
5-min	0.367 (0.329–0.411)			<b>0.588</b> (0.525-0.654)	<b>0.674</b> (0.600-0.749)		<b>0.814</b> (0.716-0.905)				
10-min	<b>0.571</b> (0.511-0.639)	<b>0.677</b>	<b>0.802</b> (0.717-0.893)	<b>0.908</b> (0.811-1.01)	<b>1.03</b> (0.917–1.15)	<b>1.13</b> (1.00–1.26)	<b>1.23</b> (1.08–1.36)	<b>1.32</b> (1.15–1.47)	<b>1.44</b> (1.25–1.61)	<b>1.54</b> (1.32–1.72)	
15-min	0.699	<b>0.828</b> (0.741–0.924)	0.985	<b>1.12</b> (0.998–1.24)	<b>1.27</b> (1.13–1.42)	<b>1.40</b> (1.24–1.56)	<b>1.52</b> (1.34–1.69)	<b>1.64</b> (1.44–1.83)	<b>1.80</b> (1.56–2.01)	<b>1.92</b> (1.65–2.15)	
30-min	0.925	1.11	1.35	1.55	1.80	2.00	2.20	2.40	2.66	2.88	
	(0.829–1.04)	(0.992–1.24) <b>1.36</b>	(1.21–1.50) <b>1.69</b>	(1.39–1.72) <b>1.97</b>	(1.60-2.00) <b>2.33</b>	(1.77-2.22) <b>2.64</b>	(1.93–2.44) <b>2.94</b>	(2.10-2.67) <b>3.25</b>	(2.30–2.97) <b>3.68</b>	(2.47-3.23) <b>4.04</b>	
60-min	(1.01-1.26)	(1.22-1.52)	(1.51-1.89)	(1.76-2.19)	(2.08-2.59)	(2.33-2.93)	(2.59-3.27)	(2.84-3.62)	(3.19–4.11)	(3.47-4.53)	
2-hr	<b>1.31</b> (1.17–1.46)	<b>1.58</b> (1.41–1.76)	<b>2.01</b> (1.79–2.23)	<b>2.37</b> (2.11–2.63)	<b>2.85</b> (2.53-3.16)	<b>3.26</b> (2.88–3.61)	<b>3.68</b> (3.22-4.08)	<b>4.12</b> (3.58–4.57)	<b>4.72</b> (4.07–5.25)	<b>5.22</b> (4.46–5.83)	
3-hr	<b>1.41</b> (1.26–1.58)	<b>1.71</b> (1.53–1.91)	<b>2.17</b> (1.94–2.42)	<b>2.58</b> (2.29–2.88)	<b>3.11</b> (2.76–3.46)	<b>3.57</b> (3.15–3.97)	<b>4.03</b> (3.54-4.49)	<b>4.53</b> (3.94–5.04)	<b>5.22</b> (4.49–5.83)	<b>5.79</b> (4.94–6.48)	
6-hr	<b>1.68</b> (1.48–1.91)	<b>2.03</b> (1.79–2.31)	<b>2.60</b> (2.29–2.96)	<b>3.12</b> (2.74–3.55)	<b>3.83</b> (3.34–4.35)	<b>4.46</b> (3.87–5.06)	<b>5.13</b> (4.41–5.81)	<b>5.85</b> (4.98-6.63)	<b>6.89</b> (5.78–7.83)	<b>7.80</b> (6.46-8.88)	
12-hr	<b>1.96</b> (1.73–2.22)	<b>2.36</b> (2.09–2.68)	<b>3.00</b> (2.65–3.40)	<b>3.58</b> (3.15–4.05)	<b>4.37</b> (3.83–4.94)	<b>5.07</b> (4.41–5.71)	<b>5.81</b> (5.01–6.54)	<b>6.61</b> (5.65–7.44)	<b>7.75</b> (6.53–8.75)	<b>8.73</b> (7.27–9.89)	
24-hr	<b>2.28</b> (2.05–2.56)	<b>2.77</b> (2.49–3.12)	<b>3.58</b> (3.20–4.02)	<b>4.24</b> (3.77–4.76)	<b>5.21</b> (4.59–5.83)	<b>6.02</b> (5.28–6.74)	<b>6.90</b> (5.99–7.72)	<b>7.85</b> (6.75–8.80)	<b>9.24</b> (7.82–10.4)	<b>10.4</b> (8.68–11.7)	
2-day	<b>2.67</b> (2.44–2.94)	<b>3.23</b> (2.95–3.56)	<b>4.08</b> (3.72–4.49)	<b>4.77</b> (4.34–5.24)	<b>5.78</b> (5.22-6.35)	<b>6.61</b> (5.93-7.28)	<b>7.51</b> (6.67-8.28)	<b>8.47</b> (7.43-9.39)	<b>9.84</b> (8.48–11.0)	<b>11.0</b> (9.31–12.4)	
3-day	<b>2.86</b> (2.62–3.12)	<b>3.44</b> (3.15–3.76)	<b>4.29</b> (3.93-4.69)	<b>4.99</b> (4.56–5.45)	<b>5.99</b> (5.43-6.54)	<b>6.81</b> (6.13-7.46)	<b>7.69</b> (6.86-8.44)	<b>8.62</b> (7.61–9.50)	<b>9.95</b> (8.63–11.1)	<b>11.0</b> (9.44–12.5)	
4-day	<b>3.04</b> (2.80-3.30)	<b>3.64</b> (3.35–3.95)	<b>4.51</b> (4.14–4.89)	<b>5.21</b> (4.78–5.66)	<b>6.20</b> (5.65–6.73)	<b>7.01</b> (6.34–7.64)	<b>7.87</b> (7.05-8.60)	<b>8.77</b> (7.79–9.62)	<b>10.1</b> (8.79–11.1)	<b>11.1</b> (9.57–12.5)	
7-day	3.57	4.25	5.14	5.85	6.84	7.63	8.44	9.27	10.4	11.3	
	(3.32–3.83) <b>4.08</b>	(3.96-4.56) <b>4.84</b>	(4.78–5.52) <b>5.81</b>	(5.43–6.28) <b>6.61</b>	(6.31–7.34) <b>7.73</b>	(7.00-8.20) <b>8.64</b>	(7.70-9.10) <b>9.59</b>	(8.39–10.0) <b>10.6</b>	(9.31–11.3) <b>12.0</b>	(10.0-12.6) <b>13.1</b>	
10-day	(3.78-4.43)	(4.48-5.26)	(5.37-6.32)	(6.09-7.19)	(7.06-8.40)	(7.85-9.41)	(8.64-10.5)	(9.43-11.6)	(10.5-13.2)	(11.3-14.5)	
20-day	<b>5.52</b> (5.16-5.95)	<b>6.53</b> (6.09-7.02)	<b>7.68</b> (7.16-8.26)	<b>8.59</b> (7.98-9.23)	<b>9.80</b> (9.07–10.5)	<b>10.7</b> (9.89–11.6)	<b>11.7</b> (10.7–12.6)	<b>12.6</b> (11.5-13.7)	<b>13.8</b> (12.5–15.1)	<b>14.7</b> (13.2–16.1)	
30-day	<b>6.82</b> (6.44-7.24)	<b>8.03</b> (7.57-8.52)	<b>9.29</b> (8.75–9.86)	<b>10.2</b> (9.62–10.9)	<b>11.4</b> (10.7–12.1)	<b>12.3</b> (11.5–13.1)	<b>13.1</b> (12.2–14.0)	<b>13.9</b> (12.8–14.8)	<b>14.8</b> (13.6–15.9)	<b>15.5</b> (14.2–16.7)	
45-day	<b>8.56</b> (8.14–9.01)	<b>10.0</b> (9.53–10.5)	<b>11.4</b> (10.8–12.0)	<b>12.4</b> (11.8–13.0)	<b>13.6</b> (12.9–14.3)	<b>14.5</b> (13.7–15.3)	<b>15.2</b> (14.4–16.1)	<b>15.9</b> (15.0–16.9)	<b>16.8</b> (15.8–17.8)	<b>17.4</b> (16.2–18.5)	
60-day	<b>10.2</b> (9.73–10.7)	<b>12.0</b> (11.4–12.6)	<b>13.6</b> (13.0–14.3)	<b>14.8</b> (14.1–15.6)	<b>16.3</b> (15.5–17.1)	<b>17.4</b> (16.5–18.3)	<b>18.3</b> (17.3–19.3)	<b>19.2</b> (18.1–20.3)	<b>20.3</b> (19.0–21.5)	<b>21.0</b> (19.6–22.4)	

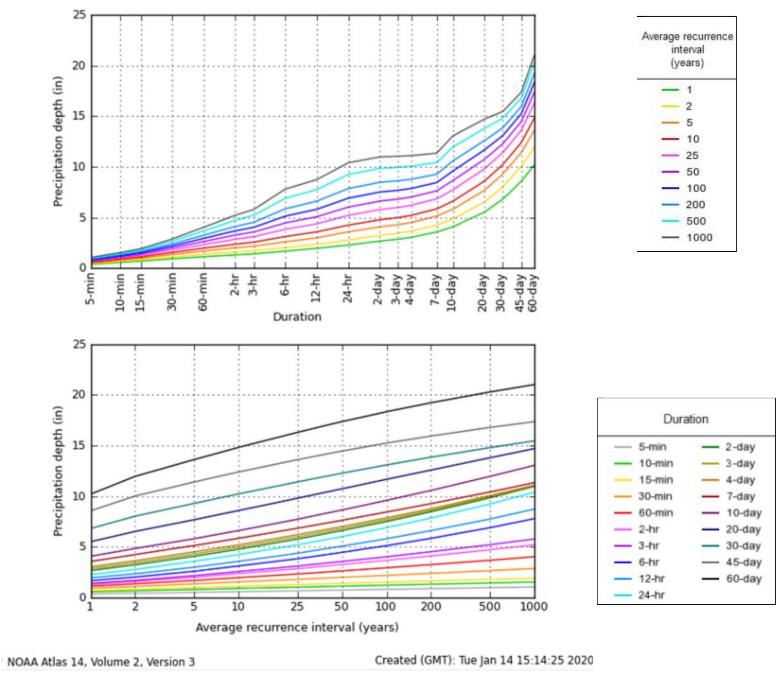
Numbers in parenthesis are PF estimates at lower and upper bounds of the 90% confidence interval. The probability that precipitation frequency estimates (for a given duration and average recurrence interval) will be greater than the upper bound (or less than the lower bound) is 5%. Estimates at upper bounds are not checked against probable maximum precipitation (PMP) estimates and may be higher than currently valid PMP values. Please refer to NOAA Atlas 14 document for more information.

https://hdsc.nws.noaa.gov/hdsc/pfds/pfds_printpage.html?st=in&sta=12-6542&data=depth... 1/14/2020

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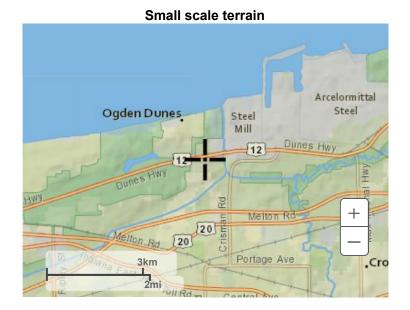
# **PF graphical**

PDS-based depth-duration-frequency (DDF) curves Latitude: 41.6167°, Longitude: -87.1833°





# Maps & aerials



Large scale terrain Racine Kenosha Waukegan Kalamazo ford Portage Chicago South Bend Aurora Gary +Fort oria 100km 60mi Kokomo ett



# Precipitation Frequency Data Server



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US Department of Commerce National Oceanic and Atmospheric Administration National Weather Service National Water Center 1325 East West Highway Silver Spring, MD 20910 Questions?: HDSC.Questions@noaa.gov

**Disclaimer** 

# Appendix D



# NIPSCO CCR Surface Impoundment Closures – Construction Quality Assurance Plan

Northern Indiana Public Service Company, LLC, Merrillville, Indiana

#### **Prepared for:**

Northern Indiana Public Service Company, LLC Merrillville, Indiana

#### **Prepared by:**

Wood Environment & Infrastructure Solutions, Inc. 11003 Bluegrass Parkway Suite 690 Louisville, Kentucky 40299 USA T: 502-267-0700

1/20/2021







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#### List of acronyms

ASTM	American Society for Testing and Materials
BGS	Bailly Generating Station
CCR	coal combustion residuals
CFR	Code of Federal Regulations
CQA	Construction Quality Assurance
CQA/CQC	Construction Quality Assurance/Construction Quality Control
CQAP	Construction Quality Assurance Plan
CQC	Construction Quality Control
cm/sec	centimeters per second
FTMS	Federal Test Method Standards
HASP	Health and Safety Plan
HDPE	high density polyethylene
IAC	Indiana Administrative Code
IDEM	Indiana Department of Environmental Management
INDOT	Indiana Department of Transportation
k	permeability
mm	millimeters
N/A	not applicable
NIPSCO	Northern Indiana Public Service Company, LLC
NPDES	National Pollutant Discharge Elimination System
PPI	Plastic Pipe Institute
psi	pounds per square inch
QA/QC	Quality Assurance/Quality Control
RMSGS	Rollin M. Schahfer Generation Station
SDR	Standard Dimension Ratio
SI	International System of Units
%	percent

# 1.0 Introduction

This Construction Quality Assurance Plan (CQAP) is being submitted as part of the Northern Indiana Public Service Company, LLC (NIPSCO) Surface Impoundment Closure Application (Closure Application). This CQAP was prepared accounting for the relevant sections of 40 Code of Federal Regulations (CFR) Part 257, Subpart D – Standards for the Disposal of Coal Combustion Residuals in Landfills and Surface Impoundments (40 CFR Part 257) pertaining to construction quality assurance and quality control (QA/QC) and 329 Indiana Administrative Code (IAC) Article 10. Solid Waste Land Disposal Facilities, Rule 17. Municipal Solid Waste Landfill Liner System; Design, Construction, and CQA/CQC Requirements (329 IAC 10-17) as related to QA/QC for surface impoundment closure implementation.

The purpose of this CQAP is to present the principles and practices of quality management that will be implemented during construction of the engineered components of the Bailly Generating Station (BGS) coal combustion residuals (CCR) surface impoundments (hereinafter refer to as "surface impoundments") closures including, but not limited to, the following:

- CCR material excavation
- Embankment grading
- Soil cover placement
- Topsoil cover
- Vegetation
- High density polyethylene (HDPE) pipe

Quality management involves the performance of both QA/QC activities to verify that the construction meets the design criteria, plans, and specifications.

#### **1.1** Definitions and use of terms

The following provides general information regarding specific terms, references, and units as used in this CQAP.

#### **1.1.1** Definitions relating to construction quality assurance

Construction Quality Assurance and Construction Quality Control are defined as follows:

- Construction Quality Assurance (CQA): A planned and systematic pattern of means and actions designed to provide adequate confidence that items or services meet contractual and regulatory requirements and will perform satisfactorily in service
- Construction Quality Control (CQC): Those actions that provide a means to measure and regulate the characteristics of an item or service to contractual and regulatory requirements

#### 1.1.2 Use of terms

The terms CQA and CQC are used as follows:

- CQA refers to means and actions employed by the CQA Consultant to assess conformity of construction with the CQAP, drawings, and specifications. The CQA Consultant is a party independent from the Owner and Contractors
- CQC refers to those actions taken by the manufacturer, supplier, and contractor to meet the requirements for materials and workmanship as stated in the CQAP, drawings, and specifications

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#### **1.1.3** References to standards

This CQAP includes references to test procedures of the ASTM International, the Federal Test Method Standards (FTMS), and other relevant guidelines.

#### **1.1.4 Units**

Properties and dimensions given in this CQAP are expressed in Standard U.S. units and/or the International System of Units (SI).

## 2.0 Project background

The surface impoundments closure project consists of designing, permitting, and implementing the closure associated with each individual surface impoundment at the BGS:

**BGS Surface Impoundments:** 

- Boiler Slag Pond
- Primary Settlement Pond No. 1
- Primary Settlement Pond No. 2
- Secondary Settlement Pond No. 1

The objective of this CQAP is to outline the construction monitoring and testing program that documents that the closure of the surface impoundments was implemented in general accordance with the permitted design and Closure Application.

The surface impoundments closure construction includes a combination of earthwork and pipeline construction. The surface impoundments will be closed using the following method:

• Closure by removal

Closure by removal includes excavation of the existing CCR materials including liner system(s), if present, and disposal of the excavated CCR materials and liner materials in a licensed disposal facility permitted to accept the CCR materials and liner materials. The excavated CCR materials and liner materials from the surface impoundments will be transported and disposed of in the NIPSCO Rollin M. Schahfer Generating Station (RMSGS) onsite CCR landfill. The footprint of the surface impoundments will be over excavated both in the lateral and vertical direction to obtain any potentially impacted soils lying beneath and adjacent to the surface impoundments footprint. The excavation area will be graded promoting surface water runoff and eliminating the accumulation of surface water within the excavation area by using Owner-approved off-site cover soil overlain by topsoil material to the final elevations and grades. The topsoil material will be vegetated with pollinator habitat vegetation.

The following CQAP sections define the roles and responsibilities of the CQA project team and the CQA requirements for construction elements.

## 3.0 Project team and responsibilities

#### 3.1 Owner

NIPSCO is the project Owner with overall responsibility for the project and will maintain the contractual relationships with the appropriate project team members. This responsibility includes compliance with the approved Closure Application and the submission of CQA documentation demonstrating that the surface impoundments closure was constructed in conformance with the drawings and specifications.



The Owner has the authority to select and dismiss parties charged with design, CQA, and construction activities. The Owner also has the authority to accept or reject design plans and specifications, CQAP, reports and recommendations of the CQA Consultant, and the materials and workmanship of contractors.

### 3.2 CQA project team

The CQA Project Team will oversee the construction of the surface impoundments closure and will provide certification of the closure construction. The CQA Project Team will report to the Owner's Project Manager who will manage the overall execution of the project. An organization chart depicting the CQA Project Team relationships is provided as Figure 1 in the Figures section of the CQAP.

#### 3.2.1 CQA project manager

The CQA Project Manager is an official representative of the Owner and is responsible for oversight of the CQA field activities. The CQA Project Manager works with the Owner's Project Manager related to communications between the Owner, Design Engineer, CQA Engineer, and Contractor. The CQA Project Manager can be the Design Engineer or the CQA Engineer.

#### 3.2.2 Design engineer of record

The Design Engineer of Record (Engineer) is responsible for defining quality assurance requirements compatible with the project objectives, reviewing and approving shop drawings, reviewing and approving submittals, outlining procedures for the analysis of test data, and preparing quality assurance memorandums and quality assurance reports. The Engineer is responsible for design changes (as approved by the Indiana Department of Environmental Management (IDEM), when applicable), clarifications, and specification addenda. The Engineer also has the ultimate responsibility for approving or disapproving elements of the project. The responsibility to stop work is held by the Owner. CQA documents will be prepared, signed and sealed by the Engineer assuming the CQA firm is the same as the design firm. The Engineer will review field and laboratory test data on a regular basis. The Engineer will be a registered Professional Engineer in the State of Indiana and will report to the Owner.

#### 3.2.3 Construction quality assurance engineer

The Construction Quality Assurance Engineer (CQA Engineer) will be experienced in quality assurance testing and monitoring. The CQA Engineer will report to the CQA Project Manager and can be one in the same entity. The CQA Engineer serves as the on-site representative of the Owner and is responsible for the field construction of the approved quality assurance program as follows:

- Scheduling, coordinating, and performing CQA activities
- Performing independent on-site observation of the work in progress to assess compliance with drawings and specifications
- Monitor the quality assurance activities of the field testing and document conformance with test procedures and the Technical Specifications
- Recording and maintaining test data accurately
- Inform the Engineer of quality assurance activities and non-conformance to the approved CQA program, if any
- Observe that sample handling procedures are in accordance with the appropriate guidelines for the testing to be conducted



- Organize, assign, and direct engineering technicians
- Maintain an awareness of the overall field-testing operations to identify conditions that may jeopardize the quality of testing
- Documenting that corrective measures are implemented
- Documenting and reporting CQA activities
- Collecting data needed for CQA documentation
- Maintaining open lines of communications with the other parties involved in the construction

#### 3.2.4 Engineering technicians

The engineering technicians (technicians) are responsible for field observations and testing at the direction of the CQA Engineer. Technicians will be assigned to the project as deemed necessary by the CQA Engineer. The CQA Engineer may perform and conduct field observations and testing himself. Technicians will be under the direct supervision of the CQA Engineer.

#### 3.3 Contractor

The Contractor is the organization who the Owner has entered into a contractual agreement to complete the closure construction. The Contractor and his subcontractor(s) will be responsible for providing materials, labor, and equipment to complete the scope of work as defined in the contract documents. Often, the Contractor is responsible for earthwork and general overall construction activities.

#### 3.3.1 Pipe installer

The Pipe Installer is responsible for unloading from shipment, storage, field handling, placing, joining, field testing, temporarily securing (against flotation), and other aspects of the pipe installation. The Pipe Installer is also responsible for the excavation and backfilling of the trench excavation. The Pipe Installer may be the Contractor.

#### 4.0 **Project meetings**

To achieve a high degree of quality during the surface impoundments closure construction, clear, open channels of communication are essential. To facilitate communication, several meetings will be held before construction is initiated and throughout the construction performance. These meetings are discussed in the following sections.

#### 4.1 **Pre-construction meeting**

A Pre-Construction Meeting will be conducted prior to the start of construction at the BGS site. The Pre-Construction Meeting will be attended by the Owner, the Engineer, the CQA Engineer, the Contractor, and subcontractors who the Contractor deems necessary to attend. The meeting will include, but not be limited to, discussion of:

- Health and safety
- Review the CQAP
- Construction management organization including lines of authority and communication
- Respective duties and responsibilities of the construction management organization and the Contractor(s)

- Distribute the project documents e.g., final copy of the Project specifications and drawings, final copy of the CQAP; Site Specific Health and Safety Plan (HASP), air permit(s), surface water permit(s), NPDES permits, etc.
- Review procedures for documentation and reporting including distribution of documents and reports
- Proposed construction schedule
- Testing requirements and procedures
- Establish protocols for handling deficiencies, repairs, and re-testing
- Review repair procedures
- Periodic reporting requirements for test results and construction activities
- Conduct a site walkthrough to discuss the construction activities including the Contractor's staging area(s) and material storage/stockpile locations

The CQA Engineer will take minutes of the meeting and prepare a draft meeting summary for distribution to the meeting participants. The meeting participants will have the opportunity to review the draft meeting summary for providing comments. The CQA engineer will revise, as appropriate, the draft meeting summary and distribute the final meeting summary to the meeting participants.

#### 4.2 **Progress meetings**

Progress meetings will be held on a regular basis (schedule i.e., weekly, biweekly, etc. to be determined by the Owner's Project Manager and the Contractor based on construction progress, difficulties, etc.), and as needed, between the Owner, Engineer, CQA Project Manager, CQA Engineer, Contractor, and representatives of other involved parties. The meetings will include, but not be limited to, discussion of:

- Health and safety
- Status of the project i.e., work activities completed during the previous work period
- Scheduled activities i.e., work planned for the next work period
- Project schedule
- Changes to the project scope
- Comments/questions including resolutions

The CQA Engineer will take minutes of the progress meetings and prepare a draft meeting summary for distribution to the progress meeting participants. The progress meeting participants will have the opportunity to review the draft meeting summary for providing comments. The CQA Engineer will revise, as appropriate, the draft meeting minutes. The status of the project, scheduled activities, and construction related subjects will be discussed.

#### 4.3 **Troubleshooting meetings**

If problems develop or should deficiencies arise during construction, troubleshooting meetings will be held between the Owner, Engineer, the CQA Engineer, the Contractor, and representatives of other involved parties. If the problem or deficiency involves or may involve a design change/modification, the Design Engineer should attend the meeting. The following will be discussed at the meeting:

• Define the problem(s)



- Review alternative(s) to correct the problem(s)
- Discuss a resolution and reach an agreement by all parties

The CQA Engineer will take minutes of the meetings and prepare a draft meeting summary for distribution to the meeting participants. The meeting participants will have the opportunity to review the draft meeting summary for providing comments. The CQA Engineer will revise, as appropriate, the draft meeting summary and distribute the final meeting summary to the meeting participants.

#### 5.0 Excavation

Excavation of CCR materials for the closure by removal option will be performed by the Contractor. The Contractor will perform the excavation activities as described in the Contractor's Excavation Plan approved by the CQA Engineer.

#### 5.1 Material

The CCR material will be existing CCR disposed/placed in the surface impoundments in the normal course the BGS operations. The excavation materials may also include the bottom liner materials consisting of blast furnace slag, sand, and clay soil for those surface impoundments having a constructed bottom liner. The geomembrane component of the bottom liner will be segregated and taken to an off-site disposal facility permitted to accept the geomembrane material.

These materials are expected to be granular in texture with various gradations present throughout.

#### 5.2 Excavation

The CCR material will be excavated to the lines and grades shown on the drawings. The excavation will, at a minimum, include the identified CCR materials and the bottom liner materials. The Contractor will place the excavated material in end dump trucks or roll-off boxes equipped with liners capable of being covered for transportation to the RMSGS onsite landfill.

The Contractor will not perform the excavation activity in a manner that could cause over-excavation of the excavation area(s). Additional excavation may be required if visual observation indicates that additional material needs to be removed from the excavation area(s). This additional excavation will be performed by the Contractor only when directed by the CQA Engineer under the approval of the Owner. Unauthorized excavation will be corrected by the Contractor.

#### 5.3 **Observations**

The CQA Engineer or the CQA Engineer's representative will observe and document the excavation activities. The observations will include, but not be limited to, proper excavation depth, excavation from the designated excavation area(s), lateral and vertical over-excavation, over-excavation repairs, etc. The CQA Engineer or the CQA Engineer's representative will observe the placement of the excavation materials into the trucks/roll-off boxes for transportation to the RMSGS onsite landfill. Paperwork (bill of lading, manifests, etc.) associated with each load of excavated material transported to the RMSGS onsite landfill will be collected by the CQA Engineer or the CQA Engineer's representative.

#### 6.0 Final cover

The final cover is Owner-approved off-site borrow soil material placed to achieve the proposed final contours for the former surface impoundments area closed by removal. The final cover contours will be constructed and compacted to the lines and grade shown on the drawings.

The thickness of the final cover will be verified by the CQA Engineer to determine adequate coverage.

#### 6.1 Material

The final cover consists of soil from the embankments of the former surface impoundments and Owner-approved off-site borrow soil material that meets the project specifications and that is free of organic material, refuse, or debris. The final cover contours will be constructed and compacted to the lines and grades shown on the drawings.

#### 6.2 Construction

The onsite soil material will be obtained from grading the soil material in the embankments of the former surface impoundments designated as cut areas and from Owner-approved off-site soil borrow source(s). The soil material from the embankments will be graded to the interior of the former surface impoundments area to the lines and grades shown on the final grading plan. Off-site soil borrow material will augment the embankment soil material.

Off-site borrow soil material will be approved in advance by the Owner. Final acceptance is based on successful completion of CQA testing outlined herein and in the Technical Specifications. Such testing can be performed either during excavation and stockpiling or from existing stockpiles prior to use.

The procedure for testing during excavation and stockpiling is outlined as follows:

- Each load of soil will be examined either at the borrow source or the stockpile area. Unsuitable material will be routed to separate stockpiles consistent with the unsuitable material end use.
- During stockpiling operations, one bulk sample will be collected for every 20,000 cubic yards of material stockpiled and tested.

Approval reports of the material to be used as soil cover will be prepared by the Contractor and will include a summary of laboratory test data; a drawing showing sample and test locations and limits of stockpile or borrow area investigated; and a summary of construction, sampling and testing methods, and recommendations.

The soil material will be graded/placed and compacted in lifts not exceeding 12 inches in compacted thickness. The Engineer may modify maximum allowable lift thickness depending on soil type used, construction equipment, and methods employed.

The Contractor will make the required efforts to obtain the required compaction. The number of passes required by the compactor will be evaluated based on the results of the field compaction tests. One pass is defined as a compactor drum passing over a location one time.

The measured in-place dry density immediately after soil material compaction will equal or exceed 95 percent of the maximum Standard Proctor dry density from the most recent representative Standard Proctor curve developed for the soil material in the existing embankments and from the soil borrow source. The measured in-place dry density and moisture content will then be compared to the most representative moisture-density-permeability comparison test to approximate the in-situ permeability at that location.

Nuclear density methods are preferred for all density testing. Nuclear density test locations will be determined by the on-site monitor with consideration given to evenly distributing the test locations over the constructed lift and as directed by the Engineer or CQA Engineer.

#### 6.3 **Observations**

Prior to soil material placement, the base surface or surface of the previous lift will be observed. Soils will be monitored to evaluate that the materials are free of deleterious materials and meet the

specification requirements. During soil material placement, observations of lift thickness and uniform mixing of soils will be performed.

#### 6.4 Testing

Testing of the soil material will consist of both in-place and laboratory testing described as follows.

#### 6.4.1 Laboratory testing

Bulk samples of the borrow soils will be retained for each 20,000 cubic yards of soil placed. The Engineer may modify the number of bulk samples needed depending on the variability of the soils being placed. Laboratory testing will include, but not be limited, to the tests presented in Table 1 - Geotechnical Laboratory Testing Requirements for the common borrow soil materials.

#### 6.4.2 In-place testing

In-place field density and moisture content tests will be performed as shown in Table 2 - In-Place Field Density Testing Requirements. Where multiple test methods are listed, only one test method need be used.

Required field density and moisture content tests will be completed before the overlying lift of soil is placed. The surface preparation (e.g. wetting, drying, scarification, etc.) will be completed prior to placement of subsequent fill lifts.

# 7.0 Topsoil

Topsoil material will be placed over the soil material associated with the closure by removal. The topsoil will be at least six-inches thick. The thickness of the topsoil will be verified by the Contractor to determine adequate coverage.

#### 7.1 Material

The topsoil will consist of off-site materials which are loose, friable, natural loam, sandy loam, silty loam, or clay loam humus-bearing soil that is free of stones one inch or greater in overall dimension, admixture of subsoil, refuse, stumps, roots, brush, weeds, and other material that prevent the formation of a suitable seed bed.

#### 7.2 Construction

The topsoil will be placed in one lift in a method to be approved by the Engineer. The CQA Engineer will monitor the topsoil placement.

The surface of the underlying soil material will be scarified to provide a surface to which the topsoil can bond when placed. Only use equipment to place, spread, and compact the topsoil that produces ground pressures compliant with the minimum thickness presented in Table 3 – Equipment/Cover Soil or Topsoil Material Requirements.

#### 7.3 Testing

The topsoil testing will consist of the laboratory and in-place testing described as follows.

#### 7.3.1 Laboratory testing

Bulk samples of the topsoil will be retained for each 3,000 cubic yards of material placed. The CQA Engineer may reduce or increase the number of bulk samples needed depending on the variability of



the topsoil being used. Laboratory testing will include, but not be limited to, the tests presented in Table 1 – Geotechnical Laboratory Testing Requirements.

#### 7.3.2 In-place testing

In-place testing of topsoil is not required. However, the CQA Engineer or the CQA Engineer's representative will monitor the topsoil placement.

# 8.0 HDPE pipe

HDPE pipe will be installed for the surface water management system associated with the surface impoundments closure.

#### 8.1 Material

The HDPE pipe consists of perforated and non-perforated HDPE piping ranging in sizes indicted on drawings manufactured from resin that meets or exceeds the requirements of the Plastic Piping Institute (PPI) designation PE 4710 and meets the specifications of ASTM D3350-08 with a cell classification of PE: 445574C. Pipe wall thicknesses are specified in terms of the standard dimension ratio (SDR) as indicated in the Technical Specifications and shown on the drawings.

#### 8.2 HDPE pipe manufacturer and contractor submittals

The supplier of the HDPE pipe will provide the CQA Engineer with the manufacturer's Technical Specifications and quality control information.

### 8.3 HDPE pipe installation

The HDPE pipe will be installed to the lines and grades shown on the drawings. Butt fusion welding of the pipe will be monitored by the CQA Engineer or the CQA Engineer's representative.

Butt fusion welds will exhibit a uniform melt bead. The melt bead will be removed or reamed from the interior of the pipe prior to placement.

Pressure testing of the HDPE pipelines will be performed by the Contractor and observed by the CQA Engineer or the CQA Engineer's representative. The pressure and time at the beginning and end of the test will be recorded for each section of pipe tested. The Contractor will repair pipe sections not meeting the test requirements.

#### 8.4 Acceptance and closeout procedures

The Contractor is responsible for providing record drawing(s) of the completed HDPE pipe installation. The record drawing(s) will include pipe locations to identify the position of the pipe. Survey timing should be coordinated with the Contractor and the CQA Engineer so as not to impact the construction schedule of the overlying materials.

# 9.0 Aggregates

Aggregate materials will be used as bedding material and pipe, manholes or concrete structures backfill material. The CQA Engineer or the CQA Engineer's representative will observe and document the aggregate use and placement.



Delivery tickets from the aggregate supplier will be collected for each load of aggregate delivered to the BGS site. The CQA Engineer or the CQA Engineer's representative will verify the aggregate materials are as specified and record the total volume of aggregate materials used.

#### 9.1 Material

The aggregate materials will be granular and coarse aggregate bedding material. The granular bedding material will consist of imported material free of any metals, roots, trees, stumps, concrete, construction debris, or any organic matter or deleterious material meeting the requirements of the Indiana department of Transportation (INDOT) 2018 Standard Specifications, Section 904.03 Coarse Aggregates.

The coarse aggregate bedding material will consist of imported material free of any metals, roots, trees, stumps, concrete, construction debris, or any organic matter or deleterious material meeting the requirements of the INDOT 2018 Standard Specifications, Section 904.03e Sizes of Coarse Aggregates specifically, Gradation Size No. 9.

The aggregate materials will be natural, rounded, crushed, non-carbonate stone.

The Contractor will collect samples for every 3,000 cubic yards of aggregate bedding materials used for geotechnical testing performed as specified in Table 1. Geotechnical Laboratory Testing Requirements. The aggregate material test results will be submitted to the CQA Engineer for approval before any of the aggregate material is delivered to the BGS site.

#### 9.2 Trench bedding material

The aggregate bedding material will be placed below the barrel of the pipe and the manhole/precast concrete structure base. The aggregate material will be placed and compacted in minimum six-inch lifts around and above the pipe and the manhole/precast concrete structures for the full width of the trench/excavation.

#### 9.3 Field quality control

The CQA Engineer or the CQA Engineer's representative will visually observe and document the proper placement and compaction of the aggregate materials used in the bedding and backfilling of pipelines and/or manhole/precast concrete structures.

#### 9.4 Acceptance and closeout procedures

The Contractor is responsible for providing record drawing(s) of the completed aggregate bedding material locations. The record drawing(s) will include locations to identify where the aggregate bedding material was used. Survey timing should be coordinated with the Contractor and the CQA Engineer so as not to impact the construction schedule of the overlying materials.

# 10.0 Record drawings

The Contractor will retain a third-party surveyor registered in the State of Indiana. The Contractor will be responsible for submitting to the Engineer the following:

- Existing Conditions Survey
- Excavation Survey



- Final Soil Material Placement Survey
- Topsoil Survey
- Installed surface water piping elevations and locations
- Material certification and warranty information for installed material

The final soil material and topsoil topographic surveys will be performed on a grid no greater than 200-feet in dimension with berms, toes, crests and breaks-in-slope also surveyed. Topographic surveys will be performed on the same grid such that survey point locations are consistent with the survey points of the underlying layer. Surveys will also include a table summarizing northings, eastings, and elevations for each grid point to provide a comparison for thickness verification. Surveys will also show contours of the completed surface at one-foot contour intervals.

Locations and details for construction of the surface water management system will also be submitted to the Engineer by the Contractor. Drawings will include pipe locations within and outside the former surface impoundments footprint to adequately identify the position of the pipe. Survey timing should be coordinated with the Contractor and the CQA Engineer so as not to impact the construction schedule of the overlying materials.

# **11.0** Certification report

The CQA Engineer will prepare a Certification Report upon completion of the surface impoundments closure construction for certification by the Engineer of Record; a registered Indiana Professional Engineer. The Certification Report will contain test results and monitoring documentation performed for construction including:

- Limits of CCR material removal
- Top of cover soil
- Top of topsoil
- Compacted soil material, berms, roadways and surface water control structures

Portions of the above items may be submitted to IDEM as individual certification reports during construction. Following construction, the individual certification reports will be compiled into one Certification Report for the final closure submittal.

Record drawings and a comprehensive narrative of the construction process and CQA activities, including daily reports from the CQA Engineer and documentation of progress meetings, will be included with the Certification Report. Color photographs of key elements for the surface impoundments closure construction will also be included in the Certification Report.

Figures

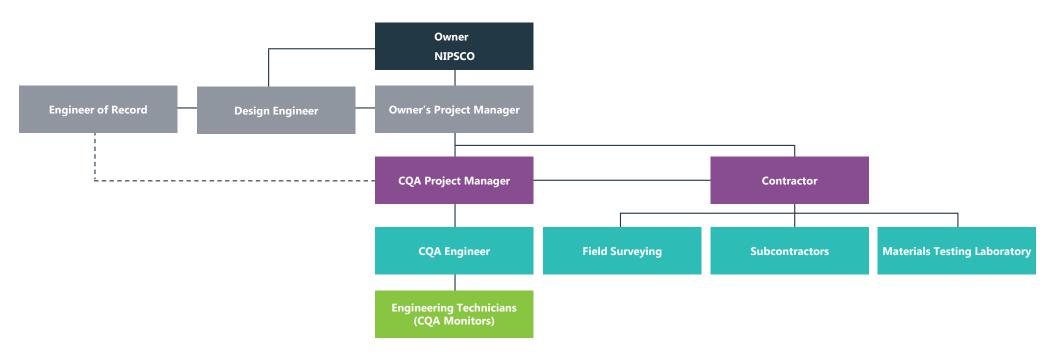


Figure 1: Draft CCR Surface Impoundments CQA Organization Chart Construction Quality Assurance Plan, Bailly Generating Station

Tables

#### Table 1: GEOTECHNICAL LABORATORY TESTING REQUIREMENTS

#### NIPSCO CCR Surface Impoundments Closures, Construction Quality Assurance Plan

Test Method	Title	Minimum Frequency	Acceptance Criteria
Soil back fill material			
ASTM D422-63(2007)	Standard Test Method for Particle Size Analysis	1 per 20,000 cubic yards	100% ≤ 6-inches; 90% ≤ 2-inches; 50% ≤ No. 4 sieve; 20% ≤ 0.002 mm
ASTM D1557-07	Standard Test Method for Laboratory Compaction Characteristics of Soil Using Standard Effort	1 per 20,000 cubic yards	N/A
ASTM D2216-05	Standard Test Methods for Laboratory Determination of Water (Moisture) Content of Soil and Rock by Mass	1 per 20,000 cubic yards	N/A (not excessively wet)
ASTM D2487-06e1	Standard Practice for Classification of Soils for Engineering Purposes (Unified Soil Classification System)	1 per 20,000 cubic yards	GC, SC, ML, ML-CL, CL
ASTM D4318-05	Standard Test Method for Liquid Limit, Plastic Limit, and Plasticity Index of Soils	1 per 20,000 cubic yards	5% < plasticity index < 20%
Topsoil material			
ASTM D422-63(2007)	Standard Test Method for Particle Size Analysis	1 per 3,000 cubic yards	40% ≤ No. 10 sieve
ASTM D2216-05	Standard Test Methods for Laboratory Determination of Water (Moisture) Content of Soil and Rock by Mass	1 per 3,000 cubic yards	N/A (not excessively wet)
ASTM D2974-07a	Standard Test Method for Moisture, Ash, and Organic Matter of Peat and other Organic Soils	1 per 3,000 cubic yards	Organic content > 4 and < 20
ASTM D4972-01(2007)	Standard Test Method for pH of Soils	1 per 3,000 cubic yards	pH <u>&gt;</u> 6 and < 8
Granular material			
ASTM C136/C136M-14	Standard Test Method for Sieve Analysis of Fine and Coarse Aggregates	1 per 3,000 cubic yards	As specified
ASTM D2434-68(2006)	Standard Test Method for Permeability of Granular Soils (Constant Head)	1 per 3,000 cubic yards	$k \ge 1 \times 10^{-03} \text{ cm/sec}$
ASTM D3042-17	Standard Test Method for Insoluable Residue in Carbonate Aggregates	1 per 3,000 cubic yards	< 5%

#### Table 2: IN-PLACE FIELD DENSITY TESTING REQUIREMENTS

NIPSCO CCR Surface Impoundments Closures, Construction Quality Assurance Plan

Test	Test Method	Title	Minimum Frequency
Soil cover material			
	ASTM D1556/D1556M-15e1	Standard Test Method for Density and Unit Weight of Soil in Place by Sand-Cone Method	1 test per acre per lift
Field Density	ASTM D2937-17e1	Standard Test Method for Density of Soil in Place by the Drive-Cylinder Method	1 test per acre per lift
	ASTM D6938-17	Standard Test Method for In-Place Density and Water Content of Soil and Soil- Aggregate by Nuclear Methods (Shallow Depth)	1 test per acre per lift
Moisture Content	ASTM D2216-10	Standard Test Methods for Laboratory Determination of Water (Moisture) Content of Soil and Rock by Mass	1 test per acre per lift

#### Table 3: EQUIPMENT REQUIREMENTS: COVER SOIL OR TOPSOIL MATERIAL

Maximum Allowable Equipment Ground	Initial Lift Thickness of
Pressure (psi)	<b>Overlying Soil Cover (feet)</b>
<5	1.0
<10 but >5	1.5
<20 but >10	2.0
>20	3.0

NIPSCO CCR Surface Impoundments Closures, Construction Quality Assurance Plan

Notes:

psi – pounds per square inch; < - less than; > - greater than

# Appendix E



# SAMPLING AND ANALYSIS PLAN CLOSURE APPLICATION

Bailly Generating Station Chesterton, IN

Submitted to:

# Northern Indiana Public Service Company LLC

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Submitted by:

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February 2021

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Figure 1 Post-Closure Monitoring Well Network

#### APPENDICES

Appendix A Field Forms

### **1.0 INTRODUCTION**

#### 1.1 Background

Northern Indiana Public Service Company LLC (NIPSCO LLC) plans to perform closure-by-removal of the Coal Combustion Residuals (CCR) materials (i.e., fly ash and boiler slag) located within the Site's four surface impoundments at the Bailly Generating Station (BGS or Site) located in Chesterton, Indiana including Primary Settling Pond No. 1 (Primary 1), Secondary Settling Pond No. 1 (Secondary 1), Primary Settling Pond No. 2 (primary 2), and Boiler Slag Pond (BSP). Following closure, NIPSCO LLC will implement a post-closure groundwater monitoring program, which will include a stand-alone Sampling and Analysis Plan (SAP) and a Quality Assurance Project Plan (QAPP). In addition to the self-implementing Federal Coal Combustion Residuals (CCR) Rule requirements, when and where applicable, the IDEM Office of Land Quality (OLQ) has released and previously indicated that NIPSCO LLC will be subject to application of the Surface Impoundment Closure Guidance (SICG) during any closure plan review process. Post-closure care requirements including groundwater monitoring are also addressed by and regulated under 329 Indiana Administrative Code (IAC), Article 10, Rule 31.

Golder Associates Inc. (Golder) prepared this SAP on behalf of NIPSCO LLC to address regulatory requirements and guidance outlined above. The intent of this SAP is to describe (1) the current monitoring program and associated quality assurance (QA) protocols for groundwater monitoring and (2) the monitoring required as part of the Closure Corrective Measures to assess post-closure groundwater quality. This document has been appended to the Coal Combustion Residual Surface Impoundment Closures Application, Bailly Generating Station, Northern Indiana Public Service Company, Merrillville, Indiana, dated December 2020, prepared by Wood Environment & Infrastructure Solutions, Inc (Wood). This SAP should be used in conjunction with the Quality Assurance Project Plan (QAPP) prepared by Golder for the Closure Application.

# 2.0 GROUNDWATER SAMPLING AND ANALYSIS

# 2.1 Sampling Goal, Personnel, Approach, and Controls

NIPSCO LLC's overall goals of the groundwater monitoring program are a) the collection of representative samples that achieve data quality objectives, and b) when the analytical results are evaluated statistically, they allow for accurate and early detections of impacts, if any, to groundwater quality as a result of a verified release from the regulated unit or units being monitored. The collection of samples by qualified, consistent field staff familiar with both program requirements and the specifics of the monitoring network represent a key component and serve as a quality control function that allows the achievement of these program goals.

Golder's groundwater sampling team consists of experienced individuals that perform the work in accordance with generally accepted practices within the industry, applicable provisions of the IDEM Remediation Closure Guide (RCG – revised March 2020 edition), and the Standard Operating Procedures (SOPs) discussed herein. The following sections, which are consistent with USEPA low-flow sampling guidance and the requirements of the CCR Rule, outline the program sample collection procedures. Although this section provides reference to specific forms, the use of other equivalent forms to record the necessary data may be substituted so long as the same basic requirements are met.

# 2.2 Sampling Order

Each monitoring well is equipped with a dedicated bladder pump; therefore, the use of dedicated pumps, combined with specific field techniques that address sample collection procedures, reduce the likelihood of cross-contamination and associated effects on samples. Accordingly, the routine sampling order typically follows a

sequence based on consideration of field conditions (e.g., access, individual well recharge rates at the time of sampling, potential, or actual weather impacts), not necessarily a simple default approach of sampling background locations prior to any downgradient locations.

#### 2.3 Assessment of Monitoring Well and Piezometer Condition

The monitoring wells are being operated and maintained so they perform to their design specifications throughout the life of the monitoring program (see Table 1 for monitoring well construction details). Piezometers will be subject to the same requirements as monitoring wells. During each sampling event, all wells subject to monitoring, including those for which measurement of water levels is the only scheduled activity, are located and their identity confirmed (See Figure 1 for post-closure monitoring well locations). Prior to performing any water level measurements, purging, or sampling, each monitoring well is visually inspected to assess its integrity. The condition of each monitoring well, including protective bollards, protective steel casings or road boxes, operation and security of locks, concrete pads, PVC casing, and inner cap is assessed for any physical damage or other breach that may indicate compromised integrity. The results of the well inspections are documented in the comments section of the field sampling forms and/or in field notebooks. In addition, any indications of significant damage, tampering, etc. are promptly reported to NIPSCO LLC's environmental compliance management personnel for appropriate follow-up action. Necessary repairs, other than replacement, will be completed within 10 days of discovery unless otherwise approved by IDEM.

### 2.4 Equipment Calibration

Equipment used to record field water quality parameters is calibrated each day prior to use. Calibrations are performed following manufacturers' recommendations and, at a minimum, re-checked at the end of each day. Calibration solutions for standardization materials are freshly prepared or taken from non-expired stock. In the absence of manufacturer specifications or regulatory guidance, field equipment is calibrated to within +/- 10 percent of the standard (or 0.1 standard units for pH meters), if possible. Equipment that fails calibration may not be used until repaired and calibrated or replaced. Calibration data are recorded in the field and records are maintained as part of the permanent project file. A sample field Instrument Calibration Form is included in Appendix A.

# 2.5 Water Level Gauging

Static water levels are measured in each monitoring well prior to purging using an electric meter accurate to 0.01 foot. Measurements are obtained from the surveyed measuring point on each well. To the extent feasible, these measurements are taken within a 24-hour period Site-wide. Data are recorded on the Record of Water Level Readings form or Groundwater Sample Collection form, examples of which are included in Appendix A.

Prior to initial use and between wells, the portion of the water level indicator that contacts groundwater in the well is decontaminated to avoid cross-contamination between monitoring wells. In addition to decontaminating the downhole equipment, sampling personnel don new gloves between wells, and more frequently as needed, to reduce the potential for cross-contamination.

#### 2.6 Pre-sample Well Purging

Golder follows USEPA low-flow sampling protocols to collect the groundwater samples. Low-flow sampling is advantageous because it can greatly reduce the volume of water that must be purged from a well before representative samples can be collected, and typically provides for the collection of more representative samples

than do other purge methods, as well as consistency in analytical results between sampling events. Low-flow sampling is accomplished using dedicated low-flow bladder pumps.

Purging is targeted at a rate equal to the well yield to avoid drawing stagnant well column water into the pump (i.e., between 100 and 500 milliliters per minute). During the well purge activities, the flow rate and the depth to groundwater is typically monitored on regular intervals (every 3 to 5 minutes) to verify that the purge activities are not removing stagnant water from the water column in the monitoring well. Stabilization of the water column is considered achieved when three consecutive water level measurements vary by 0.3 foot or less at a pumping rate of no more than 500 ml/min.

Depth to water and field water quality parameter measurements are made during purging on approximate 3- to 5minute intervals. If a field meter equipped with a flow cell is used, the volume of the flow cell is purged between field measurements. Stabilization is attained, and purging deemed complete when three consecutive measurements of each field parameter vary within the following ranges:

- Temperature: +/- 10% Degrees Celsius
- pH: +/- 0.1 Standard Units
- Conductivity: +/- 3% milliSiemens
- ORP: +/- 10 mV millivolt
- DO: +/- 10% (or +/- 0.1 mg/L if less than 1.0 mg/L) milligrams per liter
- Turbidity: Less than 5 Nephelometric Turbidity Unit (NTU)

All data gathered during monitoring well purging are recorded on a Groundwater Sample Collection form. Field personnel manage purge water generated during sampling activities in consultation with NIPSCO LLC environmental compliance management personnel.

If dedicated equipment malfunctions during a sampling event, non-dedicated equipment may be used to collect a groundwater sample, provided the pump is decontaminated prior to use in each well. The pump and associated discharge hoses will be decontaminated using a non-phosphate-based detergent and water mixture followed by a deionized water rinse to avoid cross-contamination between monitoring wells as provided in the Section 2.10.

#### 2.7 Sample Collection

Once the water quality field measurement data indicate that purging activities have been successfully completed, required samples are collected directly from the discharge line on the dedicated, low-flow pump into laboratory-provided, pre-preserved sample containers selected for the required parameters or compatible parameters (e.g., all metals samples are collected in one bottle). Sample collection is performed at the same rate (or lower) than was used during the well purging process. Sample containers are kept closed until the time each set of sample containers is to be filled. Groundwater samples collected as part of the monitoring program are not filtered prior to analysis. Groundwater samples are collected in the designated size and type of containers required for specific parameters. Sample containers are filled in such a manner as to prevent loss of preservatives due to spilling or overfilling. The parameters sampled for during each phase of monitoring is provided in Table 2 and the analytical methods and practical quantitation limits (PQLs) associated with these parameters are provided in Table 3. Planned sample containers, minimum volumes, chemical preservatives, and holding times for each analyte are

provided in Table 4. These may change depending on laboratory requirements and will be verified by the field team prior to each sampling event.

### 2.8 Sample Preservation and Handling

Upon obtaining the groundwater samples, they are packed into insulated, ice-filled coolers that are kept closed unless contents are being removed or added. Sample preservation methods including chemical addition, refrigeration, and protection from light are used to retard biological action, retard hydrolysis, and reduce sorption effects. Samples are kept at no more than 6°C from collection to laboratory delivery. Samples are delivered directly to the laboratory or sent via overnight courier following chain-of-custody (COC) procedures.

# 2.9 Chain-of-Custody Program

The COC program allows for tracing and documenting sample possession and handling from the time of field collection through laboratory analysis. The COC program includes sample labels, sample seals, field Groundwater Sample Collection forms, and the COC record. Each sample is assigned a unique sample identification number to be recorded on the sample label. Each sample identification number and description are recorded on the field Groundwater Sample Collection form and on the COC document.

The intent of this SOP is to provide guidance to maintain sample integrity. The chain-of-custody form provides evidence and documentation of sample collection, shipment, laboratory receipt, and laboratory custody until disposal of the sample. The chain-of-custody form identifies each sample collected and the individuals responsible for sample collection, shipment, and receipt.

Once collected, samples are considered to be in one's custody if they are: (1) in the custodian's possession or view; (2) in a secured location (under lock) with restricted access; or (3) in a container that is secured with an official seal(s) such that the sample cannot be reached without breaking the seal(s).

#### 2.9.1 Responsibilities

Field personnel who collect the samples are responsible to initiate the chain-of-custody protocol. Upon sample collection, but prior to storage, shipment, or transportation, field personnel shall properly and completely fill out the chain-of-custody form with a waterproof ink pen. The Field Team Leader shall review the form prior to sample storage, shipment, or transportation. If an individual makes an error during the completion of the chain-of-custody form, a line shall be drawn through the error and the correction entered. Field personnel completing the form shall initial and date the error. Under no circumstances is white-out or erasing acceptable. Field sampling personnel are responsible for making a copy of the completed chain-of-custody form and giving the form to the Golder Project Manager. The Golder Quality Assurance Manager or designee shall review the form and place it in the project file with the field sampling forms. Upon receipt by the laboratory, the laboratory sample custodian shall assume responsibility for completing the chain-of-custody procedures. Upon completion of analysis, the laboratory shall submit a copy of the completed chain-of-custody form with the analytical data to the Project Manager who will place it in the project file.

**Equipment Description** 

- Chain-of-custody forms
- A waterproof ink pen

#### 2.9.2 **Procedures**

Field personnel shall use a waterproof ink pen to complete the chain-of-custody forms. Preparation of the chain-of-custody form includes:

- Complete the chain-of-custody form by entering the project name, client name, laboratory name and address, the person to whom the chemical analyses results shall be reported, and invoicing information at the top of the form. An example Chain-of-custody form is provided as Attachment A.
- COC(s) will be completed and sent with the samples for each shipment.
- Sample-specific information shall include the field identification number, the date and time the sample is collected, the depth at which the sample was taken, the type of sample (e.g., groundwater), the type of analyses requested, and preservatives used. Samples shall be grouped for shipment with other samples for similar analysis and use a common form. More than one chain-of-custody form shall be used if the number of samples placed in a cooler is greater than the number of entry spaces on the chain-of-custody form.
- The COC record will identify the contents of each shipment and maintain the custodial integrity of the samples. A locked seal will be placed across the front and back of each cooler containing samples when coolers are ready for shipment. All custody seals will be signed and dated. The chain-of-custody form will be cross-checked for errors and signed.
- Each person taking possession of the samples shall sign and date the chain-of-custody both as a recipient and as a relinquisher of the samples. When the samples are delivered to the laboratory, the laboratory sample custodian will sign the chain-of-custody as the last recipient of the samples.
- If the samples are directly transported to the laboratory, the chain-of-custody shall be kept in the possession of the person delivering the samples. Upon receipt by the laboratory, the sample receiver(s) shall open the shipping containers, compare the contents with the chain-of-custody form, and sign and date the form. Any discrepancies shall be noted on the chain-of-custody form and the Project Manager notified immediately.
- Prior to shipment by a commercial carrier, make a copy of the chain-of-custody form. If the samples are delivered directly to the laboratory by field personnel, a copy of the form shall be made after the laboratory representative signs and dates the chain-of-custody form.
- Chain-of-custody forms shall be maintained with the analytical data.

#### 2.9.3 Sample Labels

Sample labels sufficiently durable to remain legible when wet contain the following information, written with indelible ink:

- Site and sample identification number
- Monitoring well number or other location
- Date and time of collection
- Name of collector
- Parameters to be analyzed

Preservative, if applicable

Sample names are unique between sampling events. Sample names are in the format Well ID-MMDDYY such that MMDDYY is the sample date with two digits for the month, day, and year. No spaces or underscores are allowed in sample IDs. The date does not contain any dashes or underscores.

#### 2.9.4 Sample Seal

The shipping container is sealed to prevent the samples from being disturbed during transport to the laboratory. A seal is placed across the front and back of each cooler containing samples when coolers are ready for shipment. All custody seals are signed and dated.

#### 2.9.5 Field Forms

All field information is completely and accurately documented to become part of the final report for the groundwater monitoring event. Equipment calibration readings are included on field forms. Example field forms are included in Appendix A. The field forms document the following information:

- Identification of the monitoring well
- Sample identification number
- Field meter calibration information
- Static water level depth
- Purge volume
- Time monitoring well was purged
- Date and time of collection
- Parameters requested for analysis
- QA/QC samples, if collected
- Preservative used
- Field water quality parameter measurements
- Water levels recorded during low-flow purge
- Field observations on sampling event
- Name of collector(s)
- Weather conditions including air temperature and precipitation

The COC record is required for tracking sample possession from time of collection to time of receipt at the laboratory. The National Enforcement Investigations Center (NEIC) of USEPA considers a sample to be in custody under any of the following conditions:

- It is in the individual's possession
- It is in the individual's view after being in his possession

- It was in the individual's possession and he/she locked it up
- It is in a designated secure area

All environmental samples are handled under strict COC procedures beginning in the field. The Field Team Leader is the field sample custodian, responsible for ensuring that COC procedures are followed. A COC record accompanies each individual shipment. The record contains the following information:

- Sample destination and transporter
- Sample identification numbers
- Signature of collector
- Date and time of collection
- Sample type
- Identification of monitoring well
- Number of sample containers in shipping container
- Parameters requested for analysis
- Signature of person(s) involved in the chain of possession
- Inclusive dates of possession

A copy of the completed COC form is placed in a water-resistant bag, accompanies the shipment, and is returned to the shipper after the shipping container reaches its destination. The COC record is also used as the analysis request sheet. When shipping by courier, the courier does not sign the COC record: copies of shipping forms are retained to document custody.

#### 2.10 Field Equipment Decontamination

Field personnel will use the procedures in this section to decontaminate all non-dedicated monitoring equipment (e.g., field water quality meter and water level meter) to collect field water quality measurements. The procedures include:

- 1) Clean with tap water and soap (e.g., Alconox) using a brush to remove obvious particulate matter and surface films;
- 2) Rinse thoroughly with tap water; and
- 3) Rinse thoroughly with deionized or distilled water.

#### 3.0 ANALYTICAL AND QUALITY CONTROL PROCEDURES

#### 3.1 Analytical Methods

NIPSCO LLC proposes a monitoring parameter list appropriate to the site environmental, industrial (e.g., located near ArcelorMittal Steel Mill), and geological background conditions; Site investigation findings; surface impoundment waste management history; and current monitoring provisions of the CCR Rule and 329 IAC, Article 10, Rule 9. From the perspective of evaluating potential post-closure impacts to water quality, the results

generated from this approach will be amenable to applying statistical-based (e.g., intra-well or inter-well) or standards-based comparisons. Consistent with the CCR Rule monitoring requirements and the Closure Application and subsequent supporting documents, the post-closure monitoring parameter list will include:

Field-based water quality parameters	pH, specific conductivity, temperature, turbidity, oxidation-reduction potential
40 CFR, Part 257 Appendix III Detection Monitoring Parameters	Boron, calcium, chloride, fluoride, sulfate, total dissolved solids, pH
40 CFR, Part 257 Appendix IV Assessment Monitoring Parameters	Antimony, arsenic, barium, beryllium, cadmium, chromium, cobalt, fluoride, lead, lithium, mercury, molybdenum, selenium, thallium, radium 226 and 228 (combined)

# 3.2 Data Quality Objectives

As part of the evaluation component of the Quality Assurance (QA) program, analytical results are evaluated for precision, accuracy, representativeness, completeness, and comparability (PARCC). These are defined as follows:

- Precision is the agreement or reproducibility among individual measurements of the same property, usually made under the same conditions
- Accuracy is the degree of agreement of a measurement with the true or accepted value
- Representativeness is the degree to which a measurement accurately and precisely represents a characteristic of a population, parameter, or variations at a sampling point, a process condition, or an environmental condition
- Completeness is a measure of the amount of valid data obtained from a measurement system compared with the amount that was expected to be obtained under correct normal conditions
- Comparability is an expression of the confidence with which one data set can be compared with another data set regarding the same property

The accuracy, precision and representativeness of data will be functions of the sample origin, analytical procedures, and the specific sample matrices. Quality Control (QC) practices for the evaluation of these data quality indicators include the use of accepted analytical procedures, adherence to hold time, and analysis of QC samples (e.g., blanks, replicates, spikes, calibration standards, and reference standards).

Quantitative QA objectives for precision and accuracy, along with sensitivity (detection limits) are established in accordance with the specific analytical methodologies, historical data, laboratory method validation studies, and laboratory experience with similar samples. The representativeness of the analytical data is a function of the procedures used to process the samples (see the full QAPP in Appendix F).

Completeness is a qualitative characteristic which is defined as the fraction of valid data obtained from a measurement system (e.g., sampling and analysis) compared to that which was planned. Completeness can be less than 100 percent due to poor sample recovery, sample damage, or disqualification of results, which are outside of control limits due to laboratory error or matrix-specific interferences. Completeness is documented by including sufficient information in the laboratory reports to allow the data user to assess the quality of the results.

The overall completeness goal for each task is difficult to determine prior to data acquisition. For this project, all reasonable attempts will be made to attain 90% completeness or better (laboratory).

Comparability is a qualitative characteristic, which allows for comparison of analytical results with those obtained by other laboratories. This may be accomplished using standard accepted methodologies, traceability of standards to the National Bureau of Standards (NBS) or USEPA sources, use of appropriate levels of quality control, reporting results in consistent, standard units of measure, and participation in inter-laboratory studies designed to evaluate laboratory performance.

Data quality and the standard commercial report package will be evaluated with respect to PARCC criteria using the laboratory's QA practices, use of standard analytical methods, certifications, participation in inter-laboratory studies, temperature control, adherence to hold times, and COC documentation following the data quality assessment procedures (also frequently referred to Data Validation) described herein. The laboratory QC control limits in place at the time of sample analysis, which are routinely re-evaluated following the procedures in the laboratory quality assurance policies and the requirements of the analytical methods, will be used as the quantitative QC criteria.

### 3.3 Quality Assurance/Quality Control Samples

This section describes the various Quality Assurance/Quality Control (QA/QC) samples that are collected in the field and analyzed in the laboratory and the frequency at which they will be performed. A summary of the groundwater and QA/QC samples is provided in Table 5.

#### 3.3.1 Field Equipment Rinsate Blanks

In situations where sampling equipment is not dedicated or disposable, an equipment rinsate blank is collected. The equipment rinsate blanks are prepared in the field using laboratory-supplied analyte-free water. The water is poured over and through each type of sampling equipment following decontamination and submitted to the laboratory for analysis of target constituents. One rinsate blank is collected for every 10 samples, if needed (e.g., equipment malfunction requires use of different, non-dedicated bladder pump).

#### 3.3.2 Field Duplicates

Field duplicates are collected by sampling the same location twice, but the field duplicate is assigned a unique sample identification number. Samplers document which location is used for the duplicate sample. One field duplicate is collected for every 10 samples.

Field duplicate samples are given a unique sample ID in the form FDNN-MMDDYY where NN is a sequential number for the event and MMDDYY is the sample date with two digits for the month, day, and year. The field duplicate sample is submitted with a generic sampling time of 12:00 so that the sample time cannot be used to deduce the sampling location. The location where the field duplicate sample is collected is recorded on both the field form and in the field notebook.

#### 3.3.3 Field Blank

Field blanks are also collected as part of the field sampling QA/QC program. The purpose of the field blank is to detect any contamination that might be introduced into the groundwater samples through the air or through sampling activities.

Field blanks are prepared in the field (at the sampling site) using laboratory-supplied bottles and deionized or laboratory reagent-quality water. Each field blank is prepared by pouring the deionized water into the sample

bottles at the location of one of the wells in the sampling program. Preservatives are added to specific sample bottles as required. The well at which the field blank is prepared is identified on the Field Log along with any observations that may help explain anomalous results (e.g., prevailing wind direction, up-wind potential sources of contamination). Once a field blank is collected, it is handled and shipped in the same manner as the rest of the samples.

Field blank results are reported in the laboratory results as separate samples, using the designation FBNN-MMDDYY where NN is a sequential number for the event and MMDDYY is the sample date with two digits for the month, day, and year. One field blank is collected for every 10 samples.

#### 3.3.4 Laboratory Quality Control Samples

NIPSCO LLC selected Pace Analytical Services (Pace), a national laboratory, to analyze the groundwater samples. Pace's Indianapolis, Indiana, and Pittsburg, Pennsylvania laboratories analyze the metals/anions/total dissolved solids, and radium 226/228, respectively. Pace has an established QC check program using procedural (method) blanks, laboratory control spikes, matrix spikes, and duplicates. Details of the internal QC checks used by Pace are found in the laboratory Quality Assurance Manuals (QAM) and the published analytical methods. These QC samples are used to determine if results may have been affected by field activities or procedures used in sample transportation or if matrix interferences are an issue. One (1) Matrix Spike (MS)/ Matrix Spike Duplicate (MSD) set (i.e., one sample plus one MS, and one MSD sample at one location) is collected per 20 samples. MS/MSD samples have a naming convention as follows:

- Sample: GAMW-01-MMDDYY
- MS: GAMW-01-MS-MMDDYY
- MSD: GAMW-01-MSD-MMDDYY

#### 3.4 Laboratory Quality Control Procedures

Pace adheres to a quality assurance program that complies with the National Environmental Laboratory Accreditation Conference (NELAC) program, which is documented in their QAMs. This document describes mechanisms employed by Pace that produces analytical data that meets or exceeds applicable EPA and State requirements. The QAM describes the laboratory's experience, its organizational structure, and procedures in place to provide quality analytical data. The QAM outlines the sampling, analysis, and reporting procedures used by the laboratory. Pace is responsible for the implementation of and adherence to the QA/QC requirements outlined in the QAM. Copies of Pace's QAMs (Indianapolis, Indiana and Pittsburg, Pennsylvania laboratories) are provided in the QAPP.

Audits are an important component of the quality assurance program at the laboratory. Internal system and performance audits are conducted periodically to confirm adherence by all laboratory departments to the QAM. External audits are conducted by accrediting agencies or states. These reports are transmitted to department managers for review and response. Pace will take corrective measures for any finding or deficiency found in an audit per their accreditation requirements.

Data Quality Reviews (DQRs), or equivalent, are requests submitted to the laboratory to formally review results that differ from historical results, or that exceed certain permit requirements or quality control criteria. The laboratory prepares a formal written response to DQRs explaining discrepancies. The DQR is the first line of investigation following any anomalous result.

#### 3.4.1 Laboratory Documentation

Upon receipt of the samples at Pace, the following activities are recommended:

- The samples will be examined upon receipt to confirm that the samples were collected in EPA-approved containers for the requested analysis. The sample collection data and time will also be reviewed to confirm that the EPA-required sample holding time has not expired or will not expire before the analysis can be performed.
- The information concerning transportation mode and manner will be reported on the form. Samples will be transported on ice or under refrigeration, and the inside temperature of the cooler recorded upon opening.
- The pH of each sample as well as the sample appearance will be recorded if required by the analytical method. Also, preservative adjustments, filtration, and sample splitting will also occur as required prior to distribution. Sample adjustments will be fully documented.

During analysis of the samples, it is recommended that the laboratory agent maintain the integrity of the samples as follows:

- During the sample analysis period, the samples will be preserved in accordance with method guidelines.
- If at any point during the analysis process, the results are considered technically inaccurate, the analysis will be performed again if holding times have not been exceeded.
- Documentation activities should be completed with permanent ink in a legible manner with mistakes crossed out with a single line.

#### 3.5 Laboratory Analyses

Analytical procedures will be performed in accordance with EPA *Test Methods for Evaluating Solid Waste -Physical/Chemical Methods, SW-846,* as updated and other EPA-approved methods. The CCR Detection Monitoring Program and CCR Assessment Monitoring Program constituents, along with proposed test methods and Practical Quantitation Limit (PQLs), are listed in Tables 2 and 3. The selected analytical methods provide PQLs that are below applicable groundwater standards.

Alternate methods may be used if they have the same or lower PQL. Methods with higher PQLs will be considered if the concentration of the parameter is such that an alternate test method with a higher PQL will provide the same result.

#### 3.5.1 Practical Quantitation Limit

Laboratory-specific PQLs will be used as the reporting limits for quantified detections of required monitored constituents. Laboratory PQLs should be reported with the sample results.

#### 3.5.2 Method Detection Limits

Laboratory-specific Method Detection Limits (MDLs) will be used as the reporting limits for estimated detections of required monitored constituents. Constituents detected at concentrations above the MDL but below the PQL will be reported as estimated with a qualifying "J" flag on the laboratory certificates of analysis. Laboratory MDLs should be reported with the sample results.

#### 3.5.3 Method Blanks

Laboratory method blanks are used during the analytical process to detect any laboratory-introduced contamination that may occur during analysis. A minimum of one method blank should be analyzed by the laboratory per sample batch.

#### 3.6 Data Review, Verification, and Validation

Data review, verification, and validation techniques include screening, accepting, rejecting, or qualifying data based on specific QC criteria to identify quality issues which could affect the use of the data for decision making purposes. Following receipt of the analytical data from the subcontract laboratory, Golder validates 100% of the groundwater data generated as part of the CCR monitoring in accordance with the National Functional Guidelines for Inorganic Data Review (EPA 540-R-2017-001, January 2017). Using the terminology from Guidance for Labeling Externally Validated Laboratory Analytical Data for Superfund Use (EPA 540 R-10-006, January 2009), 100% of the data undergoes Stage 2A data validation which assesses both sample-related and instrument-related QC parameters. In particular, the data are reviewed for completeness and adherence to the requested analytical methods. Quantitative sample and instrument specific QC parameters, including field and method blank data, MS/MSD recovery and precision; laboratory control samples (LCS) and instrument calibrations presented in the summaries provided in the laboratory data packages are reviewed for conformance with the laboratory QC criteria.

Should QC non-conformances be identified during the data validation, the following qualifiers will be appended to the data¹:

- **U** The analyte was analyzed for but was not detected above the level of the reported sample quantitation limit.
- J The result is an estimated quantity. The associated numerical value is the approximate concentration of the analyte in the sample. No direction of bias is indicated.
- **J+** The result is an estimated quantity, but the result may be biased high.
- J- The result is an estimated quantity, but the result may be biased low.
- **UJ** The analyte was analyzed for but was not detected. The reported quantitation limit is approximate and may be inaccurate or imprecise.
- **R** The data are unusable. The sample results are rejected due to serious deficiencies in meeting QC criteria. The analyte may or may not be present in the sample.

Qualified results are reported for validated samples on the analytical reporting forms provided in the data packages or as data summary tables accompanying the laboratory deliverable package. Qualified results, data packages, and analytical results are stored in the operating record.

The PARCC criteria and criteria specified in applicable guidelines may not always be achievable. The data validation guidelines provide directions for the determination of data usability. Qualified data can often provide useful information, although the degree of certainty associated with the result may not be as planned.

¹ Note that the U and J qualifiers may also be associated with the data by the laboratory to indicate non-detect and estimated values below the PQL respectively.

Professional judgment, in conjunction with USEPA guidance documents, is used to determine data usability and where necessary, professional judgment is used to evaluate scenarios not specifically described in the referenced documents. Should the Stage 2A validation identify deficiencies that were not addressed, after consultation with NIPSCO LLC, Golder would move to a more extensive validation for that data package.

#### 3.7 Reconciliation with User Requirements

Throughout the project, NIPSCO LLC and Golder will determine if project data quality objectives (DQO) are being met and assess whether the data being collected is sufficient and appropriate. Periodic evaluations of the monitoring program will be made to determine if a change in frequency or analytical parameters is appropriate. Individuals making measurements throughout the process will also assess whether the DQO are being met.

Individuals making field measurements will determine whether field quality control criteria were met. The field QA/QC will be overseen by the field team leader. Corrective actions will be initiated in the field, as necessary. This corrective action may include recalibration of instruments or use of a different type of instrument.

The analysts in the laboratory will determine if analytical QC criteria are achieved. Corrective action in the form of re-analysis or re-calibration may be warranted. Laboratory analytical data and field data will be assessed by a data validation specialist under the direction of the QA Manager to determine usability regarding the DQO.

As noted in the data validation guidelines, data may not always meet precision and accuracy requirements but may still be considered usable. The data will be assessed regarding the project DQO, and professional judgment used in conjunction with guidance documents will determine data usability.

#### 4.0 STATISTICAL EVALUATION OF DATA

Golder developed the selected statistical method for the BGS Closure Application in accordance with 40 CFR Part 257.93 and 329 IAC 10-29, using methodology presented in Statistical Analysis of Groundwater Data at RCRA Facilities, Unified Guidance, March 2009, EPA 530/R-09-007 (Unified Guidance). For consistency, the statistical approach proposed herein is the same as the approach currently being used in the monitoring program required under 40 CFR Part 257.93. The statistical methods used for detection monitoring under 40 CFR Part 257.93 are the same as those used to comply with 329 IAC 10-29-6 (also referred to as Phase I), while the statistical methods used for assessment monitoring under 40 CFR Part 257.93 will be the same as those used to comply with 329 IAC 10-29-7 (also referred to as Phase II). If corrective measures are ultimately required (as defined by 329 IAC 10-29-9), a separate statistical plan will be generated as a part of the corrective measures program.

Following completion of data validation, statistical analysis of the data is performed as discussed in the following subsections. These techniques represent a proven, reasonable approach to groundwater data analysis, are protective of human health and the environment, and incorporate appropriate statistical and other evaluation methodologies.

#### 4.1 Groundwater Data

The background populations for each monitoring well and constituent and general background statistics have been developed using the baseline data set. These general statistics include: 1) a review of the intra-well data for potential outliers, 2) an analysis for underlying trends, and 3) an examination of data distribution (i.e., data normality). NIPSCO LLC selected an inter-well approach to compare downgradient monitoring wells to compliance limits derived from background groundwater quality data and/or MCLs in hydraulically-upgradient locations.

NIPSCO LLC will review the analytical data following each monitoring event and compare it to the established MCLs and to background concentrations to obtain a general understanding of the analytical results per impoundment.

### 4.2 Managing Linear Trends

Along with data normality and sample independence, one of the important assumptions of statistical data analysis is the absence of trends in the background data set. It is generally inappropriate to calculate a statistical limit when a data series exhibits a linear trend. If, based on a statistical trend analysis (e.g., Mann-Kendall/Sen's Slope Analysis), trends are noted in the intrawell background data, additional information and records will be evaluated to determine an underlying cause. Trends can result from a multitude of causes, including natural temporal variability, incomplete well development (particularly for new background wells), well damage or deterioration, systematic laboratory or field sampling errors, influence of an off-Site upgradient source, and leakage from an impoundment. In any case, it is generally considered inappropriate to incorporate trending data in the calculation of a statistical limit, since trends will typically result in an over-estimate of the background variability. While techniques exist to "detrend" the data, these techniques should be used with caution and should generally be avoided unless it can be definitively proven that the trends arise from strictly natural causes (i.e., Site-wide fluctuation in groundwater concentrations). If the trends are the result of Site-wide effects, they should be apparent in both upgradient and downgradient monitoring locations. If trends are noted in a background population and no specific underlying cause can be discerned, the most appropriate course is to evaluate the data from the trending well location using statistical trend analysis techniques, such as Mann-Kendall/Sen's Slope Analysis, until such time that the trend is no longer discernible, and a statistical limit can be calculated based on non-trending data.

# 4.3 Statistical Methodology

The statistical test used to evaluate the groundwater monitoring data will be the prediction interval/limit method as allowed by the CCR Rule. Except for pH, statistical limits are generally established as one-sided, upper prediction limits, because the parameters being tested under the CCR Rule are only expected to increase because of leakage from an impoundment. If statistical limits are required for pH, a two-sided prediction interval approach can be used unless a particular directional influence of leakage on pH is known for a particular facility. If one or more alternative statistical tests are used, NIPSCO LLC will collect an appropriate number of independent samples for the proposed statistical method, such that the individual false-positive rate will be no less than 0.01 percent and the site-wide false positive rate will be no less than 0.05 percent. If it is determined that prediction limits are not appropriate, an alternative statistical test method that meets the performance standards specified in the CCR Rule will be used.

The statistical analysis chosen to evaluate the groundwater data will meet the following performance standards:

- The statistical method used to evaluate groundwater monitoring data shall be appropriate for the distribution of monitoring parameters or constituents. If the distribution is shown by the NIPSCO LLC to be inappropriate for a normal theory test, then the data should be transformed, or a distribution-free theory test should be used. If the distributions for the constituents differ, more than one statistical method may be needed.
- If an individual well comparison procedure is used to compare an individual compliance well constituent concentration with background constituent concentrations or a ground water protection standard (GWPS), the test shall be done at a Type I error level no less than 0.01 for each testing period. If a multiple

comparisons procedure is used, the Type I experiment-wise error rate for each testing period shall be no less than 0.05; however, the Type I error of no less than 0.01 for individual well comparisons will be maintained. This performance standard does not apply to tolerance intervals, predictions intervals, or control charts.

- 3) If a control chart approach is used to evaluate groundwater monitoring data, the specific type of control chart and its associated parameter values shall be protective of human health and the environment. The parameters shall be determined after considering the number of samples in the background database, the data distribution, and the range of the concentration for each constituent of concern.
- 4) If a tolerance interval or a prediction interval is used to evaluate groundwater monitoring data, the levels of confidence and, for tolerance intervals, the percentage of the population that the interval must contain, shall be protective of human health and the environment. These parameters shall be determined after considering the number of samples in the background database, the data distribution, and the range of the concentrations for each constituent of concern.
- 5) The statistical method shall account for data below the PQL with one or more statistical procedures that shall be at least as effective as any other approach in this section for evaluating groundwater data. Any MDL that is used in the statistical method shall be the lowest concentration level that can be reliably achieved within specified limits of precision and accuracy during routine laboratory operating conditions that are available to the Facility.
- 6) If necessary, the statistical method shall include procedures to control or correct for seasonal and spatial variability as well as temporal correlation in the data.

#### 4.3.1 Reporting of Low and Zero Values

Chemical constituents that are not present above the detection limit of the analytical procedure are reported as NOT DETECTED (ND), or less than the method detection limit (MDL), rather than as zero or not present, and the laboratory's MDL is to be provided on the analytical report. There are a variety of ways to deal with data that include values below detection limits. General guidelines for handling non-detect data are further discussed in Chapter 2 of *Statistical Analysis of Groundwater Monitoring Data at RCRA Facilities, Unified Guidance*, March 2009.

#### 4.3.2 Normality Testing

The original data will be tested for normality using the Shapiro-Wilk Test of Normality (either single group or multiple group version) for sample size up to 50, and the Shapiro-Francia Test of Normality for sample size more than 50, or other acceptable test methods. If an alternative test method is proposed for evaluating the normality of data, NIPSCO LLC will document supporting information demonstrating that the alternative method has a similar level of power to detect deviations from the normal distribution as the Shapiro-Wilk and Shapiro-Francia test methods, as appropriate. The following guidelines are used for decisions in normality testing:

- 1) If the raw data are not normally distributed, then the data should be natural log-transformed and re-tested for normality using the above methods.
- 2) If the raw or the natural log-transformed data are normally distributed, then a normal distribution test (also referred to as a Parametric test) can be applied.

 If neither the raw nor the natural log-transformed data fit a normal distribution, then a distribution-free test will be applied.

#### 4.3.3 Outliers

An outlier is a value that is statistically different from most other values in a data set for a given groundwater chemical constituent. Reasons for outliers may include:

- Sampling errors or field contamination;
- Analytical errors or laboratory contamination;
- Recording or transcription errors;
- Faulty sample preparation or preservation, or shelf-life exceedance; or
- Extreme, but accurately detected environmental conditions (e.g., spills, migration from the Facility).

Formal testing for outliers should be performed on each data set. Outliers will be tested using the methods described in the *Unified Guidance*. The outlier test assumes the background data are normally distributed. Thus, if the background data are log-normally distributed, the outlier test should be applied to the log-normally transformed data and not the raw data.

If a statistical outlier is detected by the outlier test, the source of the abnormal measurement should be investigated. Valid reasons for the outlier values may include contaminated sampling equipment, laboratory contamination of the sample, errors in transcription of the data values, or the value may be a true, but extreme data point. Once a specific reason for the outlier is documented, the data point should be excluded from further statistical analysis. If a plausible reason cannot be identified, the result should be treated as a true but extreme value and should remain in the database. However, in some cases, professional judgement may be used to remove extreme outliers, even when an underlying cause cannot be identified. As described in Section 5.2.3 of the *Unified Guidance*, the removal of extreme outliers (even those for which a cause cannot be identified) has the effect of reducing the background mean and standard deviation, thus resulting in a more conservative (i.e., protective) statistical limit. Identified outliers should be maintained in the Facility's database and simply flagged as outliers, because even extreme outliers may ultimately be identified as members of the actual sample population as additional data are added to the database over time. It is important to remember that the true population can never be known, because it would take an infinite number of samples to perfectly identify a given population. Statistical analysis is a procedure for modeling the true population using a limited number of existing data points, but as more data are gathered, the true population can be more closely modeled.

#### 4.3.4 Statistical Power

As discussed above, one of the primary goals of the selection of a proper statistical evaluation method is to limit the potential for results to falsely trigger an SSI while also maintaining sufficient statistical power to detect a true SSI. Falsely triggering an SSI when no release from the impoundment has occurred is referred to as a false positive. The False Positive Rate (FPR), typically denoted by the Greek letter  $\alpha$ , is also known as the "significance level". The FPR is the probability that a future compliance observation will be declared to be from a different statistical distribution than the background data. If the FPR is set too high, it can lead to the conclusion that there is evidence of impact when none exists. Conversely, if the FPR is set too low, it can lead to a false conclusion that no contamination exists, when it does exist (also known as a "false negative"). Ultimately, the ability to accurately identify SSIs depends on the selection of an appropriate FPR, which is referred to as the statistical power. FPRs are set for each parameter (or for each parameter in each well for intrawell analysis). However, statistical analysis programs and the resulting decision making do not depend on each individual measurement/comparison error rates but are dependent on the collective error rate from all the individual comparisons. When the individual FPRs are integrated over the entire statistical monitoring program, it is referred to as the Site-wide false positive rate (SWFPR), which is a better measure of the ability of the entire statistical program to detect false positive observations.

#### 4.3.5 Site-Wide False Positive Rate

For CCR monitoring, detection monitoring events are based on multiple comparisons (i.e., the seven Appendix III parameters at each compliance monitoring well). The SWFPR can be calculated based on several input parameters, including the assumed FPR, the number of downgradient monitoring wells (n), the number of parameters, and the number of statistical comparisons events each year for the impoundment. The *Unified Guidance* recommends that a statistical evaluation program be designed with an annual, cumulative SWFPR of approximately 10%.

The *Unified Guidance* recommends measuring statistical power using power curves which display the probability that an individual comparison will detect a concentration increase relative to background results. After determining the statistical method based on the background data, a power curve can be generated to determine the statistical power of the compliance monitoring program. The methods and procedures for calculating the SWFPR are described in Section 6.2.2 of the *Unified Guidance*.

#### 4.3.6 Verification Sampling

Verification Sampling is an important aspect of any statistical analysis program, as it improves statistical power while maintaining the SWFPR. Most statistical evaluations incorporate verification sampling mathematically into their determination of the SWFPR.

Verification sampling is typically completed as a 1 of 2 pass strategy. As described above, if an initial statistical exceedance is reported, then verification sampling will be performed to confirm the initial exceedance. Verification samples should be collected on a schedule that allows for physical independence of the samples. In a 1 of 2 pass strategy, if the concentration of the verification sample is less than the calculated compliance limit, then no SSI is triggered. If the initial and subsequent verification observation are above the calculated compliance limit, an SSI is triggered.

Verification sampling within 90 days (assuming a 1 of 2 pass verification sampling strategy) will typically allow sufficient time to complete laboratory and statistical analysis in accordance with the timeframes set forth in the CCR Rules.

#### 4.3.7 Prediction Intervals

40 Code of Federal Regulations (CFR) §257.93(F)(3) outlines using prediction intervals or tolerance intervals for statistical evaluation. Based on procedures described in the *Unified Guidance* as well as Golder's experience, prediction limits are the preferred method for calculating detection monitoring compliance limits and will be used to calculate compliance limits for the seven Appendix III constituents. In addition, the *Unified Guidance* suggests using prediction limits with verification sampling (Chapter 19 of the Unified Guidance), because prediction limits help to maintain low SWFPR while still providing high statistical power. Tolerance intervals, which are a backward-looking procedure, should not be used for detection monitoring, but will be used in assessment

monitoring, as further described in Section 4.4 below. If, at any point in the future, a different statistical method becomes more applicable to the site conditions, this document may be modified to include that method.

Prediction interval methods can be used for parametric and non-parametric datasets as well as for intrawell or interwell statistical analysis. Prediction limits use background data from background monitoring wells to calculate an interwell concentration that represents an upper limit of expected future concentrations for a particular population. In contrast to tolerance limits, prediction intervals are a forward looking, predictive analysis, which incorporate uncertainty in future measurements, and are thus the most appropriate method for detection monitoring programs. Typically, a one-sided upper prediction limit is used to evaluate detection monitoring observations. Observations must be lower than the prediction limit (or within the upper and lower prediction limits for pH) to be considered "in control". Parametric methods are generally preferred over non-parametric methods because they result in lower SWFPRs and higher statistical power.

For detection monitoring, if parametric testing is required, the procedures outlined in Section 19.3.1 of the *Unified Guidance* should be used for the statistical analysis. If non-parametric testing is required, the procedures outlined in Section 19.4.1 of the *Unified Guidance* should be used. Most groundwater statistical software includes algorithms for calculating either parametric or non-parametric prediction limits.

#### 4.3.8 Double Quantification Rule

In situations where the entire background dataset is reported as ND, the Double Quantification Rule (DQR) will be used to supplement the prediction limit analyses. Generally, the Appendix III constituents occur at detectable concentrations in natural groundwater; however, if ND results are encountered for a given constituent, the DQR can be implemented. A demonstration can be made that this statistical evaluation is as least as effective as any other test and results as described in §257.93(F)(5). The DQR is recommended by the *Unified Guidance* as a supplement to prediction limits because it reduces the number of non-detects used for statistical analysis and provides a lower SWFPR while maintaining statistical power.

Under the DQR, an SSI is triggered if a compliance well observation is higher than the PQL in either: (1) both a detection monitoring sample and its verification sample, or (2) two consecutive sampling events in a program where verification sampling is not utilized.

#### 4.3.9 Responding to SSIs

If the statistical evaluation for an Appendix III analyte triggers an SSI, the data must be evaluated to determine if the cause of the SSI is due to a release from the impoundment or from an alternative source. Possible alternative sources may include laboratory causes, sampling causes, statistical evaluation causes, or natural variation. If the SSI can be attributed to one of these sources and the SSI was not caused by the impoundment, an alternative source demonstration (ASD) can be completed. If the SSI cannot be attributed to an alternative source and is from the impoundment, then Assessment Monitoring is triggered (as described further in Section 4.4).

#### 4.4 Updating Background Values

The *Unified Guidance* suggests that updating statistical limits should only be completed after a minimum of four to eight new measurements are available (i.e., every two to four years of semiannual monitoring, assuming no verification sampling). The periodic update of background datasets, during which additional data are incorporated into the background, improves statistical power and accuracy by providing a more conservative estimate of the true background population. Prior to incorporating new data into the background dataset, a test should be

performed to demonstrate that the "new data" are from the same statistical population as the existing background results.

The Mann-Whitney (Wilcoxon Rank Sum) Test is the statistical test that will be used to determine whether new observations should be included in the background dataset. It is important to note that a failure of the Mann-Whitney Test does not automatically preclude the incorporation of "new data" into the background; however, if differences are noted, a review of the "new data" will be conducted to determine whether the noted difference is a result of a change in the natural conditions of the groundwater or if it is the result of a potential release from the impoundment. If the new data are incorporated in the background dataset, the prediction limits will be recalculated, as described in Section 4.2.7 above.

### 4.5 Assessment Monitoring Statistical Evaluation

This section discusses the procedures, methods, and processes that will be implemented as part of the assessment monitoring statistical evaluation, if required. Assessment monitoring will be initiated if an SSI is triggered during detection monitoring. As described in Section §257.95(b) of the CCR Rule, assessment monitoring must be initiated within 90 days of identifying an SSI (not within 90 days of the sample event which produced the data that resulted in the SSI). This 90-day period includes sampling the groundwater monitoring network for the Appendix IV constituents. Following the initial assessment sampling event for all Appendix IV constituents, the monitoring network is then sampled again within 90 days of receiving the results from the initial Appendix IV sampling event. Following these initial assessment monitoring events, assessment monitoring is then performed on a semiannual basis. Assessment monitoring is terminated if concentrations for all Appendix III and Appendix IV constituents in all compliance wells are statistically lower than background for two consecutive sampling events (§257.95(e)). The following sections discuss the procedures, methods, and processes that will be implemented as part of the assessment monitoring statistical evaluation.

Many of the statistical comparisons used in assessment monitoring require various analyses to be completed prior to the data being accepted into the statistical evaluation. Before using the results from assessment monitoring events, the steps outlined in Section 3.0 will be completed. In addition, the general statistical procedures described in Sections 4.1 and 4.2 (trends, outliers, normality, etc.) will be performed. Please refer to those sections for descriptions on the methods and techniques required to complete these analyses.

#### 4.5.1 Establishing a Ground Water Protection Standard (GWPS)

Following the removal of outliers and the performance of general statistics described in Sections 4.1 and 4.2, the GWPS will be developed for use in the assessment monitoring program. The GWPS is a key element to the assessment monitoring process. GWPS must be generated for each of the detected Appendix IV analytes. Because interwell methods are proposed, a site-wide GWPS will be generated for each analyte based on Appendix IV results from background/hydraulically upgradient wells.

The GWPS is set equal to the MCL or health-based standard. For those constituents, whose background concentrations are greater than the MCL or health-based standard, the GWPS will be calculated from the background data.

#### 4.5.2 MCL or Health-Based Standard GWPS

Many of the Appendix IV analytes have USEPA MCL levels and lead, cobalt, lithium, and molybdenum have approved health-based standards. As specified in the CCR Rule in Section §257.95(b), the GWPS must either be

the MCL/health-based standard, or a limit based on background data, whichever is greater. This section describes the methods to be used for statistical analysis when the MCL/health-based standard is used as the GWPS.

For Assessment Monitoring, the *Unified Guidance* recommends the confidence interval method to evaluate for potential exceedances, which are referred to as "statistically significant levels" (SSLs) (Chapter 21, *Unified Guidance*). Using confidence intervals, SSLs are identified by comparing the calculated confidence interval against the GWPS. A confidence interval statistically defines the upper and lower bounds of a specified population within a stipulated level of significance. Confidence intervals are required to be calculated based on a minimum of four independent observations, but a more representative confidence interval can be developed when all the available data are utilized.

The specific type of confidence interval should be based the attributes of the data being analyzed, including: (1) the data distribution, (2) the detection frequency, and (3) potential trends in the data. The Table below is based on Table 4-4 from the Electric Power Research Institute's (EPRI) *Groundwater Monitoring Guidance for the Coal Combustion Residual Rule* (2015), which displays the criteria for selecting an appropriate confidence interval. The method and procedure for calculating the Upper Confidence Limit (UCL) and Lower Confidence Limit (LCL) is provided in the section reference from the *Unified Guidance*, which is listed in the last column of the Confidence Interval Method Selection Table below.

Data Distribution	Non-detect Frequency	Data Trend	<i>Unified Guidance</i> Confidence Interval Method
Normal	Low	Stable	Confidence Interval Around Normal Mean (Section 21.1.1)
Transformed Normal (Log- Normal)	Low	Stable	Confidence Interval Around Lognormal Arithmetic Mean (Section 21.1.3)
Non-normal	N/A	Stable	Nonparametric Confidence Interval Around Median (Section 21.2)
Cannot Be Determined	High	Stable	Nonparametric Confidence Interval Around Median (Section 21.2)
Residuals After Subtracting Trend are Normal (with equal variance)	Low	Trend	Confidence Band Around Linear Regression (Section 21.3.1)
Residuals after Subtracting Trend are Non-Normal	Low	Trend	Confidence Band Around Theil-Sen Line (Section 21.3.2)

In an assessment monitoring program, the LCL is of prime interest. If the LCL exceeds the GWPS, there is statistical evidence that an SSL has been triggered. An initial SSL should be confirmed by verification sampling. If only the UCL exceeds the GWPS while the LCL is below the GWPS, the test is considered inconclusive and the *Unified Guidance* recommends that this situation be interpreted as "in compliance". If both the UCL and the LCL are below the GWPS, the GWPS.

It is important to note that a slightly different set of criteria are used to determine whether assessment monitoring can be terminated. Additional discussion of the criteria used for exiting assessment monitoring and returning to detection monitoring is provided below in Section 4.4.4.

During Assessment Monitoring, a per test FPR ( $\alpha$ ) of 0.05 will be used as an initial error level for calculating the two-tailed confidence intervals for the compliance wells (which means 2.5% FPR per tail). In some cases, it is appropriate to adjust the FPR of the confidence interval based on the number of data points available as well as the distribution of the data being evaluated. If deemed necessary, an approach is provided in Section 22 of the *Unified Guidance* for determining an appropriate per test FPR based on the data characteristics.

When performing assessment monitoring statistical evaluations, it is important to evaluate the compliance data for shifts. If no shifts have occurred, then all the available Appendix IV data for a particular constituent can be used in the statistical evaluation. If shifts are noted (typically based on qualitative evaluation of a time series plot), only the data collected after the shift should be used in the statistical evaluation.

#### 4.5.3 Background Based GWPS

Background or historical concentration limits should be assessed using the following techniques for all Appendix IV analytes. These concentration limits should then be compared with the MCL/heath-based standard and the higher of these two values will be used as the GWPS.

The *Unified Guidance* provides two acceptable approaches for establishing a background based GWPS. The two methods include the tolerance interval approach or the prediction interval approach.

#### 4.5.3.1 Tolerance Interval Approach

If the background dataset is normally or transformed normally distributed, *Unified Guidance* recommends Tolerance Intervals over the Prediction Intervals for establishing a GWPS. The GWPS should be based on a 95 percent coverage/95 percent confidence tolerance interval. If the background data are non-normal (even after transformation), then many background observations are required to calculate a non-parametric tolerance interval (typically a minimum of 60 background observations are required to meet these requirements). If there is an insufficient number of background observations to calculate a non-parametric tolerance interval, then a nonparametric Prediction Interval approach should be used, as described in Section 4.3.2 below.

The Upper Tolerance Limit (UTL) is calculated for each detected Appendix VI constituent. Tolerance Limits, as outlined in the *Unified Guidance* (Section 17.2), are a concentration limit that is designed to contain a prespecified percentage of the dataset population. Two coefficients associated tolerance intervals are (1) the specified population proportion and (2) the statistical confidence. The coverage coefficient ( $\gamma$ ), which is used to contain the population portion, and the tolerance coefficient (or confidence level (1- $\alpha$ )), which is used to set the confidence of the test. Typically, the UTL is calculated to have a coverage and confidence of 95%. When an MCL does not exist or the background concentrations are greater than the MCL, the calculated UTL for each constituent is used as the GWPS. The confidence interval for each compliance well is then then compared with the GWPS.

To calculate a valid confidence interval, a minimum of four data points is necessary for each of the detected Appendix IV constituents in each compliance monitoring well (or four "new" assessment monitoring observations in each well when intrawell statistical methods are employed). Using the Tolerance Interval Approach, an SSL is triggered when calculated LCL for each compliance well is greater than the GWPS.

Tolerance limits can be completed using both parametric (Section 17.2.1 of *Unified Guidance*) or non-parametric methods (Section 17.2.2 of *Unified Guidance*). However, as described above, the non-parametric method requires at least 60 background (or historical) measurements to achieve 95% confidence with 95% coverage. Tolerance Intervals can be calculated using most groundwater statistical software packages.

#### 4.5.3.2 Prediction Interval Approach

If Tolerance Intervals cannot be used to calculate the GWPS, then a Prediction Interval method should be used. This method is very similar to the method described in Section 4.2.7 of this document; however, for assessment monitoring, the *Unified Guidance* suggests using a prediction interval about a future mean for normally/transformed-normally distributed datasets or a prediction interval about a future median for datasets with a high percent of ND or non-normally distributed data.

When using prediction intervals to calculate for a GWPS, a one-sided prediction interval is calculated using background (or historical) datasets based on a specified number of future comparisons - four future comparisons is typical. The Upper Prediction Limit that is calculated as a product of this method then becomes the GWPS and is compared against the confidence interval for the compliance data, as described in Section 4.3.1, above. As also described above, if the LCL is greater than the calculated prediction limit then an SSL is triggered.

#### 4.5.4 Returning to Background Detection Monitoring from Assessment Monitoring

As specified in 257.95(e) of the CCR Rule, to return to detection monitoring, it must be demonstrated that the concentration of all constituents listed in Appendix III and Appendix IV are at or below calculated "background (or historical) values" for two consecutive semiannual sampling events. This determination of background values is based on the statistical evaluation procedure established for detection monitoring. Therefore, if prediction limits (with the double quantification rule for analytes with all non-detects) are used for detection monitoring, prediction limits should be calculated and used for all Appendix III and IV analytes to determine when the monitoring program can return to Detection Monitoring. If this statistical evaluation demonstrates that any of the Appendix III or Appendix IV are at a concentration above background levels, but no SSLs have been triggered, then the impoundment will remain in assessment monitoring (257.95(f)).

#### 4.5.5 Updating Background Values in Assessment Monitoring

The background for Assessment Monitoring parameters should be updated using the same methods and techniques described in Section 4.3 for updating detection monitoring background data.

#### 4.6 Corrective Measures Monitoring

During Corrective Measures, the groundwater monitoring approach is very similar to that used under Assessment Monitoring. The statistical method used to evaluate the data in Corrective Measures will also be the inter-well confidence interval method. However, there is one significant difference between Assessment and Corrective Measures Monitoring statistics, the results from downgradient monitoring wells will be evaluated by comparing the calculated intra-well UPPER confidence limit (UCL) with the GWPS for each Appendix IV constituent. If the UCL exceeds the GWPS, there is statistical evidence of non-compliance (NC), which will result in continued Corrective Measures monitoring and possible additional Corrective Measures remedies. Other than those two differences, the other components of the statistical analysis under Corrective Measures remain the same as Assessment Monitoring. The GWPSs established under the Assessment Monitoring program will be carried over into the Corrective Measures Monitoring program.

If a NC is noted under Corrective Measures Monitoring, trend analysis and other data analysis tools will be applied to understand whether the data are stable or trending. As described under Section 4.1 above, Mann-Kendall/Sen's Slope Analysis, or another non-parametric trend analysis technique, is recommended for detecting trends. The Mann-Kendall/Sen's Slope Analysis approach is less prone to bias by outliers and, thus, represents a better estimate of trends in data sets. If a NC is noted and increasing trends are also detected for key Appendix IV indicator parameters, additional remedies may be necessary. If trends are stable or decreasing during Corrective Action, no additional actions may be necessary and Corrective Measures Monitoring will continue.

Corrective Measures Monitoring can be considered complete when the UCL falls below the GWPS for three consecutive years for each Appendix IV constituent in each well. At that point, the Corrective Measures remedy is considered complete (from the standpoint of groundwater monitoring), and the Site can return to Assessment Monitoring.

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Tables

#### Table 1: Monitoring Well Construction Details NIPSCO LLC Bailly Generating Station Chesterton, Indiana

		Ground	Total	Top of Casing	Sounded		Screen	Screer	Depth	S	creen Elevat	ion
	Monitoring Well ID	Surface	Borehole	Elevation	Well Depth	Well Material	Length	Тор	Bottom	Тор	Middle	Bottom
	Monitoring Weine	Elevation (ft-msl)	Depth (ft-bgs)	(ft-msl)	(ft-btoc)	Wen Material	(ft)	(ft-bgs)	ft-bgs)	(ft-msl)	(ft-msl)	(ft-msl)
Background	PC-GAMW-01	621.26	23	624.53	26.32	2" Sch 40 PVC	10	13	23	608.26	603.26	598.3
Background	PC-GAMW-01B	621.08	32	623.76	34.98	2" Sch 40 PVC	5	27	32	593.78	591.28	588.78
	PC-GAMW-12R	622.96	25	TBD	TBD	2" Sch 40 PVC	10	15	25	607.96	602.96	598.0
Boiler Slag Pond	PC-GAMW-13	622.14	23	625.34	26.29	2" Sch 40 PVC	10	13	23	609.14	604.14	599.1
Buller Slag Fullu	PC-GAMW-14	621.62	23	624.32	26.35	2" Sch 40 PVC	10	13	23	608.62	603.62	598.6
	PC-MW-105	619.11	20	622.05	21.20	2" Sch 40 PVC	10	10	20	609.11	604.11	599.1
	PC-GAMW-06	624.45	27	626.97	29.62	2" Sch 40 PVC	10	17	27	607.45	602.45	597.5
	PC-GAMW-07	625.99	29	629.04	31.73	2" Sch 40 PVC	10	19	29	606.99	601.99	597.0
	PC-GAMW-08	621.17	25	624.35	27.56	2" Sch 40 PVC	10	15	25	606.17	601.17	596.2
	PC-GAMW-08B	620.80	40	623.73	42.87	2" Sch 40 PVC	10	30	40	590.86	585.86	580.86
	PC-GAMW-10	629.34	31	631.94	32.62	2" Sch 40 PVC	10	21	31	608.34	603.34	598.3
Primary 1 and	PC-GAMW-11	621.99	24	625.04	27.23	2" Sch 40 PVC	10	14	24	607.99	602.99	598.0
Primary 2	PC-GAMW-11C	621.83	34	625.16	37.95	2" Sch 40 PVC	5	29	34	592.21	589.71	587.21
	PC-GAMW-16	627.20	30	629.92	32.71	2" Sch 40 PVC	10	20	30	607.21	602.21	597.21
	PC-GAMW-17	620.67	25	623.96	27.25	2" Sch 40 PVC	10	14.5	24.5	606.71	601.71	596.71
	PC-GAMW-17B	620.74	34	624.12	36.87	2" Sch 40 PVC	5	28.5	33.5	592.25	589.75	587.25
	PC-GAMW-18	623.68	30	626.87	32.71	2" Sch 40 PVC	10	20	30	604.16	599.16	594.16
	PC-MW-112	624.80	27	628.07	30.15	2" Sch 40 PVC	10	17	27	607.80	602.80	597.8
	PC-GAMW-02	621.27	23	624.20	26.41	2" Sch 40 PVC	10	13	23	608.27	603.27	598.3
Secondary 1	PC-GAMW-03	620.95	23	624.35	26.88	2" Sch 40 PVC	10	13	23	607.95	602.95	598.0
	PC-GAMW-04	620.88	23	624.12	26.31	2" Sch 40 PVC	10	13	23	607.88	602.88	597.9
	GAMW-05	624.64	27	627.70	31.04	2" Sch 40 PVC	10	17	27	607.64	602.64	597.6
	GAMW-09	636.61	40	639.48	42.25	2" Sch 40 PVC	10	30	40	606.61	601.61	596.6
	GAMW-11B	622.07	75	624.89	77.35	2" Sch 40 PVC	5	70	75	552.07	549.57	547.1
	GAMW-15	636.60	40	639.29	42.58	2" Sch 40 PVC	10	30	40	606.60	601.60	596.6
	MW-102	616.46	15	619.23	17.92	2" Sch 40 PVC	10	5	15	611.46	606.46	601.5
Piezometers	MW-103	619.95	19	622.97	22.19	2" Sch 40 PVC	10	9	19	610.95	605.95	601.0
FIEZOIIIEIEIS	MW-104	619.05	19	622.13	22.32	2" Sch 40 PVC	10	9	19	610.05	605.05	600.1
	MW-105	619.17	18	622.05	21.20	2" Sch 40 PVC	10	8	18	611.17	606.17	601.2
	MW-113	627.23	24	630.07	27.31	2" Sch 40 PVC	10	14	24	613.23	608.23	603.2
	MW-114	622.62	24	625.74	26.80	2" Sch 40 PVC	10	14	24	608.62	603.62	598.6
	MW-115	620.73	21	623.41	23.06	2" Sch 40 PVC	10	11	21	609.73	604.73	599.7
	MW-116	621.34	20	624.18	23.23	2" Sch 40 PVC	10	10	20	611.34	606.34	601.3

Notes:

ft-bgs = feet below ground surface

ft-msl = feet above mean sea level

ft-btoc = feet below top of casing

TBD = to be determined

2" Sch 40 PVC = Two-inch diameter well, constructed of schedule 40 polyvinyl chloride materials

Survey elevations for wells obtained from Marbach, Brady, and Weaver survey

Prepared by:	DFSC
Checked by:	KMC
Reviewed by:	MAH

# Table 2: Groundwater Quality Monitoring ParametersNIPSCO LLC Bailly Generating StationChesterton, Indiana

Monitoring Parameter						
Field Parameters	Temperature, pH, Conductivity, Dissolved Oxygen, and Turbidity					
	Boron					
	Calcium					
	Chloride					
Appendix III ¹	Fluoride					
	Sulfate					
	рН					
	Total Dissolved Solids (TDS)					
	Antimony					
	Arsenic					
	Barium					
	Beryllium					
	Cadmium					
	Chromium					
	Cobalt					
Appendix IV ¹	Fluoride					
	Lead					
	Lithium					
	Mercury					
	Molybdenum					
	Selenium					
	Thallium					
	Radium 226 & 228					

Notes:

1.) Analyte lists match requirements for monitoring from USEPA Rule 40 CFR Part 257.94(b).

Prepared By: DFSC Checked By: JSP Reviewed By: MAH

#### Table 3: Analytical Methods and Practical Quantitation Limits NIPSCO LLC Bailly Generating Station

Chesterton, Indiana

Analyte	Analytical Method ^{3,4}	Preservative	Hold Times	PQL (mg/L)	MCL (mg/L)
Appendix III - Detection Monitoring					
Boron	SW-846 6010C	HNO ₃	6 months	0.1	NA
Calcium	SW-846 6010C	HNO ₃	6 months	1	NA
Chloride	SW-846 9056A	NA	28 days	1	NA
Fluoride	SW-846 9056A	NA	28 days	0.05	4
pН	SW-846 9040B	NA	NA	-	NA
Sulfate	SW-846 9056A	NA	28 days	1	NA
Total Dissolved Solids (TDS)	SM-2540C	NA	7 days	10	NA
Appendix IV - Assessment Monito	ring ¹				
Antimony	SW-846 6020A ⁵	HNO ₃	6 months	0.002	0.006
Arsenic	SW-846 6020A ⁵	HNO ₃	6 months	0.005	0.010
Barium	SW-846 6020A ⁵	HNO ₃	6 months	0.005	2.000
Beryllium	SW-846 6020A ⁵	HNO ₃	6 months	0.001	0.004
Cadmium	SW-846 6020A ⁵	HNO ₃	6 months	0.001	0.005
Chromium	SW-846 6020A ⁵	HNO ₃	6 months	0.002	0.100
Cobalt ⁸	SW-846 6020A ⁵	HNO ₃	6 months	0.001	0.0068
Fluoride	SW-846 9056A	NA	28 days	0.05	4
Lead ⁸	SW-846 6020A ⁵	HNO ₃	6 months	0.001	0.015
Lithium ⁸	SW-846 6010C	HNO ₃	6 months	0.008	0.048
Mercury	SW-846 7470A	HNO ₃	28 days	0.0002	0.002
Molybdenum ⁸	SW-846 6020A ⁵	HNO ₃	6 months	0.010	0.180
Selenium	SW-846 6020A ⁵	HNO ₃	6 months	0.001	0.050
Thallium	SW-846 6020A ⁵	HNO ₃	6 months	0.001	0.002
Radium 226 & 228	EPA 903.1 (Radium 226), EPA 904.0 (Radium 228)	HNO ₃	-	NA	5

Notes:

1.) Analyte lists matches requirements for detection and assessment monitoring from United States Environmental Protection Agency (USEPA) Detection - USEPA Appendix III Constituents and Assessment Monitoring - USEPA Appendix IV Constituents - 40 CFR Part 257. Monitoring.

2.) SW-846 denotes Test Methods for Evaluating Solid Waste, Physical- Chemical Methods, EPA publication SW-846, 3rd edition, and subsequent updates.

3.) Other industry-used or agency-approved methods may be used provided that they produce the necessary level of precision and accuracy for data use and reporting.

4.) Updates to the methods listed here are approved for use.

5.) EPA Method 6020A with a collision cell

7.) Radium results have a sample-specific minimum detectable concentration in pCi/L.

8.) These four constituents do not have MCLs. The value listed under the MCL column is the applicable health-based standard.

Dash (-) = no information available

HNO₃ - Nitric acid

MCL = Maximum Contaminant Level from USEPA 2016 Edition of the Drinking Water Standards and Health Advisories. (http://water.epa.gov/drink/contaminants/index.cfm.)

mg/L = Milligrams per liter

NA = Not applicable

pCi/L = Picocuries per liter	Prepared By:	DFSC
PQL = Practical Quantitation Limit	Checked By:	JSP
	Reviewed By:	MAH

# Table 4: Sample Container Information and Hold TimesNIPSCO LLC Bailly Generating StationChesterton, Indiana

Parameter	Container & Volume	Preservative	Maximum Holding Time
pH, Specific Conductance, temperature, ORP, turbidity	Flow-through cell	None	15 minutes (field analysis)
Mercury (total)	Plastic, 250 mL	HNO₃ to pH<2	28 days
Metals (total) except mercury			6 months
Total Dissolved Solids (TDS)	Plastic, 500 mL	None	7 days
Fluoride, Chloride, Sulfate	Plastic, 250 mL	None	28 days
Radium 226/228	Plastic, 2 x 1 Liter	HNO ₃ to pH<2	6 months

Notes:

mL - Milliliter HNO₃ = Nitric acid

Prepared By:	DFSC
Checked By:	JSP
Reviewed By:	MAH

#### Table 5: Groundwater and QA/QC Sampling Plan Post-Closure Groundwater Monitoring NIPSCO LLC Bailly Generating Station

Chesterton, Indiana

Unit	Well ID	Analyte Group	Methods ¹	Sample Bottles	Field Samples	Filtered?	Field Duplicates ²	Field Blank ³	MS/MSD⁴
Background	PC-GAMW-01, PC-GAMW-01B	Radium	903.1, 904.0	2 x 1 L					
Boiler Slag Pond	PC-GAMW-12R, PC-GAMW-13, PC- GAMW-14, PC-MW-105	Metals	6010C, 6020A, 7470A	1 x 500 mL					
Primary 1 and Primary 2	PC-GAMW-06, PC-GAMW-07, PC- GAMW-08, PC-GAMW-08B, PC- GAMW-10, PC-GAMW-11, PC- GAMW-11C, PC-GAMW-16, PC- GAMW-17, PC-GAMW-17B, PC- GAMW-18, PC-MW-112	Anions	9056A	1 x 500 mL	21	No	2	2	2
Secondary 1	PC-GAMW-02, PC-GAMW-03, PC- GAMW-04	TDS/pH	SM 2540C, 9040B						
		Field Parameters	Field Analysis⁵	Flow-through Cell					
					Total S	Samples:		27	

Notes:

1.) Methods test for the following parameters:

6010C: Boron

6020A (collision cell): Antimony, Arsenic, Barium, Beryllium, Calcium, Cadmium, Cobalt, Chromium, Molybdenum, Lead, Selenium, Thallium, and Lithiun

SM 2540C: TDS

9056A: Anions - Chloride, Fluoride, and Sulfate

9040B: pH

2.) Field duplicates will be collected at a frequency of 1 per 10 samples, per analysis, per sampling round

3.) Field blank will be collected at a frequency of 1 per 10 samples, per analysis, per sampling round using laboratory provided deionized wate

4.) Matrix spike and matrix spike duplicate (MS/MSD) samples will be collected at a frequency of 1 per 20 samples, per analysis, per sampling round (4 MS/MSD samples equals 2 MS and 2 MSD

5.) Must sample for monitoring well water-quality parameters including temperature, pH, dissolved oxygen, specific conductance, oxidation-reduction potential, and turbidity. Turbidity must be <5 NTU's in all samples.

 $CaCO_3 = Calcium carbonate$ 

mL = Milliliter		
L = Liter	Prepared By:	DFSC
TDS = Total dissolved solids	Checked By:	JSP
	Reviewed By:	MAH

⁷⁴⁷⁰A: Mercury

# Table 6: Summary of Statistical Methods for Databases with Non-Detect DataNIPSCO LLC Bailly Generating StationChesterton, Indiana

Percentage of Non-Detects in the Database	Statistical Analysis Method
Less than 15%	Replace NDs with 1/2 the PQL, then proceed with parametric procedures.
15 to 50%	Replace NDs with 1/2 the PQL, then use the Kaplan- Meier or robust regression on ordered statics to estimate the mean and standard deviation.
More than 50%	Replace NDs with 1/2 the PQL, then proceed with nonparametric methods.

Notes:

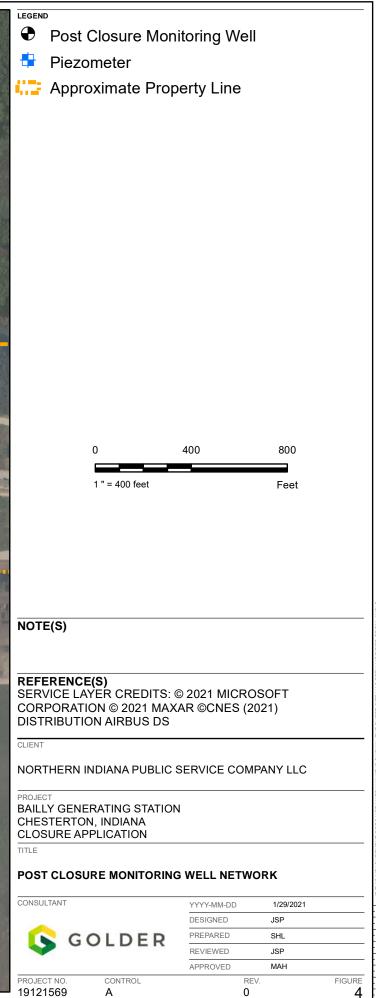
ND = Not detected above laboratory detection limit

PQL = Practical Quantitation Limit

Prepared By: DFSC Checked By: JSP Reviewed By: MAH

Figures





# Appendix A Field Forms

#### **CALIBRATION FORM**



		IN	Project Number:	191-21569	60	LDE
older Personnel Pr	esent:					
Date:						
Meter Type:			YSI			
Model Number:						
S/N						
	Specific Cond	ductivity L	.ot # :	Exp	ire Date:	
Standard	Unit		Meter reading		Time	
1.413	mS/cm					Initial
						Check
		J				Check
Acceptable Range	1.342-1.484					
	T %0		ssolved Oxygen			
Baro Pressure	Temp ^o C	% D.O.	mg / L D.O.	D.O. Charge	Time	
						Initial
						Check
			рН			Check
4.01 Buffer: Lot #:		Exp. Date:	7.01 Buffe	×r·lot#∘	Exp. Da	ite [.]
Standard	Meter reading	Expr Dato.	Meter reading		Meter reading	
	Initial		Check		Check	
Time		Acceptable Range				
4.01		3.81-4.21				
7.01		6.75-7.36				
10.00		9.50-10.50				
	10.00 Buf	fer:Lot#:	Exp. Da	te:	· · · ·	
	1	ORP Lot#:		Expire Date:	1	
Standard	Meter reading		Meter reading		Meter reading	
	Initial		Check		Check	
Time		Acceptable Range				
240.0		228-252				
			Turkidida			
Meter Type:			Turbidity LaMot	ite		
Model Number:			20/20			
S/N				-		
Standard	Meter reading		Meter reading		Meter reading	
	Initial	] [	Check		Check	
Time		Acceptable Range				
1.00		0.95-1.05				
10.00		9.50-10.5				
		J I				
Comments		J I				

Sampler Signature:

#### GROUNDWATER SAMPLE COLLECTION FORM



							GO	LDEF
SITE DESCRIPTION					SAMPLE D	ESCRIPTION		
Project Name:	NIPSCO/B	GS/IN		_		Sample ID:		
Project Number:	191-215	69		-		Date:		
Location:	Chesterton,	Indiana				ne at Well Site:		
					Time of San	nple Collection:		
WEATHER CONDITI	ONS					Sampled by:		
Temperature:				-		mpling Method:		er Pump
Wind:				-	Type of Sampl	ing Equipment:	Pump	o tubing
Precipitation:								
FIELD BLANK NOTE	S					F WATER TO	BE PURGED	
Field Blank Name:	-				-	nside Diameter: _		inches
Field Blank /Rinse Wate	ar type:			-		Casing Volume:		liters/ft
						Water in Well:		feet
Lot Number:				-		Water in Well:		liters
Analyses:				-		umes to Purge:		_
						e to be Purged:		liters
COLUMN OF WATER						hod of Purging:		_
	Depth of Well:		ft TOC		We	Il Purged Dry?:	Yes No	
	epth to Water :		ft TOC					
Column of	Water in Well:		ft ft TOC					
Appearance of Sample:	-		<b>D</b>	<b>D</b>	<b>D 1</b>			D. 7
WELL PURGE CONT	F	Purge 1	Purge 2	Purge 3	Purge 4	Purge 5	Purge 6	Purge 7
\/elume Dr	Time:							
volume Re	moved (liters):							
Specific Conduc	pH:							
-	re (Degrees C):							
-	rbidity (NTU):							
	RP (millivolts):							
	DO (mg/l) :							
Water I	evel (ft BTOC)							
		ng Purge Time:				age Purge Rate:		ml/min
	Endir	ng Purge Time:			Total \	/olume Purged:		liters
SAMPLE CONTAINE			Containar Numh	or Turne and O	170	Filter	Drasanusti	is and Sources
Analysis	, [	(	Container Numb	e, type and S		Filter	rneservati∖	e and Source
<u> </u>								

Chain of Custody #:	REMARKS:	2" - 0.617 liters/ft	1" - 0.053 liters/ft
Shuttle ID:		1.5" - 0.347 liters/ft	
Trip Blank ID:			
Lab Name:			
Air Bill #:	Field Team Leader:		

#### Water Level Collection Summary Form - Bailly Generating Station, Chesterton, Indiana Project No.: 191-21569



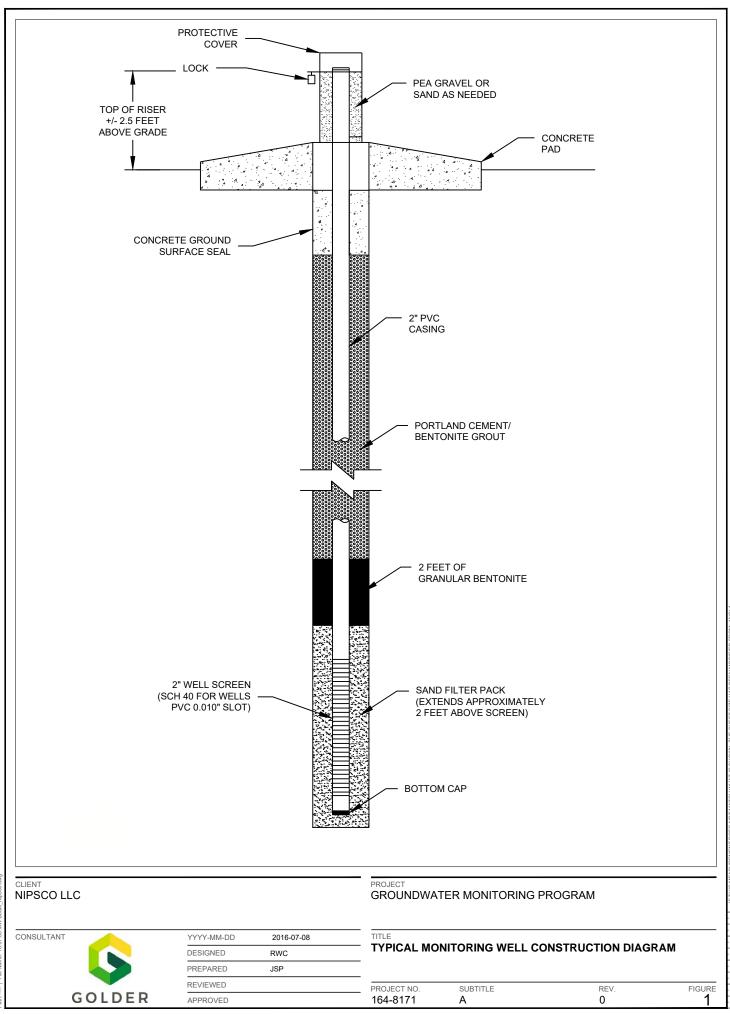
Date:	Inspector:
Arrival Time:	Signature:
Leaving Time:	Weather Conditions:

Sample Point ID	WL Time	Ref Point	Depth to Water (ft btoc)	Sounded Well Depth	Locked?	Labeled?	PVC Cap?	Surface Seal OK?	Notes
GAMW-01		PVC							
GAMW-01B		PVC							
GAMW-02		PVC							
GAMW-03		PVC							
GAMW-04		PVC							
GAMW-05		PVC							
GAMW-06		PVC							
GAMW-07		PVC							
GAMW-08		PVC							
GAMW-08B		PVC							
GAMW-09		PVC							
GAMW-10		PVC							
GAMW-11		PVC							
GAMW-11B		PVC							
GAMW-11C		PVC							
GAMW-12		PVC							
GAMW-13		PVC							
GAMW-14		PVC							
GAMW-15		PVC							
GAMW-16		PVC							
GAMW-17		PVC							
GAMW-17B		PVC							
GAMW-18		PVC							
MW-102		PVC							
MW-103		PVC							
MW-104		PVC							
MW-105		PVC							
MW-106		PVC							
MW-112		PVC							
MW-113		PVC							
MW-114		PVC							
MW-115		PVC							
MW-116		PVC							
			1	1	1	1	1		

Lake Level

NA

-



---- | File Name: 16.07.08 MW Detail_Nipsco.dw

Pace Analytical CHAIN-OF-CUSTODY Analytical Request Document Chain-of-Custody is a LEGAL DOCUMENT - Complete all relevent fields					LAB USE ONLY- Affix Workorder/Login Label Here or List Pace Workorder Number or MTJL Log-in Number Here																		
Company:			Billing Information:				ALL SHADED AREAS are for LAB USE ONLY																
Address:			1								Con	tainer l	Preser	rvative	e Type	**			Lab Projec	ct Manager:			
Report To:			Email To:					<ul> <li>** Preservative Types: (1) nitric acid, (2) sulfuric acid, (3) hydrochloric acid, (4) sodium hydroxide, (5) zinc acetate,</li> <li>(6) methanol, (7) sodium bisulfate, (8) sodium thiosulfate, (9) hexane, (A) ascorbic acid, (B) ammonium sulfate,</li> </ul>							_								
Сору То:			Site Collec	tion Info/A	ddress:				(C) ammonium hydroxide, (D) TSP, (U) Unpreserved, (O) Other														
Customer Project Name/Number:			State: /	County/Ci		ne Zone Co ] PT [   ] MT		[ ] ET					Analy	/ses					Lab Sa	mple Receipt Checkl			
Phone: Email:	Site/Facility ID #:				Compliand	e Monitori [ ] No	ng?												Custod Collec	y Seals Present/Int y Signatures Presen tor Signature Prese	it ent	Y N NA Y N NA	
Collected By (print):	Purchase Orde Quote #:	r #:			DW PWS I DW Locati														Correc	s Intact t Bottles ient Volume		Y N NA Y N NA Y N NA	
Collected By (signature):	Turnaround Da	ite Requir	ed:		Immediate	ely Packed	on Ice:												VOA -	s Received on Ice Headspace Acceptabl egulated Soils	.e	Y N NA Y N NA Y N NA	
Sample Disposal: Rush: [] Dispose as appropriate [] Return [] Archive: [] 3 Day [] 3 Day [] ] Hold: (Expedite Char,			/ [ ] 4 Day [ ] 5 Day Analysis														Residu Cl Str Sample pH Str	s in Holding Time al Chlorine Present ips: pH Acceptable ips: e Present		Y N NA Y N NA Y N NA Y N NA			
* Matrix Codes (Insert in Matrix bo: Product (P), Soil/Solid (SL), Oil (OL																			Lead A	cetate Strips:			
Customer Sample ID	Matrix *	Comp / Grab	Collect Composi	te Start)		site End	Res Cl	# of Ctns											Lab Sa	mple # / Comments:			
			Date	Time	Date	Time							_	$\neg$									
								+		_													
Customer Remarks / Special Condit	ions / Possible H	lazards:	Type of Ice	e Used:	Wet E	Blue Dr	y No	one		SHO	RT HOI	DS PRI	ESENT	(<72	hours)	: Y	Ν	N/A		Lab Sample Temperatu			
			Packing M	aterial Use	d:					Lab Tracking #:							Temp Blank Received: Y N NA Therm ID#: Cooler 1 Temp Upon Receipt:oC						
Radchem sample(s) screer			creened (<	500 cpm):	Y N	I NA			oles reo FEDEX			Clicat	<u> </u>	ourior	P	200 0-	urior	Cooler 1 Therm Corr	. Fact	or:	oC		
Relinquished by/Company: (Signature) Date/Time:				Received b						Date/T		5	Client		ourier MTJ		ace Co USE O		Cooler 1 Corrected T Comments:	emp:		oC	
······································	-,		.,			,, company	. (0.8.100						Table #:										
Relinquished by/Company: (Signatu	re)	Date	e/Time:		Received b	y/Company	v: (Signat	ure)			HCI MeOH						Trip Blank Received: HCL MeOH T		N Other				
Relinquished by/Company: (Signature) Date			e/Time:		Received b	y/Company	v: (Signat	ure)								Non Conformance(s): YES / NO	Pa	ige:					



golder.com

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Appendix F



#### APPENDIX F

# QUALITY ASSURANCE PROJECT PLAN CLOSURE APPLICATION

Bailly Generating Station Chesterton, IN

Submitted to:

Northern Indiana Public Service Company LLC

801 East 86th Avenue Merrillville, IN 46410

Submitted by:

### Golder Associates Inc.

670 North Commercial Street, Suite 103 Manchester, NH 03101 +1 603 668-0880

191-21569

February 2021

# LIST OF ACRONYMS

LIST OF AU	
Acronym	Definition
AO	Agreed Order
AOC	Area of Concern
BGS	Bailly Generating Station
Golder	Golder Associates Inc.
ASTM	American Society for Testing and Materials
CCR	Coal Combustion Residuals
CO	Consent Order
COPC COPEC	Contaminants of Potential Concern
DQO	Contaminants of Potential Ecological Concern Data Quality Objective
EDD	Electronic Data Deliverable
EPA	Environmental Protection Agency
ERA	Ecological Risk Assessment
FTP	File Transfer Protocol
GC/ECD	Gas chromatography/electron capture detection
GC/MS	Gas chromatography/mass spectrometry
GIS	Geographical Information System
HASEP	Health, Safety, and Environmental Plan
HHRA	Human Health Risk Assessment
ICPES	Inductively Coupled Plasma Emission Spectroscopy
	Inductively Coupled Plasma Mass Spectrometry Identification
ID IDEM	Indiana Department of Environmental Management
IDW	Investigation Derived Waste
LCS	Laboratory Control Sample
LCSD	Laboratory Control Sample Duplicate
MDC	Minimum Detectable Concentration
MDL	Method Detection Limit
MS	Matrix Spike
MSD	Matrix Spike Duplicate
NCR	Nonconformance Report
NIPSCO LLC	Northern Indiana Public Service Company LLC
OSHA	Occupational Safety and Health Administration
PC PE	Personal Computer Performed Evaluation
PE PID	Photoionization Detector
PM	Project Manager
QA/QC	Quality Assurance/Quality Control
QAM	Quality Assurance Manual
QAPP	Quality Assurance Project Plan
RFI	RCRA Facility Investigation
RL	Reporting Limit
RPD	Relative Percent Difference
RER	Relative Error Ratio
SOP	Standard Operating Procedure
SPLP	Synthetic Precipitation Leaching Procedure
SRM	Standard Reference Material
SWMU SVOCs	Solid Waste Management Unit Semi-volatile Organic Compounds
USGS	United States Geological Survey
WP	RFI Work Plan

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### FIGURES

Figure 1 Project Organizational Chart

#### APPENDICES

Appendix A	Pace Indianapolis, Indiana Quality Assurance Manual
Appendix B	Pace Greensburg, Pennsylvania Quality Assurance Manual

# **1.0 PROJECT DESCRIPTION**

In accordance with an Indiana Department of Environmental Management (IDEM)-approved closure application, Northern Indiana Public Service Company LLC (NIPSCO LLC) will perform closure by removal of four surface impoundments at the Bailly Generating Station (BGS or Site) located in Chesterton, Indiana including Primary Settling Pond No. 1, Secondary Settling Pond No. 1, Primary Settling Pond No. 2, and Boiler Slag Pond. Following closure, NIPSCO LLC will implement a post-closure groundwater monitoring program, which will include a stand-alone Sampling and Analysis Plan (SAP) and a Quality Assurance Project Plan (QAPP).

This QAPP presents the organization, planned activities and specific quality assurance and quality control (QA/QC) procedures to support the post-closure groundwater monitoring program. Specific protocols for sampling, sample handling and storage, chain of custody and laboratory and field analyses will be described. All QA/QC procedures will be structured in accordance with applicable technical standards including U.S. Environmental Protection Agency's (EPA's) requirements, regulations, and IDEM guidance and technical standards.

This QAPP has been prepared in accordance with the U.S. EPA Region V RCRA QAPP Instructions, April 1998 and incorporates guidance of the U.S. EPA Requirement for Quality Assurance Project Plans; U.S. EPA QA/G5, EPA/240/R-02/009, dated December 2002; Guidance for the Data Quality Objectives Process; U.S. EPA QA/G4, August 2000, Test Methods for the Evaluation of Solid Waste: Physical/Chemical Methods, 3rd Edition (EPA SW-846, 1986), and Indiana State Solid Waste regulations (329 IAC Rule 10).

# 1.1 Introduction

Golder Associates Inc. (Golder) has prepared this QAPP for NIPSCO LLC. This document has been appended to the Coal Combustion Residual Surface Impoundment Closure Application, Bailly Generating Station, Northern Indiana Public Service Company LLC, Merrillville, Indiana, dated December 2020, prepared by Wood Environment & Infrastructure Solutions, Inc (Wood). The Closure Application discusses much of the background for the planned closure by removal program and is referenced throughout this QAPP.

### 1.1.1 Overall Project Objectives and Decision Statements

The objectives of the closure program are to excavate and remove source materials from the four impoundments and then monitor groundwater to assess the presence or absence, as well as the nature and extent, of groundwater impacts associated with the impoundments to determine changes in groundwater quality and flow direction. Overall objectives of the data collection effort will be to:

- Monitor groundwater quality during the post-closure period
- Verify groundwater gradients, flow direction, flow rates, and potential areas of discharge

Target parameter and reporting limit goals for the QAPP are summarized in Tables 1.1. Associated specific objectives for field and laboratory data collection are tabulated in Section 1.4 of this QAPP.

### 1.1.2 Project Status/Phase

The Closure Application has been designed to allow collection of sufficient samples to meet program objectives. The field assessment will include the following activities:

Measurement of water levels in 21 post-closure monitoring wells and 12 piezometers

- Collection of groundwater samples from 21 monitoring wells
- Analyses of groundwater for selected metals and inorganics

### 1.1.3 **QAPP Preparation Guidelines**

This QAPP has been prepared in accordance with U.S. EPA Region 5 RCRA QAPP Instructions (April 1998), and IDEM's Office of Land Quality (OLQ) Quality Assurance Project Plan Guidance.

### 1.1.4 Current Conditions

The Closure Application provides a discussion of the current facility operations, waste management practices, and relies on data collected as regulated by the CCR Rule.

# **1.2 Project Objectives and Intended Data Usages**

The project objective is to provide defensible results to assess groundwater conditions and to support additional project needs (e.g., remediation system design and monitoring). Data will be screened against developed and accepted environmental benchmarks determined to be appropriate for this Site.

### 1.2.1 Project Target Parameters

NIPSCO LLC proposes a monitoring parameter list that is appropriate to the site environmental, industrial (e.g., adjacent to ArcelorMittal Steel Mill), and geological background conditions; historical Site investigation findings; impoundment waste management history; and current monitoring provisions of the CCR Rule. From the perspective of evaluating potential post-closure impacts to water quality, the results generated from this approach will be amenable to applying either statistical-based (e.g., intra-well or inter-well) or standards-based comparisons. Consistent with the CCR Rule monitoring requirements, the post-closure monitoring parameter list will include:

Field-based Water Quality Parameters	pH, specific conductivity (SC), temperature, turbidity, oxidation-reduction potential (ORP)
40 CFR, Part 257 Appendix III Detection Monitoring Parameters	Boron, calcium, chloride, fluoride, sulfate, total dissolved solids (TDS), pH
40 CFR, Part 257 Appendix IV Assessment Monitoring Parameters	Antimony, arsenic, barium, beryllium, cadmium, chromium, cobalt, fluoride, lead, lithium, mercury, molybdenum, selenium, thallium, radium 226 and 228 (combined)

Analytes and their method detection limits (MDLs) and reporting limits (RLs) in milligrams per liter (mg/l) for this program are listed below in Table 1-1. The RL and MDL are not applicable for radium. Radium results will have a sample-specific minimum detectable concentration (MDC).

Table 1-1:	Target	Analyte	Metals and	Inorganics
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Analyte Description	CAS Number	RL	MDL
Antimony	7440-36-0	0.00100	0.000160
Arsenic	7440-38-2	0.00100	0.000490
Barium	7440-39-3	0.00100	0.00110
Beryllium	7440-41-7	0.00020	0.0000530
Boron	7440-42-8	0.100	0.0110
Cadmium	7440-43-9	0.00020	0.0000610
Calcium	7440-70-2	1.00	0.240
Chromium	7440-47-3	0.00200	0.000600
Cobalt	7440-48-4	0.00100	0.0000210
Lead	7439-92-1	0.00100	0.000110
Lithium	7439-93-2	0.00800	0.000290
Mercury	7439-97-6	0.000200	0.0000900
Molybdenum	7439-98-7	0.00100	0.000230
Selenium	7782-49-2	0.00100	0.000250
Thallium	7440-28-0	0.00100	0.0000740
Total Dissolved Solids	STL00242	10.0	7.40
Chloride	16887-00-6	0.25	0.130
Fluoride	16984-48-8	0.0500	0.00900
Sulfate	14808-79-8	0.25	0.130
Combined Radium 226 + 228	STL02186	NA	NA

# 2.0 PROJECT ORGANIZATION AND RESPONSIBILITY

NIPSCO LLC holds responsibility for all phases of the post-closure groundwater monitoring program. NIPSCO LLC has contracted Golder to perform the groundwater monitoring program, prepare the reports, and perform

subsequent studies, if required. Golder will provide project management support to NIPSCO LLC. The various quality assurance, field, laboratory, and management responsibilities of key project personnel are provided in the flowing sections.

# 2.1 **Project Organization Chart**

Figure 1 presents the lines of authority specific to this post-closure monitoring program.

### 2.2 Management Responsibilities

### 2.2.1 NIPSCO LLC Project Manager

The NIPSCO LLC project manager (PM), to be identified prior to closure and post-closure plan approval by IDEM, will be responsible for implementing the project and has the authority to commit the resources necessary to meet project objectives and requirements. Their primary function is to ensure that technical, financial, and scheduling objectives are achieved successfully. The NIPSCO LLC PM will review the work performed on each task to verify its quality, responsiveness, and timeliness. The NIPSCO LLC PM is ultimately responsible for the preparation and quality of interim and final reports and he will approve all reports before submission to IDEM. He/she will represent the company and project team at agency meetings and public involvement activities.

### 2.2.2 IDEM Project Manager

The IDEM Project Manager, to be identified prior to closure and post-closure plan approval by IDEM, will be responsible for communicating with NIPSCO LLC and providing direction and clarification of post-closure related activities, as necessary. The IDEM PM will be the point of contact for all communication with IDEM.

#### 2.2.3 Golder Program Manager

The Golder Program Manager, Mr. Mark Haney will report to NIPSCO LLC's PM. Mr. Haney will act as the direct line of communication between Golder and NIPSCO LLC and is responsible for all Golder post-closure activities completed on behalf of NIPSCO LLC under the approved closure application. Project quality, accountability, and leadership responsibility throughout all phases of the project will be vested in the Golder Program Manager. He is the primary focal point for control of the project activities. Mr. Haney will be supported by QA personnel, who will provide reviews, guidance, and technical advice on project execution issues. The project team, consisting of supervisory, health and safety, and technical personnel, will support Mr. Haney so that the project meets professional standards, is safely executed, and complies with applicable laws, regulations, statutes, and industry codes. Individuals of the project team are responsibilities to other members of the project staff. Mr. Haney will notify NIPSCO LLC of any long-term changes in core personnel. Mr. Haney is responsible to NIPSCO LLC that the project meets the IDEM closure application approval technical objectives and quality requirements. Mr. Haney will direct the preparation of interim and final reports to IDEM as required under the closure application approval.

### 2.2.4 Golder Technical Coordinator

The Golder Technical Coordinator, Mr. James Peace, will report directly to the Golder Program Manager and will assume the responsibilities of project management in his absence. Mr. Peace will provide the overall day-to-day programmatic guidance to the field team, subcontract laboratory and driller, and support staff and will verify that post-closure monitoring-related documents, procedures, and project activities meet Golder standards for quality. He will assist Mr. Haney in developing detailed work schedules and will monitor field activities. In addition, he will fill a key role in the interpretation and reporting of findings in the post-closure monitoring reports.

### 2.2.5 Quality Assurance Coordinator

The Golder QA manager, Ms. Danielle Sylvia Cofelice, reports directly to Mr. Haney and is responsible for ensuring that Golder procedures for this project are being followed. Ms. Sylvia Cofelice has assisted Mr. Haney with the preparation of the QAPP. She will provide direction and oversight for the laboratory program and will be responsible for data validation and data quality assessment.

# 2.3 Laboratory Responsibilities

Pace Analytical Services (Pace), Indianapolis, IN and/or Greensburg, PA will be responsible for all analytical work. Ms. Tina Sayer is the Pace Program Manager for all NIPSCO LLC work with Pace. Ms. Sayer coordinates NIPSCO LLC work within the Pace laboratories and ensures that appropriate resources are committed and that project requirements are understood and met. Ms. Sayer will communicate as needed with Golder and will be responsible for providing bottles and supplies, monitoring progress in the laboratory and overseeing production and final review of all reports. NIPSCO LLC maintains contractual relationships with additional laboratories (i.e., ALS) and as necessary due to capacity, response time or other conditions, may replace Pace with ALS or another laboratory. If such change is made, Golder will provide this QAPP to the replacement lab with the caveat that the replacement lab must adhere to all other conditions of the QAPP.

# 2.4 Field Technical Staff

### 2.4.1 Field Team Leader and Health and Safety Officer

Golder will identify the field team leader prior to mobilizing to the field. This person will be the field lead geologist/engineer and field team leader for this project, as well as the Health and Safety Officer. The field team leader will coordinate field mobilization activities and be on-site during sampling activities. He/she will oversee all phases of work at the Site that generates data. Specific responsibilities include:

- Daily coordination with NIPSCO LLC personnel regarding field activities and logistical issues
- Management and supervision of all field personnel, including subcontractors
- Implementing QC requirements for field measurements and documentation of field activities
- Adhering to work schedules as established by the Project Director
- Communicating with the laboratory for timely delivery of supplies
- Advising the laboratory of any changes to scheduled sample submittals
- Performing the sampling in accordance with approved procedures and methodologies, that QA/QC samples have been collected as required, and that sampling forms, labels, chain-of-custody forms, and custody seals have been prepared correctly
- Directing the packaging and delivering or shipping samples to the laboratory
- Identifying any problems at the field team level, resolving issues in consultation with Mr. Peace and Mr. Haney
- Contributing to required reports
- The field team leader will provide as appropriate daily or weekly updates to Mr. Peace and Mr. Haney regarding progress and will report on any technical or logistical issues that arise

- Maintaining and implementing the site-specific Health, Safety, and Environmental Plan (HASEP)
- Approving any changes in the HASEP due to modifications of procedures or newly proposed site activities related to the RFI Workplan
- Providing health and safety issues coordination between the Golder Project Director, the NIPSCO LLC Project Manager, and other contractors on the project
- Resolving outstanding safety issues which arise during the conduct of site work
- Assigning health and safety-related duties to qualified field team individuals
- Checking that before personnel work on Site, acceptable medical examinations are current
- Checking the acceptability of health and safety training
- Issuing authorization, in cooperation with the project manager, to proceed with work after a STOP WORK action has been issued on Site

### 2.4.2 Additional Field Technical Staff

The Field Team will be composed of technical staff drawn from Golder's pool of company resources. The technical team staff will be utilized to gather and analyze data, and to prepare various task reports and support materials. All the designated technical team members are experienced professionals who possess the degree of specialization and technical competences required to perform the required work effectively and efficiently. Specific individual responsibilities will include:

- Provision of day-to-day assistance on technical issues in specific areas of expertise
- Maintaining field logs and transferring data for permanent storage
- Coordination and oversight of technical efforts of subcontractors assisting the field team
- Identifying problems at the field team level, resolving difficulties in consultation with the PM, implementing and documenting corrective action procedures, and providing communication between team members and upper management
- Participating in preparation of the final report

Mr. Jeffrey Neumeier, NIPSCO LLC Environmental Coordinator, will provide on-site coordination and logistical support to Golder to facilitate the field sampling program.

# 2.5 Special Training Requirements and Certification

All Golder and subcontractor field personnel on-site shall have completed OSHA training in accordance with the Code of Federal Regulations (CFR) in 40CFR 1910.120 and will have been trained regarding the requirements stated in this QAPP, and the Golder HASEP. Field auditors will require knowledge of this QAPP, Field Sampling Plan, and the Site activities to provide a complete review of field procedures.

# 3.0 QUALITY ASSURANCE OBJECTIVES FOR MEASUREMENT DATA

The overall QA objective for this program is to provide defensible results to assess groundwater conditions and to support additional project needs (e.g., remediation system design and monitoring). To meet this objective,

procedures for field sampling, laboratory analysis, COC and reporting have been developed and will be implemented that will result in data of known and acceptable quality. All aspects of the sampling and testing will adhere to rigorous QA/QC procedures.

The parameters that will be used to assess measurement data quality are precision, accuracy, representativeness, comparability, completeness, and sensitivity. These parameters are discussed in the following sections. Media-specific evaluation criteria for these parameters may be specified in the analytical method, developed by the laboratory based on their historical performance or contained in EPA guidance for data validation. Table 3-1 summarizes the quality assurance measures that will be used to evaluate measurement data quality. Data quality objectives (DQOs) are established for these on method and matrix specific bases.

Data Quality Indicator	QA Parameter
Precision	Field Duplicate Laboratory Duplicate Laboratory Spike Duplicate Matrix Spike Duplicate
Accuracy	Standard Reference Materials Matrix Spike Surrogate Spikes Initial Calibration Standards and Blanks Laboratory Control Samples Trip Blank Field Blank Method Blank
Representativeness	Holding Times and Preservation Chain of Custody Field Blanks Method Blanks
Comparability	Method Detection Limits Method Reporting Limits Sample Collection Methods Laboratory Analytical Methods
Completeness	Sample Collection Records Reported Valid Results vs. Requested Data Qualifiers Laboratory Deliverables
Sensitivity	Method Detection and Reporting Limits Compared to Project Toxicity Benchmarks

Table 3-1:	Measurement Data	<b>Quality Eva</b>	luation P	arameters
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# 3.1 Precision

Precision is the measure of the reproducibility among individual measurements of the same property, usually under similar conditions, such as multiple measurements of the same sample. Both sampling and laboratory precision will be evaluated using field duplicates; laboratory precision will also be evaluated using matrix spike/matrix spike duplicates (MS/MSDs), laboratory duplicates, and Laboratory Control Samples/Laboratory Control Sample Duplicates (LCS/LCSDs).

Precision for this program will be assessed by duplicate analyses for all parameters. The precision of measurements in environmental samples can be affected by the nearness of a chemical concentration to the

method detection limit, relative percent difference (RPD) may be high for small absolute differences, or by sample non-homogeneity. The equations to be used for precision are found in Section 11 of this QAPP.

Field duplicates, which reflect the overall precision of the sampling and analysis scheme, will be collected at a rate of one duplicate per 10 field samples for each matrix. Table 6-1 includes precision control limits for field parameters. Precision related to sample collection in the field will be monitored as the concentration difference between field duplicates. The DQO for RPD between field duplicates for samples with analyte concentrations greater than five times the reporting limit (RL) will be less than or equal to 30% for aqueous samples. The DQO for absolute concentration difference between samples with concentrations less than five times the RL will be less than or equal to the corresponding RL. If these DQO goals are not met, Golder will investigate possible causes and will discuss the results of the investigation and any effect on data usability in the data quality evaluation report.

Laboratory precision for metals analyses will be evaluated through replicate analyses of one per 20 field samples. All sample batches that do not include matrix spikes will have duplicate laboratory control sample analyses to demonstrate precision. Tables 3-2 through 3-4 include precision control limits that will be applied to evaluate laboratory performance and data quality. For sample results less than five times the RL, the precision control limit is the absolute concentration difference should be less than the RL.

### 3.2 Accuracy

Accuracy is an expression of the degree to which a measured or computed value represents the true value. Accuracy may be expressed as the percent difference between two measured values, as a percentage of the true or reference value, or as a percent recovery in those cases where spiked samples are analyzed.

Accuracy criteria for reference materials and calibration verification are specified in the analytical methods. Accuracy measurements for spiked samples can be affected by sample non-homogeneity when the compound spiked is already present in the sample as collected. In general, accuracy criteria are not applicable for matrix spikes unless the amount spiked is equal to or greater than 25% of the native concentration of that chemical.

Accuracy may also be affected by the presence of target analytes in laboratory or field blanks. Inadvertent contamination of field samples may cause false positives or bias sample results.

MS/MSD and LCS/LCSD samples are not required for total dissolved solids of radium. Tables 3-2 through 3-4 provide accuracy and precision objectives for this Closure Application.

Method	Analyte	Accuracy Water (% R)	Precision Water (% RPD)
SW846	Boron	75-125	20
6010C	Calcium	75-125	20
	Lithium	75-125	20
	Antimony	75-125	20
	Arsenic	75-125	20
	Barium	75-125	20
	Beryllium	75-125	20
	Cadmium	75-125	20
SW846 6020A	Chromium	75-125	20
	Cobalt	75-125	20
	Lead	75-125	20
	Molybdenum	75-125	20
	Selenium	75-125	20
	Thallium	75-125	20

#### Table 3-2: QC Objectives for the Analyses of Metals by Inductively Coupled Plasma Mass Spectrometry

#### Table 3-3: QC Objectives for the Analyses of Mercury

Method	Analyte	Accuracy Water (% R)	Precision Water (% RPD)
SW846 7470A	Mercury	75-125	20

#### Table 3-4: QC Objectives for the Analyses of Anions, Ion Chromatography

Method	Analyte	Accuracy Water (% R)	Precision Water (% RPD)
	Chloride	80-120	15
SW846 9056A	Fluoride	80-120	15
	Sulfate	80-120	15

# 3.3 **Completeness**

Completeness is the measure of the amount of data that is determined to be valid in proportion to the amount of data collected. Completeness will be evaluated for each method, matrix, and analyte combination to prevent misinterpretation of the data and to meet the needs of the sampling program.

The DQO for completeness for all components of this project is 90%. Data that have been qualified as estimated because the quality control criteria were not met will be considered valid for the purpose of assessing completeness. Data that have been qualified as rejected will not be considered valid for the purpose of assessing completeness.

### 3.4 Representativeness

Representativeness expresses the degree to which data accurately and precisely represents an environmental condition, characteristic of a population, parameter variations at a sampling point, or a process condition. Consideration of field conditions, sampling locations, numbers of samples, and analyses conducted are all required to ensure representativeness.

For this project, the parameters selected for analysis have been identified as metals and organics potentially associated with coal-fired utility generation. Representativeness will be ensured by compliance with the plans for both field and laboratory activities.

To achieve acceptable representativeness, sample results must not be affected by conditions that would lead to false positives or false negatives. Representativeness will also be evaluated through field and laboratory QA measures, including COC records, holding time and preservation, and field and method blanks.

# 3.5 Decision Rule

During future evaluation of post-closure groundwater monitoring data, NIPSCO LLC may use appropriate risk screening criteria, cleanup objectives, and points of compliance under current and reasonably expected future land use scenarios. NIPSCO LLC and Golder will review groundwater results considering the nature of the constituents detected, background concentrations, potential human exposure and present ecological habitats and communities, if any. Golder will develop appropriate Site-specific criteria based on remediation goals and screening levels or benchmarks.

Golder may use the following Site-specific clean-up and risk screening levels, including but not limited to:

- IDEM Remediation Closure Guide (RCG) Commercial/Industrial Screening Levels (2020)
- U.S. EPA Maximum Containment Levels (MCLs)
- Great Lakes Screening Criteria (GLI) = Tier I and Tier II Criteria for the Great Lakes System Not Adopted into Rules and Calculated Using Methodologies at 327 IAC 2-1.5-11; 13-14
- Calculated background groundwater concentration levels

# 3.6 Comparability

Comparability expresses the confidence with which one data set can be evaluated in relation to another data set. For this corrective action, comparability of data will be established using project-defined sampling and analytical methods and reporting limits and formats that are consistent with standard practices and with comparable monitoring programs. The use of common, traceable calibration and reference materials from the National Institute of Standards and Technology or other established sources will allow comparability of analytical results to those from other studies.

# 3.7 Sensitivity

A critical component of this post-groundwater monitoring program is the analytical sensitivity. To the extent feasible, analytical sensitivities as provided in Table 1.1 are consistent with potential screening criteria for human health, ecological risk and corrective measures requirements as included in the guidance cited in Section 3.5.

The MDL is defined as the minimum concentration at which a given target analyte can be measured and reported with 99% confidence that the analyte concentration is greater than zero. Laboratory RLs are defined as the lowest level that can be reliably achieved within specified limits of precision and accuracy during routine laboratory operating conditions. Laboratory MDLs and RLs have been used to evaluate the method sensitivity and/or applicability prior to the acceptance of a method for this program.

The sample-specific MDL and RL will be reported by the laboratory and will take into account any factors relating to the sample analysis that might decrease or increase these values (e.g., dilution factor, percent moisture, sample volume, sparge volume). In the event that the MDL and RL are elevated for a sample due to matrix interferences and subsequent dilution or reduction in the sample aliquot, the data will be evaluated by Golder and the laboratory to determine if an alternative course of action is required or possible.

# 3.8 Level of Quality Control Effort

Field and method blanks, field and laboratory duplicates, laboratory control samples, standard reference materials, matrix spike samples and surrogates are among those quality assurance samples critical to data quality assessment. Except where specified, the DQO goals for quality assurance parameters discussed below are not intended to be used as criteria for acceptance or rejection of data, but rather as guidance to indicate when further evaluation of data quality is needed. A summary of Method Quality Objectives (MQOs) related to these DQOs may be found in Tables 6-2 through 6-7.

### 3.8.1 Field Quality Control

Field quality control samples used to evaluate data quality are described below. The frequency of their collection is summarized in Table 3-5. Acceptance criteria for laboratory duplicates are given in Section 3.1. No analytes should be detected above the RL in field blanks.

#### Field Blanks

The field or equipment blank is a sample of reagent grade, analyte free, water poured into, over, or pumped through the sampling equipment (and if applicable, homogenization container), collected in a sample container, and transported to the laboratory for analysis in the same manner as environmental samples. These blanks are used to assess the effectiveness of equipment decontamination procedures and the potential for false positives for target analytes. Equipment blanks are prepared in accordance with American Standard Testing Method (ASTM) D 5088-90 (Practice for Decontamination of Field Equipment Used at Non-Radioactive Waste Sites) protocol and are used to monitor the effectiveness of the decontamination process. The frequency of collection of equipment rinsate blanks depends on the type of sampling and the equipment used. The equipment rinsate blank shall be analyzed for the same parameters as requested for the environmental samples collected at the sampling location.

#### **Duplicates**

Duplicate samples are collected to monitor the precision of the field sampling and analytical process as well as to provide information regarding the homogeneity of the sample matrix. One duplicate sample will be collected for every 10 samples.

Table 3-5:	Summary	of Field	<b>QC</b> Samples
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Field QC Sample	Frequency	Comments
Field Duplicate	1 duplicate per 10 field samples of each matrix	Groundwater
Field or Equipment Blank	<ol> <li>equipment blank per sample team per day based on sampling method using disposable equipment.</li> <li>equipment blank per 10 samples with non- disposable sampling equipment.</li> <li>field blank per 10 samples with dedicated sampling equipment.</li> </ol>	Groundwater sampling with pumps and disposable tubing
Matrix Spike/Matrix Spike Duplicates (MS/MSD)	1 per 20 samples matrix & matrix spike duplicates per media on a sequential basis.	Groundwater

### 3.8.2 Laboratory Quality Control

Pace has written procedures addressing internal QA/QC. These procedures are detailed in the laboratory Quality Assurance Manuals, which are attached as Appendices A and B to this document. Pace QA/QC Coordinators are required to ensure that all personnel engaged in sample handling and analysis tasks have appropriate training.

Specific laboratory quality control measures are required to determine the precision and accuracy of the analyses and to demonstrate the absence of interferences or contamination by glassware or reagents. Laboratory quality control measures will, at a minimum, be consistent with specific method requirements. Requirements for the frequency of laboratory quality control samples, acceptance criteria and corrective action requirements are summarized in Tables 6-2 through 6-7.

If laboratory DQO goals are not met, the laboratory will investigate the cause of the DQO exceedances and include a discussion of the exceedances and any impact on data usability in the case narrative. If the cause of the DQO exceedances is determined to be laboratory error, the laboratory will re-prepare and/or reanalyze the sample as appropriate. This procedure is further detailed in Section 12.0

Recovery of analytes and surrogate compounds spiked into a sample matrix that do not meet the DQO s must be reflective of the sample matrix rather than laboratory procedural bias. All matrix-related recovery problems must be adequately documented in the laboratory report and raw data. Compliance with these DQOs will be assessed by comparison if analyte and surrogate recovery in the sample matrix to laboratory performance on method blanks and blank spikes, and through the data validation and verification process.

#### Laboratory Control Samples (LCS)

The LCS is a sample of analyte-free water spiked with known concentrations of all analytes listed in the QC acceptance criteria tables for each method. Each analyte in the LCS is to be spiked at a level less than or equal to the midpoint of the analyte calibration curve.

#### Matrix Spike/Matrix Spike Duplicate (MS/MSD)

The MS is an aliquot of an environmental sample spiked with known concentrations of target analytes. The spiking occurs prior to sample preparation and analysis. Each analyte in the MS shall be spiked at a concentration less than or equal to the midpoint of the analyte calibration curve.

MS/MSD sets are prepared for organic analyses to provide measure of analytical precision and accuracy. Precision is evaluated for metals analysis by laboratory duplicates, so the MSD is not required.

Although the results of the project MS/MSDs are not used to control the analytical process, they are used to evaluate sample bias due to matrix.

#### Method Blank

The method blank is a sample of analyte-free matrix to which all reagents are added in the same volumes or proportions as are used in sample processing. The method blank monitors the presence or absence of contaminants originating from the laboratory and is required for each analysis and/or extraction batch. Method blanks for waters will be prepared from deionized laboratory water.

#### Internal Standards

Internal standards are measured amounts of certain compounds added after sample preparation or extraction. They are used in an internal standard calibration method to correct sample results for analysis efficiency. Internal standards shall be added to environmental samples, blanks, standards, and QC samples, in accordance with method requirements.

### 4.0 SAMPLING PROCEDURES

Golder selected sampling procedures to generate data of the requisite quality for the impoundment post-closure activities. A Site-specific Sampling and Analysis Plan (SAP) is provided as Appendix E to the Closure Application.

Site-specific sample identification numbers will be assigned prior to sample collection. Samples will be assigned unique field identifiers that provide information on the well location and whether the sample is a primary or QC sample. The sample/QA/QC naming conventions are detailed in Section 3.3 of the SAP and are summarized below. An example of the Site-specific sample number will consist of the following:

- Sample: GAMW-01-MMDDYY (two-digit month/day/year)
- MS: GAMW-01-MS-MMDDYY (matrix spike)
- MSD: GAMW-01-MSD-MMDDYY (matrix spike duplicate)
- FDNN-MMDDYY (Field Duplicate NN is event blank number))
- FBNN-MMDDYY (Field Blank NN is event blank number)

The laboratory will provide sample containers and will be certified clean, with traceability to specific certificate(s) from the commercial source. Bottle, preservation requirements and holding times are presented in Table 4-1.

Table 4-1:	Sample Containers,	Preservatives and Holding Times
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Analysis	Container and Volume	Preservative	Holding Time
pH, Specific Conductance, temperature, ORP, turbidity	Flow-through cell	None	15 minutes (field analysis)
Mercury (total)	Plastic, 250 mL	HNO3 to pH<2	28 days
Metals (total) except mercury	Plastic, 250 mL	HNO3 to pH<2	6 months
Total Dissolved Solids (TDS)	Plastic, 500 mL	None	7 days
Fluoride, Chloride, Sulfate	Plastic, 250 mL	None	28 days
Radium 226/228	Plastic, 2 x 1 Liter	HNO3 to pH<2	6 months

#### Sample Labels:

Each sample will have an adhesive plastic or waterproof paper label affixed to the container and will be labeled at the time of collection. The following information will be recorded on the container label with a permanent marker at the time of collection:

- Project name
- Sample identification
- Date and time of sample collection
- Preservative type (if applicable)
- Initials of sampler
- Laboratory analysis requested

#### Shipment:

Samples to be shipped to the laboratory will be properly packaged in individual plastic bags and cushioned with bubble wrap to prevent damage. They will be placed in a cooler with a signed Chain of Custody (COC) form, ice (double bagged), a temperature blank, and shall be cooled to less than four degrees plus or minus two degrees Celsius ( $4^{\circ} \pm 2^{\circ}$  C).

Samples may be shipped in coolers using an overnight courier, courier employed by the analytical laboratory, or delivered to the lab by field personnel. The shipping procedures for water samples will include the following steps:

Place packing material (e.g., bubble wrap, etc.) in the bottom of a waterproof cooler

- Seal bottles in clear plastic bags and wrap each sample bottle using bubble wrap; place sample bottles in cooler and introduce packing material around and between bottles to prevent the bottles from touching each other or the sides of the cooler
- Place a temperature blank in the cooler
- Double-bag ice plastic bags and pack in the cooler on and around bottles
- Fill the cooler with packing material
- Sign and date the COC form and place paperwork in plastic bags and attach with masking tape or duct tape to the inside lid of the cooler
- Tape the drain shut
- Close the cooler and secure the lid by taping the cooler completely around with strapping tape at two locations
- Place the lab address on top of the cooler
- Put "This Side Up" labels and "Fragile" labels on the cooler
- Affix custody seals on the front right and back left corners of the cooler, sign, and date the seals, cover seals with wide, clear tape
- Attach shipping papers to the cooler

If samples are to be hand-delivered to the laboratory by field personnel, they should be sealed in plastic bags and placed securely in a cooler with double-bagged ice and with packaging material to protect them from breakage. A temperature blank is required. COC paperwork should be completed and dated, but it will not be necessary to affix custody seals or shipping labels on the cooler.

Upon shipment, the laboratory will be notified that a sample shipment is scheduled to arrive. An effort will be made to provide the laboratory with a one-week advance notice of sample shipment.

Each shipping container will be clearly marked with a sticker containing the originator's address. Any coolers that are not hand delivered will be shipped priority for overnight delivery. Coolers that are not hand delivered to the laboratory will have a custody seal affixed to the shipping container so that the shipping container cannot be opened without breaking the custody seal.

Shipments of samples from the field to the laboratory will typically occur within 48 hours of collection. Samples requiring analyses with short holding times will be identified and designated as such on the chain-of-custody forms and will be shipped on the date of collection, if possible.

### 5.0 CUSTODY PROCEDURES

Adherence to proper documentation and COC procedures is critical for data defensibility and quality. Samples and associated data must be traceable from the point of collection to the final reported laboratory results.

### 5.1 Field Documentation and Custody Procedures

Golder will use field forms and logbooks for data collection at the Site including the following information:

- Daily Drilling Summary
- Tailgate Safety Meetings
- Boring log and monitoring well information and associated sample collection points
- Groundwater Sampling Forms (Low-flow)

The field team will scan the field forms and logbook pages. Electronic data will be transferred either daily or weekly, depending on volume of data collected, via a password protected File Transfer Protocol Site (FTP) to the data management team for import into a commercially-available environmental management system called EQuIS[®]. Data will be backed up periodically to a secure remote server.

Field team members will also keep a daily record of significant events, observations, and measurements in bound field logbooks. The sampling documentation will contain information on each sample collected, and will include at a minimum the following information:

- Project name
- Field personnel on-Site
- Facility visitors
- Weather conditions
- Field observations and any deviations from the Facility Investigation Plan (Work Plan)
- Maps, listing of photographs taken, and/or drawings
- Date and time sample collected
- Sampling method and description of activities
- Identification or serial numbers of instruments or equipment used
- Deviations from the QAPP
- Conferences associated with field investigation activities

In general, sufficient information will be recorded during sampling to permit reconstruction of the event without relying on the memory of the field personnel.

The books will be permanently bound and durable for adverse field conditions. All pages will be numbered consecutively. All pages will remain intact, and no page will be removed for any reason. Notes will be taken in indelible waterproof, blue or black ink. Errors will be corrected by crossing out with a single line, dating, and initialing. The front and inside of each field logbook will be marked with the project name, number, and logbook number. The field logbooks will be stored in the project files when not in use and upon completion of each sampling event.

Sample collection checklists will be prepared prior to each sampling program. The checklist will include location designations, types of samples to be collected, and whether any QC samples are to be collected.

# 5.2 Chain of Custodies

Once collected, samples are considered to be in one's custody if they are: (1) in the custodian's possession or view; (2) in a secured location (under lock) with restricted access; or (3) in a container that is secured with an official seal(s) such that the sample cannot be reached without breaking the seal(s).

Chain-of-custody records are used to document sample collection and shipment to a laboratory for analysis. The COC is an integral component of the sampling process and represents the permanent record of sample holding and shipment. COC(s) will be completed and sent with the samples for each shipment. If multiple coolers are sent to a single laboratory on a single day, forms will be completed and sent with each cooler.

The COC record will identify the contents of each shipment and maintain the custodial integrity of the samples. A locked seal will be placed across the front and back of each cooler containing samples when coolers are ready for shipment. All custody seals will be signed and dated. The chain-of-custody form will be cross-checked for errors and signed.

The Golder field representative will sign the "relinquished by" box and note the date, time, and air bill (if applicable). Until the samples are delivered, the custody of the samples will be the responsibility of the Golder field representative and will be kept in a secured area that is restricted to authorized personnel. A laboratory representative will check samples with their respective chain-of-custody form(s) into the laboratory, and the form will be signed and dated appropriately. The Golder field representative or staff member will retain one copy of the signed chain-of-custody form for the project files. The original chain-of-custody form will be returned to the Golder Project Manager (PM) with the analytical results to go into the project files.

# 5.3 Laboratory Sample Custody Laboratory Receipt and Log-In

The COC form will be signed on receipt by the laboratory to complete the custody chain. The condition of the samples upon receipt by the laboratory will be documented on a cooler receipt log or sample condition upon receipt form (prepared by the lab). This form will note sample integrity, preservation, temperature, custody seal condition, and will note any discrepancies between information on the sample labels and that on the chain-of-custody form.

Each sample will be logged into the laboratory system by assigning it a unique sample number. This number and the field sample identification number will be recorded on the laboratory report. Samples will be stored and analyzed according to specified EPA Methods. The original chain-of-custody form will be returned to the Golder PM for permanent storage.

#### Laboratory Sample Handling

Field samples may be held at the laboratory to form an analytical batch consisting of a maximum of 20 field samples that are of the same matrix or of similar composition, with the constraint that the method extraction and analysis holding times are not exceeded or jeopardized. Unless prevented by matrix, associated QC samples, including equipment blanks, duplicates, and project specific MS/MSDs, are to be extracted and analyzed with the field samples.

Groundwater samples shall be stored in limited access, temperature-controlled areas (refrigerators and coolers  $4^{\circ} \pm 2^{\circ}$ C, freezers less than 0° C), which are monitored for temperature during business days. All of the cold storage areas shall be monitored by thermometers which have been calibrated with a certified reference standard (the

laboratory Quality Assurance Manual (QAM) may be referenced for details regarding their sample storage policies and procedures – see Appendix A and B).

The sample holding time begins with the date (and time for samples with holding times less than 48 hours) the sample is collected and continues until the date and time the sample analysis is complete. Sample type, sample preservation, container type, volume requirements, analytical methods, and extraction and analysis holding times are summarized on Table 4-1. Samples not preserved or analyzed in accordance with these requirements may necessitate expediting the analysis (in the event the holding time is reduced) or possible resampling and reanalysis. The laboratory PM shall be responsible for prioritizing work to assure that holding times and project commitments are met. Any discrepancies will be noted on the appropriate form, and the Golder PM, or designee, will be immediately notified.

If not entirely consumed during analysis, organic analytical samples shall be stored, at least, until the analysis holding time has expired. All other analytical samples shall be kept for at least 90 days after submittal of the laboratory report. After these dates, the laboratory may dispose of all analytical samples according to local, state, and federal regulations. Unless otherwise notified by Golder, samples may be disposed 90 days after submittal if the specified laboratory report has been provided to Golder.

Analytical data records will be retained by the laboratory and in the Golder central project files. For all analyses, the data reporting requirements will include those items necessary to complete data validation, including copies of all raw data. The hardcopy deliverable requirements are specified in the Appendices of this QAPP.

All instrument data shall be fully restorable at the laboratory from electronic backup. Laboratories will be required to maintain all records relevant to project analyses for a minimum of seven years.

### 5.4 Final Evidence Files

The final evidence file will be the central repository for all documents, which constitute evidence relevant to sampling and analysis activities as described by this QAPP and includes all relevant records, reports, logs, field forms, and subcontractor reports. Golder will be responsible for the custody of the evidence files and maintain the contents of the files for the duration of the project. The files will include at a minimum:

- Field logbooks
- Field data
- Laboratory data deliverables
- Data validation reports
- Data assessment reports
- Progress reports, QA reports, interim project reports
- All original custody documentation (COC forms, airbills, etc.)
- Copies of all communications with IDEM (letters, e-mails, telephone logs)

# 6.0 CALIBRATION PROCEDURES AND FREQUENCY

# 6.1 Field Instrument Calibration

Field instruments will be calibrated daily in accordance with the manufacturer's instructions. A log will be kept of the calibration check activities for all field instruments by the field personnel. It will include the date of the calibration check, description of the check standard, the reading obtained, and the initials of the person performing the calibration check. The standards used for calibration will be commercially prepared solutions and gases obtained from reputable vendors. Expiration of solutions and gases will be checked, and they will be discarded when expiration dates are reached. Field Sampling Team will perform all calibrations of the field equipment in accordance with manufacturers' recommendations. Calibration procedures for field instrumentation are described in SAP of the Closure Application. Calibration will be done at least daily.

Table 6-1 details field calibration and quality assurance requirements for this program.

Method	Applicable Parameter	QC Check	Minimum Frequency	Acceptance Criteria	Corrective Action
SW9050A	Conductance	Calibration with KCI standard	Once per day at beginning of testing	± 5%	If calibration is not achieved, check meter, standards, and probe; recalibrate
		Field duplicate	10% of field samples	<u>+</u> 5%	Correct problem, repeat measurement
SW9040C	pH (water)	2-point calibration with pH buffers	Once per day	± 0.05 pH units for every buffer	If calibration is not achieved, check meter, buffer solutions, and probe; replace if necessary; repeat calibration
		pH 7 buffer	At each sample location	± 0.1 pH units	Correct problem, recalibrate
		Field duplicate	10% of field samples	± 0.1 pH units	Correct problem, repeat measurement
E170.1	Temperature	Field duplicate	10% of field samples	± 1.0°C	Correct problem, repeat measurement
E180.1	Turbidity	Calibration with one standard per instrument range used	Once per day at beginning of testing	$\pm$ 5 units, 0- 100 range $\pm$ 0.5 units, 0-0.2 range $\pm$ 0.2 units, 0-1 range	If calibration is not achieved, check meter; replace if necessary, recalibrate
		Field duplicate	10% of field samples	RPD 20%	Correct problem, repeat measurement

Table 6-1: Calibration and Quality Assurance Requirements for Field Analyses
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Method	Applicable Parameter	QC Check	Minimum Frequency	Acceptance Criteria	Corrective Action
ASTM D1498	Oxidation- reduction potential	Sensitivity verification	Daily	ORP should decrease when pH is increased	If ORP increases, correct the polarity of electrodes. If ORP still does not decrease, clean electrodes and repeat procedure
		Calibration with one standard	Once per day	Two successive readings ± 10 millivolts	Correct problem, recalibrate
		Field duplicate	10% of field samples	± 10 millivolts	Correct problem, repeat measurement
E360.1	Dissolved oxygen	Field duplicate	10% of field samples	RPD < 20%	Correct problem, repeat measurement

All corrective actions shall be documented, and the records shall be maintained by Golder.

# 6.2 Laboratory Instrument Calibration

All the methods cited for this program have specific calibration requirements. In addition, those methods which rely on mass spectrometry (volatile and semi-volatile organics and metals by ICP/mass spectrometry) define instrument tuning requirements which must be satisfied prior to sample analyses.

Tables 6-2 through 6-7 detail the laboratory calibration and quality assurance requirements for each method.

### Table 6-2: Analytical Quality Control Requirements for the Analyses of Metals by EPA Method 6010C

QC Check	Minimum Frequency	Acceptance Criteria	Corrective Action
Initial calibration (minimum 1 standard and a blank)	Daily initial calibration prior to sample analysis	If more than one standard is used, correlation coefficient must be 0.995	If applicable, correct problem and repeat initial calibration
Initial calibration verification (second source)	Daily after initial calibration	All analytes within ±10% of expected value	Correct problem then repeat initial calibration
Calibration verification (Instrument Check Standard)	After every 10 samples and at the end of the analysis sequence	All analyte(s) within ±10% of expected value and RSD of replicate integrations <5%	Repeat calibration and reanalyze all samples since last successful calibration
Calibration blank	After every calibration verification	No analytes detected above RL	Correct problem then analyze calibration blank and previous 10 samples
Low level calibration check standard (at or below RL)	Once per analytical batch prior to sample analysis unless multi-point (3+) calibration with low std at or below RL is performed	All analyte(s) with ± 50% of expected value	Correct problem then reanalyze
Linear range calibration (high) check standard	Every three months	Analyte within ± 10% of expected value	Correct problem then reanalyze or re- set linear range
Method blank	One per analytical batch	No analytes detected above RL	No corrective action taken if MB > RL if samples are ND or if sample conc. > 10x the MB contaminant level. If any samples have analytes detected at < 10x the blank, correct problem then re- prep and analyze method blank and affected samples processed with the contaminated blank
Interference check solution (ICS)	At the beginning of an analytical run	Within ±20% of expected value	Terminate analysis; correct problem; reanalyze ICS; reanalyze all affected samples

QC Check	Minimum Frequency	Acceptance Criteria	Corrective Action
LCS for the analyte	One LCS per analytical batch	QC acceptance criteria, 80%- 120% of expected results	Correct problem then reanalyze If still out, re-prep and reanalyze the LCS and all samples in the affected NIPSCO LLC batch
Dilution test	Each new sample matrix, at least once per analytical batch (only applicable for analytes with concentrations >50X MDL)	Fivefold (1+4) dilution must agree within ±10% of the original determination	Perform post digestion spike addition
Post digestion spike addition	When dilution test fails or if an analyte's concentration for all samples in a batch is less than 50X MDL	Recovery within 75-125% of expected results	Check for instrumental problem then reanalyze post digestion spike addition if appropriate
MS	One MS per every 20 NIPSCO LLC project samples per matrix	QC acceptance criteria, 75-125% of expected results	none
MDL study	Once per 12-month period	Detection limits established shall be < the RLs	none

Table 6-3:	Analytical Quality	Control Requirements for	the Analyses of Metals	by EPA Method 6020A
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QC Check	Minimum Frequency	Acceptance Criteria	Corrective Action°
MS tuning sample	Prior to initial calibration and calibration verification	SW6020A paragraph 5.8	Retune instrument then reanalyze tuning solution
Initial calibration (minimum 1 standard and a blank)	Daily initial calibration prior to sample analysis	If more than one standard is used, correlation coefficient must be 0.995	If applicable, correct problem and repeat initial calibration
Calibration blank	Before beginning a sample run, after every 10 samples and at end of the analysis sequence	No analytes detected above RL	Correct problem then analyze calibration blank and previous 10 samples
Initial Calibration verification (Second source standard)	After initial calibration before beginning a sample run — at a concentration other than used for calibration	All analytes within ±10% of expected value	Correct problem then repeat initial calibration
Continuing Calibration verification	After every 10 samples and at the end of the analysis sequence	All analytes within ±10% of expected value	Correct problem then repeat calibration and reanalyze all samples since last successful calibration
Low level calibration check standard (at or below RL)	Once per analytical batch prior to sample analysis unless multi-point (3+) calibration with low std at or below RL is performed	All analyte(s) with ± 50% of expected value	Correct problem then reanalyze
Linear range calibration (high) check standard	Every three months	Analyte within ± 10% of expected value	Correct problem then reanalyze or re-set linear range
Method blank	One per analytical batch	No analytes detected above RL	Correct problem re-prep and analyze method blank and all samples processed with the contaminated blank

QC Check	Minimum Frequency	Acceptance Criteria	Corrective Action°
Interference check solutions (ICS-A and ICS-AB)	At the beginning and end of an analytical run or once during a 12- hour period, whichever is more frequent	ICS-A: All non-spiked analytes < RL unless they are a verified trace impurity from one of the spiked analytes ICS-AB: Within ±20% of true value	Terminate analysis; locate and correct problem; reanalyze ICS; reanalyze all affected samples
LCS for the analyte	One LCS per analytical batch	QC acceptance criteria, 80-120% of expected results.	Correct problem then reanalyze
Dilution test	Each matrix in an analytical batch (only applicable for analytes with concentrations >100X MDL)	Five-fold (1+4) dilution must agree within ±10% of the original determination	Perform post digestion spike addition
Post digestion spike addition	When dilution test fails or if an analyte's concentration for all samples in a batch is less than 100x MDL	Recovery within 75-125% of expected results	Dilute the sample; reanalyze post digestion spike addition
MS	One MS per every NIPSCO LLC project samples per matrix	QC acceptance criteria, 75-125% of expected results.	none
Internal Standards (ISs)	Every sample	IS intensity within 30-120% of intensity of the IS in the initial calibration	Perform corrective action as described in method SW6020A, Section 8.3
IDL study	Every three months	Detection limits established shall be <1 the RLs in Table 7.2.16-1	none
MDL study	Every 12 months		

All corrective actions associated with NIPSCO LLC project work shall be documented, and all records shall be maintained by the laboratory.

### Table 6-4: Analytical Quality Control Requirements for the Analyses of Mercury by EPA Methods 7470A/7471B

QC Check	Minimum Frequency	Acceptance Criteria	Corrective Action
Initial multipoint calibration (minimum 5 standards and a blank)	Daily initial calibration prior to sample analysis	Correlation coefficient >0.995 for linear regression	Correct problem then repeat initial calibration
Second-source calibration check standard	Once per initial daily multipoint calibration	Analyte within ±10% of expected value	Correct problem then repeat initial calibration
Calibration blank	Once per initial daily multipoint calibration	No analyte detected above RL	Correct problem then reanalyze calibration blank and all samples associated with blank
Calibration verification	After every 10 samples and at the end of the analysis sequence	The analyte within ±20% of expected value	Correct problem then repeat calibration and reanalyze all samples since last successful calibration
Method blank	One per analytical batch	No analytes detected above RL	No corrective action taken if MB > RL if samples are ND or if sample conc. > 10x the MB contaminant level. If any samples have analytes detected at < 10x the blank, correct problem then reprep and analyze method blank and all affected samples processed with the contaminated blank
LCS for the analyte	One LCS per analytical batch	QC acceptance criteria, 80-120% of expected results	Correct problem then reanalyze. If still out, re-prep and reanalyze the LCS and all samples in the affected AFCEE batch
Dilution Test	Each matrix in an analytical batch (only applicable for samples with concentrations >25X MDL)	Five-fold (1+4) dilution must agree within ±10% of the original determination	None
MS/MSD	One MS per every 20 NIPSCO LLC project samples per matrix	QC acceptance criteria, 75-125% of expected results	None

QC Check	Minimum Frequency	Acceptance Criteria	Corrective Action
MDL study	Once per 12-month period	Detection limits established shall be < the RLs	None

All corrective actions associated with NIPSCO LLC project work shall be documented, and all records shall be maintained by the laboratory.

Table 6-5: Analytical Quality	Control Requirements for the	e Analyses of Anions,	Ion Chromatography 9056A_28D

QC Check	Minimum Frequency	Acceptance Criteria	Corrective Action
Laboratory control standard/ Initial calibration verification	Daily initial calibration prior to sample analysis	Analyte within ±10% of expected value	Correct problem then repeat initial calibration
Calibration blank	Prior sample analysis, following every 10 samples, and at the end of the analytical set	No analyte detected above RL	Correct problem then reanalyze calibration blank and all samples associated with blank
Calibration verification	After every 10 samples and at the end of the analysis sequence	The analyte within ±20% of expected value	Correct problem then repeat calibration and reanalyze all samples since last successful calibration
Duplicate sample	One per every 10 samples or per sample set, whichever is greater	<20% RSD for samples greater than RL	Re-prepare & re-analyze sample and duplicate once. Visually check sample for homogeneity. Discuss in narrative.
MS/MSD	One MS per every 20 NIPSCO LLC project samples per matrix	QC acceptance criteria, 80-120% of expected results	None

All corrective actions associated with NIPSCO LLC project work shall be documented, and all records shall be maintained by the laboratory.

QC Check	Minimum Frequency	Acceptance Criteria	Corrective Action
Initial porcelain capsule check before analysis	Repeat weight measurement for 3 capsules per batch	Duplicate determination should agree within 5% of their average	Replace capsule
Analysis replicates	Triplicates every batch	RSD <20%	Re-run affected samples if possible or qualify data if re-run not possible.
Accuracy check laboratory fortified blank (LFB) containing NaCl 10 g/L	Once per batch	NaCl within ±20% of expected value	Re-run fresh LFB, if fails, re-run affected samples.
Laboratory blank	Once per batch	<2 mg/L	Investigate problem; reanalyze samples.

### Table 6-6: Analytical Quality Control Requirements for the Analyses of Total Dissolved Solids by EPA method 2540C_Calcd

All corrective actions associated with NIPSCO LLC project work shall be documented, and all records shall be maintained by the laboratory.

# Table 6-7: Analytical Quality Control Requirements for the Analyses of Radium 226 and 228 by EPA Methods 903.1 (Radium 226), EPA 904.0 (Radium 228)

QC Check	Minimum Frequency	Acceptance Criteria	Corrective Action
Method Blank	1 per batch of 20 (or 5% frequency)	No detects above MDC	Correct problem and reanalyze affected samples if possible or qualify data if re-run not possible.
Blank Spikes	1 per batch of 20 (or 5% frequency)	QC acceptance criteria 70-130% of expected results	Correct problem and reanalyze affected samples if possible or qualify data if re-run not possible.
Laboratory Duplicate	Minimum frequency of 10%	RER <3	Reanalyze affected samples once. If still high discuss in laboratory narrative.
Tracer/Carrier Limits	All blanks, QC samples, and samples	QC acceptance criteria of 40-110% of expected results	No corrective action taken if recovered above QC acceptance criteria and result is <mdc. Otherwise, correct problem then reanalyze associated samples.</mdc. 



All corrective actions associated with NIPSCO LLC project work shall be documented, and all records shall be maintained by the laboratory.

# 7.0 INTERNAL QUALITY CONTROL CHECKS

# 7.1 Field Quality Control Checks

QC requirements and criteria for the field measurements are provided in Table 6-1 of this document. Assessment of field sampling precision and bias will be made by collecting field duplicates and equipment blanks. Collection of samples will be in accordance with the SAP provided in the Closure Application (Appendix E).

# 7.2 Laboratory Quality Control Checks

Each Pace lab has QC programs in place to ensure the reliability and validity of the analyses conducted and the data reported. All analytical procedures to be used for this program are documented in SOPs, as included in Appendices A and B to this QAPP.

All analysts supporting the NIPSCO LLC program will have completed a demonstration of proficiency by meeting method criteria for accuracy and precision criteria through replicate preparation and analyses of check standards. Other internal QC checks required are method-specific and have been included in Tables 6-2 through 6-7 of this document. Those tables also provide required corrective actions when QC criteria are not met.

All data will be properly recorded and stored by the laboratory. Data package requirements, as listed in Appendices, will allow Golder to reconstruct the reported results and QC measurements from raw data. All samples for which QC results indicate noncompliance will be reanalyzed by the laboratory if sufficient volume is available.

# 8.0 PERFORMANCE AND SYSTEM AUDITS

System audits and performance audits of field and laboratory activities may be performed to check compliance with the sampling and analytical directives. These audits will verify that sampling and analysis activities are performed in accordance with the established procedures. The QA Coordinator will be responsible for these audits.

# 8.1 Field Audits

### 8.1.1 Internal Field Audits

At the beginning of the project, the Golder Field Team Leader or Project Manager will conduct a thorough audit of field calibration, sampling, decontamination, and documentation procedures to verify that all staff are compliant with the requirements of the Closure Application, SAP, and this QAPP.

Field audits shall be performed by Golder field staff daily by a cross-checking the field logs, the Sample Collection Logs, the chain-of-custody, and the sample containers. Daily cross checking confirms sample identity, sample integrity, and sampling procedures and will be completed by the sampler prior to shipping the samples. Additionally, the field logs and the chain-of-custody will be sent to the Golder QA/QC Manager or Project Manager by facsimile for additional verification. NIPSCO LLC staff may conduct field audits at any time during the program.

# 8.1.2 External Field Audits

External field audits may be conducted by the IDEM Program Manager or his designee at any time. These audits may or may not be announced.

# 8.2 Laboratory Audits

# 8.2.1 Internal Laboratory Audits

Laboratory performance and system audits are addressed in the laboratory QAMs. Pace internal audits consist of general audits and specific procedure audits. A general audit is an overview of the whole laboratory from sample receipt to sample disposal for compliance with the QAM. A specific technical audit is a detailed in-depth review of an actual method or procedure. Internal audits are conducted on a scheduled basis both by the individual laboratory QC Managers and by Pace Corporate QA managers.

After the general and/or specific audits have been conducted, the laboratory QA manager completes a laboratory audit record form. Any issues, observations, and findings are discussed with the Laboratory Manager. The Laboratory Manager, Laboratory QA Manager, and other laboratory staff as necessary, suggest and implement corrective actions. The results of the audit are kept on file along with any corrective action taken. If, because of the audit, there is uncertainty as to the validity or correctness of a test result, immediate corrective action will be taken, and the client notified in writing.

Pace internal audits also involve the preparation and analysis of blind QC samples submitted through Pace's Corporate Quality Assurance Program. Results of these are used to evaluate the ongoing performance of the laboratory.

# 8.2.2 External Laboratory Audits

NIPSCO LLC maintains a formal laboratory audit program for their contracted laboratories. Independent environmental QA professionals are retained to support the NIPSCO LLC Laboratory Coordinator by conducting comprehensive system and performance audits. NIPSCO LLC has audited the Pace Indianapolis facility and determined that staff and instrumentation resources, procedures and systems are in place to provide data of the requisite quality for this program. Pace's Greensburg, PA laboratory has been audited by state and federal agency auditors and hold appropriate certifications. Each lab routinely participates in performance testing programs.

# 9.0 PREVENTATIVE MAINTENANCE

# 9.1 Field Instrument Preventative Maintenance

In accordance with the QA program, Golder shall maintain an inventory of field instruments and equipment. The frequency and types of maintenance will be based on the manufacturer's recommendations and/or previous experience with the equipment.

The Golder Field Team Leader will be responsible for the preparation, documentation, and implementation of the preventative maintenance program. Golder anticipates using rental equipment and will periodically switch out pieces of equipment to allow the required maintenance while not sacrificing productivity. The Golder Project Manager, or designee, shall maintain the equipment calibration records received from the rental company and be responsible for verifying compliance with this section.

# 9.2 Laboratory Preventative Maintenance

In accordance with the QA program, the laboratories shall maintain an inventory of instruments and equipment and the frequency of maintenance will be based on the manufacturer's recommendations and/or previous experience with the equipment.

The laboratory preventative maintenance program, as detailed in their QA Plan, is organized to maintain proper instrument and equipment performance, and to prevent instruments and equipment from failing during use. The program considers instrumentation, equipment and parts that are subject to wear, deterioration or other changes in operational characteristics, the availability of spare parts, and the frequency at which maintenance is required. Any equipment that has been overloaded, mishandled, gives suspect results, or has been determined to be defective will be taken out of service, tagged with the discrepancy noted, and stored in a designated area until the equipment has been repaired. After repair, the equipment will be tested to ensure that it is in proper operational condition. The client will be promptly notified in writing if defective equipment casts doubt on the validity of analytical data.

Laboratory Group Supervisors will be responsible for the preparation, documentation, and implementation of the preventative maintenance program. All maintenance records will be checked according to the schedule on an annual basis and recorded by the responsible individual. The laboratory QA Officer, or designee, shall be responsible for verifying compliance.

# 10.0 SPECIFIC ROUTINE PROCEDURES TO EVALUATE DATA PRECISION, ACCURACY AND COMPLETENESS

As part of the data validation process, results for quality assurance measurements will be compared to the data quality objectives as presented in Section 3. In addition, the data will be reviewed for evidence of matrix interferences that may have biased results, cross contamination from field or laboratory activities, and any deviations from sampling and storage requirements that may have affected the integrity of the sample. The following calculations will be conducted as the first step of evaluating data quality for precision, accuracy, and completeness.

# 10.1 Precision

The relative percent difference between field duplicates, laboratory duplicates and matrix spike/matrix spike duplicates will be calculated as measures of precision.

_____

((measured value + measured duplicate value)/2)

x100

Results that fall outside of the program objectives will be evaluated for evidence of possible sample non-

homogeneity or possible bias from sampling or laboratory activities.

RPD=

# 10.2 Accuracy

For calibration verification and continuing calibration check standards and laboratory control samples, recoveries are calculated in accordance with the following equation:

% Recovery = <u>Measured Concentration</u> X 100 Known concentration

Surrogate spike recoveries are calculated according to a comparable equation:

% Recovery = <u>Measured concentration x 100</u>

Expected concentration based on known amount added

Matrix spike recoveries will be calculated in accordance with the equation below:

Percent recovery = (amount in spike sample - amount in sample) x 100 Known amount added

### **10.3 Completeness**

Completeness will be calculated as follows:

#### number of valid measurements

Completeness = total number of data points x 100 planned

Completeness will be calculated on an analysis basis. Although the program goal is greater than 90% completeness, professional judgment will be applied to evaluate the impact of any data gaps on the overall objectives of the program.

### 10.4 Assessment of Data

Data collected during the CCR groundwater monitoring program will be used to evaluate the nature and extent of possible impacts to Site groundwater. The QC results associated with each analytical parameter will be compared to the objectives of Section 3 in this QAPP. EPA guidance for data verification (EPA 2004) and for data usability in risk assessment (EPA 1992) will serve as the basis for final recommendations on data acceptance for decision making purposes.

Elements considered in this data usability report will include:

- Compliance of sampling methods with the SAP
- Compliance of analyses with QAPP methods and QC requirements
- Completeness of sampling effort
- Completeness of laboratory analyses
- Resolution of corrective action requirements
- Detection limits achieved
- Validation findings
- Specific needs for human health and ecological risk assessments, if needed
- Specific needs for remedial options

Golder will prepare a data usability report, incorporating the findings of the validation effort and other supporting information. This assessment will evaluate data on a matrix specific, analyte-specific, and location specific basis. The potential impact of any sampling discrepancies or data qualifications (rejected or estimated) on the intended uses for risk assessment will be discussed, with recommendations for further actions if necessary and appropriate.

# **11.0 CORRECTIVE ACTION**

Any NIPSCO LLC or Golder project team member may initiate the field corrective action process. This process consists of identifying a problem, acting to eliminate the problem, documenting the corrective action, monitoring the effectiveness of the corrective action, and verifying that the problem has been eliminated. Although not all inclusive, examples of corrective actions for field measurements may include the following:

- Repetition of a measurement to check the error
- Resample the groundwater monitoring well if the container breaks
- Check for all proper adjustments for ambient conditions such as temperature
- Check of batteries
- Calibration checks
- Recalibration
- Replace instruments or measurement devices
- Stop work (if necessary)
- Revisions to information submitted on chain-of-custody forms
- Amendment of sampling procedures or Work Plans

Technical staff and project personnel will be responsible for reporting all technical or QA non-conformances or suspected deficiencies of any activity or issued document by reporting the situation to the PM and the QA/QC Coordinator on a Nonconformance Report (NCR). The QA/QC Coordinator will be responsible for assessing the suspected deficiency based on the potential for the situation to impact the quality of the data.

The Field Team Leader, or a designee, will be responsible for correcting equipment malfunctions throughout the field sampling effort and resolving situations in the field that may result in nonconformance or noncompliance with the QAPP. All corrective measures will be immediately documented in the field logbook, and sample alteration forms will be completed.

Additional corrective actions, if necessary, will be determined by the Project Manager. The Project Manager has the authority to initiate stop work orders, if necessary, and is responsible for ensuring that a corrective action for a nonconformance is initiated.

If appropriate, the Project Manager will be responsible for ensuring that no additional work that is dependent on the nonconforming activity is performed until the corrective action(s) is completed.

### **Laboratory**

All laboratories are required to comply with the standard operating procedures previously submitted to the Project QA/QC Manager. The laboratory project managers will be responsible for ensuring that appropriate corrective actions are initiated as required for conformance with this QAPP. All laboratory personnel will be responsible for reporting problems that may compromise the quality of the data.

The Project QA/QC Manager will be notified immediately if any QC sample exceeds the project-specified control limits. The analyst will identify and correct the anomaly before continuing with the sample analysis. The

Laboratory Project Manager will document the corrective action taken in a memorandum submitted to the Project QA/QC Manager within five days of the initial notification. A narrative describing the anomaly, the steps taken to identify and correct it, and the treatment of the relevant sample batch (i.e., recalculation, reanalysis, re-extraction) will be submitted with the data package using a corrective action form. Copies of each laboratory's corrective action forms are found in their Quality Assurance Manuals.

# 12.0 QUALITY ASSURANCE REPORTS TO MANAGEMENT

Quality assurance reports to management include verbal status reports and written reports on field sampling activities, laboratory processes, data validation reports and final project reports. These reports shall be the responsibility of the QA/QC Manager.

Progress reports will be prepared by the Field Team Leader following each sampling event. The Project QA/QC Manager will also prepare progress reports after the sampling is completed and samples have been submitted for analysis, when information is received from the laboratory, and when analysis is complete. The status of the samples and analysis will be indicated with emphasis on any deviations from the QAPP. A data report will be written after validated data are available for each sampling event. These reports will be delivered electronically to the Golder and NIPSCO LLC project managers.

# **13.0 DATA REDUCTION, VALIDATION AND REPORTING**

This section describes the Data Management Plan (DMP) used by project staff responsible for field sampling, laboratory analysis, data validation, data evaluation and interpretation, and report preparation. Procedurally, all data generated by field and laboratory activities will be reduced and validated prior to reporting, including those data necessary for inclusion in both quarterly progress and investigation findings reports.

# 13.1 Data Reduction

Data reduction is the process by which original data (e.g., analytical measurements) are converted or reduced to a specified format or unit to facilitate analysis of the data.

### 13.1.1 Field Data Reduction Procedures

Golder will obtain RFI field measurements with instruments that provide direct readings for the parameters of interest (e.g., pH, specific conductivity). Field data will be recorded in a Site- and project-specific field logbook and/or field form immediately after measurements are made.

### 13.1.2 Laboratory Data Reduction Procedures

Laboratory data reduction requires that all aspects of sample preparation that could affect the test result, such as sample volume analyzed or dilutions required, be considered in the final result. It is the laboratory analyst's responsibility to reduce the data, which are subjected to further review by the Laboratory Project Manager, the Project Manager, the Project QA/QC Coordinator, and independent reviewers, if applicable. Data reduction may be performed manually or electronically. If data reduction is performed electronically, the user must demonstrate that the software is valid and free from unacceptable error.

# 13.2 Data Validation

### 13.2.1 Procedures Used to Validate Field Data

The Field Team Leader or designee will perform a review of field data and records as soon as reasonably possible following the completion of field activities and demobilization to confirm that they are complete and accurate including:

- Field Log Information
- Field Groundwater Measurement Results
- Groundwater Sample Collection Log
- Daily Sample Checklist
- Chain-of-Custody
- Sampling Methodology
- Instrument Selection and Use Including Calibration and Standardization
- Field Deviations
- Sampling Limitations

The sampling team member responsible for filing out the field forms and/or entering data into the logbook will sign the document(s). The Field Team leader will review and initial the field form and/or logbook to verify that the sample team followed the recording procedures.

### 13.2.2 Procedures Used to Validate Laboratory Data Laboratory Validation

Prior to submitting analytical data to Golder, the laboratory must verify compliance with the method requirements. The laboratory will follow their Quality Assurance Manual (QAM), Standard Operating Procedures (SOPs), and this project Quality Assurance Project Plan (QAPP) for all sample analyses. The laboratory will also be responsible for the oversight of the data quality for all analyses. The laboratory QA Officer will address and resolve any sample integrity issues, discrepancies with the chain of custody, or concerns with the analysis.

For each level, the review process shall be documented, signed, and dated by the reviewer. Each step of this review process shall include the evaluation of data quality based on both the results of the QC data and the professional judgment of those conducting the review

The first level of review, by the analyst, shall include QC review, method compliance, and documentation accuracy. For data that are manually processed, all steps in the computation shall be provided including equations used and the source of input parameters such as response factors, dilution factors, and calibration constants, and shall be initialed and dated by the analyst and attached to the data sheets. For data entered into the computer, the analyst shall verify the sample specific and project specific information (i.e., project numbers, sample numbers, units, dilution factors).

The second level of review shall be performed by a supervisor, another analyst, or data review specialist. The function of this review is to provide an independent, complete peer review of the analytical data. This review shall include the review of QC performance, method compliance, documentation, calibrations, and identifications.

A third level of review is performed by the laboratory Program Manager, QA Officer, or designee. This review shall provide a total overview of the data package to ensure its compliance with project requirements. All errors and nonconformances noted shall be corrected and/or documented.

Complete review of raw data and all records may be conducted on randomly selected data packages by the laboratory QA Manager or designee. Every hardcopy data deliverable in the selected package shall be reviewed to ensure compliance with all requirements and review performance.

Non-conformance reports (NCRs) will be required for any errors noted. In all cases, an NCR shall be issued with the name of the individual reporting the issue, a description of the noncompliance issue, the corrective action taken, the date the issue was discovered, and the affected project samples. All employees are responsible for reporting the nonconformance. The appropriate supervisor is responsible for assuring that the corrective actions are taken.

### 13.2.3 Independent Data Validation

The Golder QA Coordinator, or designee, will review the definitive analytical chemistry data provided by the subcontract laboratory for the groundwater samples to Stage 2A as defined by Guidance for Labeling Externally Validated Laboratory Analytical Data for Superfund Use (EPA-540-R-08-005, January 2009). As provided by a Stage 2A review, the sample-related QC for the samples will be reviewed for compliance with the measurement performance criteria defined in this QAPP. Specifically, the sample holding times, frequency of QC samples, method blanks, surrogate recoveries, LCS recoveries, MS/MSD recoveries, and field quality control samples such as trip blanks and field duplicates will be evaluated relative to the specific QC criteria presented in the QAPP and the current laboratory QC limits.

Should data quality deficiencies be identified, the data reviewer will qualify the results following USEPA Contract Laboratory Program (CLP) National Functional Guidelines for Organic Data Review (USEPA, 2017) and USEPA CLP National Functional Guidelines for Inorganic Superfund Data Review (USEPA, 2017), as applicable to the analytical methods utilized. Professional judgement will be used to account for any differences in QC criteria between the analytical methods used and the CLP methods underlying the Functional Guidelines. The data reviewer will prepare a summary of findings to be used as an input into the data usability evaluation.

# 13.3 Data Reporting

### 13.3.1 Field Data Reporting

Field data will be documented in field logbooks and/or field forms. These data will be incorporated into tables for the report.

### 13.3.2 Laboratory Data Reporting

Hard-copy data reports submitted to Golder will include at a minimum the following deliverables:

- A case narrative, discussing analytical problems, if any, and referencing or describing the preparation and analytical procedures and instrumentation used. In addition, the samples associated with the deliverable should be listed.
- Chain of Custody forms.
- Cross reference of laboratory IDs to Field IDs.

- Sample log-in/receipt records.
- Sample preparation records.
- Tabulated results, including final dilution volume of sample extracts, concentrations of compounds of interest, sample specific method detection limits and reporting limits.
- All data qualification codes assigned by the laboratory, their description, and explanations for all departures from the analytical protocols.
- Initial and continuing calibration summaries, data, and associated calculations.
- Method blanks associated with each sample, quantifying all compounds of interest identified in these blanks.
- Recovery assessments and replicate sample summaries, including surrogate and matrix spike recoveries and precision for sample duplicate analyses.
- Internal standard area and retention time summaries.
- GC Retention time summaries.
- Laboratory control samples associated with each sample, quantifying all compounds of interest.
- Copies of instrument run logs.
- Labeled chromatograms and integration tables for all samples, standards, blanks, and QC analyses.
- Copies of instrument tunes.

# 13.4 Data Management and Analysis

Golder will use EQuIS[®] (Environmental Quality Information System) to electronically manage groundwater quality, water level elevation, field information, and geological data. EQuIS[®] is an enterprise wide environmental data management system written in the Microsoft NET Framework and is hosted at Golder in a Microsoft SQL Server environment. Only authorized Golder personnel have access to the database.

EQuIS[®] uses a variety of tools and business rules to enforce data quality and provides links to many third-party tools commonly used for data visualizations and data analysis (e.g. GIS, Surfer, EVS/MVS®). Golder will acquire, check, and load the laboratory analytical data into EQUIS[®] for secure tracking and reporting of data.

The laboratory analytical data will be acquired, checked, and loaded into EQuIS® using the following methods:

- Field samples will be collected following the procedures outlined in the SOPs and converted to PDF file format and stored on the network project directory.
- Monitoring well information will be imported into the project-specific EQuIS[®] database application.
- Samples will be delivered to the laboratory for analytical testing. Copies of the COC and field sample forms will be sent by overnight courier or scanned to electronic copy and e-mailed to the Golder Project Manager.
- Survey information will be imported and managed in the EQuIS[®] data management system.
- Following sample analysis, the laboratory will produce and e-mail Electronic Data Deliverables (EDDs) to the Golder Project Manager. Golder will upload the EDDs into EQuIS[®] via the EQuIS[®] Data Processor (EDP)

along with additional information from the field forms. The data added to the EDDs will include, but are not limited to:

- Sample location codes
- Sample matrix codes
- Sample type codes
- Parent sample codes for replicate samples
- Sample delivery group codes

Golder personnel will check the information (e.g., time stamps for proper format and test information) and revise, as necessary. The EQuIS[®] EDP will check the EDDs for common laboratory errors, such as chronological event errors, duplicate rows, orphan samples, and inconsistencies with the EQuIS[®] system's valid value tables. Once the data are checked and reviewed, Golder will upload the EDD packages into the database. The data will then be available to be queried and reported by EQuIS[®] Enterprise or EQuIS[®] Professional.

Golder may perform data analysis using several different tools, including Geographical Information System (GIS). These tools will allow Golder to quantify both nature and extent of contamination at the site as well as statistical significance of existing sample data and potential future sample locations.

# **13.5 Data Presentation Format**

EQuIS® Enterprise is a read-only web-based reporting function through which data will be processed and reported through a set of customizable pre-designed functions. EQUIS® Professional provides additional format functionality, such as cross-tabbing, trend graphs and isopleths for export to different formats, including Microsoft Excel®. Golder will use a combination of these tools to present analytical result data tables and trend graphs for the Work Plan reports.

Additionally, Golder may use EVS/MVS[®] modeling to evaluate the distribution of chemicals in groundwater. Three-dimensional simulations of chemical distribution, along with chemical mass estimates, will be useful to help evaluate potential future assessment needs and/or remedial measures, if needed.

Specifically, the use of EVS/MVS® will provide the following items in an efficient manner:

- Visual understanding of chemical distribution
- Potential source areas and volumes to focus remedial technology evaluations
- Information for assessment of future end use options, if applicable

# 13.6 Project Filing Procedures

Field and analytical data, and associated reports generated by Golder and its subcontractors in performance of the work will be maintained in the Golder Manchester, New Hampshire office. Golder will maintain the records in accordance with our standard document control protocols.

## 14.0 REFERENCES

IDEM Remediation Closure Guide - March 2018.

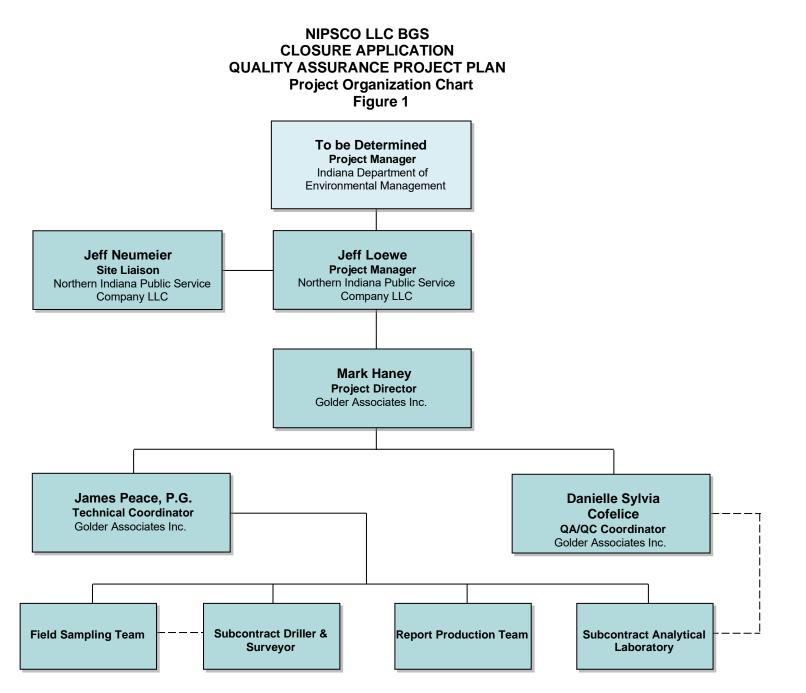
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Figures





APPENDIX A

Pace Indianapolis, Indiana Quality Assurance Manual



# **Document Information**

Document Number:	Revision:
Document Title:	
Department(s):	
Data Information	

Date Information

**Effective Date:** 

Notes

**Document Notes:** 

All Dates and Times are listed in:

**Document Number:** ENV-MAN-IND1-0001 **Title:** Quality Manual

All dates and times are in Central Time Zone.

### ENV-MAN-IND1-0001 Quality Manual

### **QM** Approval

Name/Signature	Title	Date	Meaning/Reason
Elizabeth Schrage (008534)	Manager - Quality	31 Jan 2020, 10:41:35 AM	Approved

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Joyce Sarapata (008874)	Supervisor	31 Jan 2020, 12:53:26 PM	Approved
Sarah Potts (007977)	Manager	31 Jan 2020, 01:07:01 PM	Approved
Melanie Booms (005590)	Project Manager 1	31 Jan 2020, 01:55:14 PM	Approved
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Richard Bowman (009334)	Systems Administrator	03 Feb 2020, 11:05:03 AM	Approved
Jennifer Rice (005579)	Supervisor	03 Feb 2020, 03:35:28 PM	Approved
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# TITLE PAGE

# LABORATORY QUALITY MANUAL

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# Manual Approval Signatories

Approval of this manual by managerial personnel is recorded on the Signature Manifest located before the Title Page of this manual.

The individuals listed below represent the management team that was in place on the effective date of this version of the manual for the following location:

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Each of the following individuals is a signatory for the manual for the location listed above. The application of their signature to the manual signifies their commitment to communicate, implement, and uphold the requirements, policies and procedures specified in this manual and their commitment to continuously improve the effectiveness of the quality management system based on customer feedback and internal assessment.

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¹ Members of the local management team are subject to change during the life-cycle of this document version.

² Include if different from the physical address and phone number of the facility.

³This individual serves as an Acting Technical Manager for TNI for one or more fields of accreditation.



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### 1.0 **PURPOSE AND SCOPE**

### 1.1 Purpose

This quality manual (manual) outlines the quality management system and management structure of the laboratories and service centers affiliated with Pace Analytical Services, LLC (PAS). A laboratory is defined by PAS as any PAS facility, however named, that provides testing, sampling, or field measurement services. When the term 'laboratory'' is used in this manual, the term refers to all locations listed on the Title Page of this manual and in Section 4.1.3 unless otherwise specified.

The PAS quality management system is also referred to as the quality program throughout this document. In this context, the phrase "quality management system" and "quality program" are synonymous.

The quality management system is the collection of policies and processes established by PAS management to consistently meet customer requirements and expectations, and to achieve the goals to provide PAS customers with high quality, cost-effective, analytical measurements and services.

The quality management system is also intended to establish conformance¹ and compliance with the current versions of the following international and national quality system standards:

- ISO/IEC 17025: General requirements for the competence of testing and calibration laboratories
- NELAC/TNI Standard Volume 1: Management and Technical Requirements for Laboratories Performing Environmental Analysis

¹The statement of conformity to these Standards pertains only to testing and sampling activities carried out by the laboratory at its physical address, in temporary or mobile facilities, in-network, or by laboratory personnel at a customer's facility.

In addition to the international and national standards, the quality management system is designed to achieve regulatory compliance with the various federal and state programs for which the laboratory provides compliance testing and/or holds certification or accreditation. When federal or state requirements do not apply to all PAS locations, the requirements for compliance are provided in addendum to this manual or in other documents that supplement the manual. Customer-specific project and program requirements are not included in the manual in order to maintain client confidentiality.

- A list of accreditation and certifications held by each laboratory associated with this manual is provided in Appendix A.
- A list of analytical testing capabilities offered by each laboratory associated with this manual is provided in Appendix B.

### 1.2 Scope and Application

This manual applies to each of the PAS locations listed on the Title Page and in Section 4.1.3.

The manual was prepared from a quality manual template (template) created by PAS corporate quality personnel. The template outlines the minimum requirements PAS management considers necessary for every PAS laboratory, regardless of scope of services or number of personnel, established in order to maintain a quality management system that achieves the objectives of PAS's Quality Policy (See 4.2.2). In this regard, the template is the mechanism used by the corporate officers (a.k.a. 'top management') to communicate their expectations and commitment for the PAS quality program to all PAS personnel.



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The laboratory also has the responsibility to comply with federal and state regulatory and program requirements for which it provides analytical services and holds certification or accreditation. When those requirements are more stringent than the template, the requirements for compliance are provided in addendum to this manual or in other documents that supplement the manual. This document structure maintains consistency in the presentation of the quality management system across the network while providing the laboratory a mechanism to describe and achieve compliance requirements on a program basis.

### 1.2.1 Quality Manual Template

The quality manual template is developed by the Corporate Quality Director with contribution and input from corporate quality personnel and the corporate officers. Approval of the template by the corporate officers (aka "top management") confirms their commitment to develop and maintain a quality management system appropriate for the analytical services offered by the organization and to communicate their expectations of the quality program to all personnel.

The template and instructions for use of the template are released by corporate quality personnel to quality assurance manager(s) responsible for each laboratory (Local QA). Local QA uses the template to prepare the laboratory's manual by following the instructions provided. Since the template provides the minimum requirements by which all PAS locations must abide, the laboratory may not alter the font, structure or content of the template except where specified by instruction to do so. As previously stated, program specific requirements are provided in addendum or in documents that supplement this manual.

The template is reviewed by corporate quality personnel every two years and updated if needed. More frequent review and revision may be necessary to manage change, to maintain conformance and compliance to relevant standards, or to meet customer expectations.

See standard operating procedure (SOP) ENV-SOP-CORQ-00015 *Document Management and Control* for more information.

### 1.2.2 Laboratory Quality Manual

The manual is approved and released to personnel under the authority of local management. The manual is reviewed annually and location specific information is updated, if needed. More frequent review and revision may be necessary when there are significant changes to the organizational structure, capabilities, and resources of the laboratory. Review and revision of the manual is overseen by local QA. If review indicates changes to the main body of the manual are necessary to maintain conformance and compliance to relevant standards, or to meet customer expectations, local QA will notify corporate quality personnel to initiate review and/or revision of the template.

See SOP ENV-SOP-CORQ-00015 Document Management and Control for more information.

### 1.2.3 References to Supporting Documents

The template and the manual include references to other laboratory documents that support the quality management system such as policies and standard operating procedures (SOPs). These references include the document's document control number and may include the document title.



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This information is subject to change. For example, an SOP may be converted to a policy or the document's title may change. For these types of administrative changes, the manual and template are updated to reflect the editorial change during the document's next scheduled review/revision cycle or the next time a new version of the document is released, whichever is sooner.

Local QA maintains a current list of controlled documents used at each PAS location to support the quality management system. This list, known as the Master List, lists each document used by document control number, title, version, effective date, and reference to any document(s) that the current version supersedes. When there is a difference between the template and/or manual and the Master List, the document information in the Master List takes precedence. The current Master List is readily available to personnel for their use and cross-reference. Parties external to the laboratory should contact the laboratory for the most current version.

### 2.0 REFERENCES

References used to prepare this manual include:

- "Guidelines Establishing Test Procedures for the Analysis of Pollutants Under the Clean Water Act." Federal Register, 40 CFR Part 136, most current version.
- "Test Methods for Evaluating Solid Wastes: Physical/Chemical Methods." SW-846.
- "Methods for Chemical Analysis of Water and Wastes", EPA 600-4-79-020, 1979 Revised 1983, U.S. EPA.
- U.S. EPA Contract Laboratory Program Statement of Work for Organic Analysis, current version.
- U.S. EPA Contract Laboratory Program Statement of Work for Inorganic Analysis, current version.
- "Standard Methods for the Examination of Water and Wastewater." Current Edition APHA-AWWA-WPCF.
- "Annual Book of ASTM Standards", Section 4: Construction, Volume 04.04: Soil and Rock; Building Stones, American Society of Testing and Materials.
- "Annual Book of ASTM Standards", Section 11: Water and Environmental Technology, American Society of Testing and Materials.
- "NIOSH Manual of Analytical Methods", U.S. Department of Health and Human Services, National Institute for Occupational Safety and Health, most current version.
- "Methods for the Determination of Organic Compounds in Finished Drinking Water and Raw Source Water", U.S. EPA, Environmental Monitoring and Support Laboratory – Cincinnati (Sep 1986).
- Quality Assurance of Chemical Measurements, Taylor, John K.; Lewis Publishers, Inc. 1987.
- Methods for Non-conventional Pesticides Chemicals Analysis of Industrial and Municipal Wastewater, Test Methods, EPA-440/1-83/079C.
- Environmental Measurements Laboratory (EML) Procedures Manual, HASL-300, US DOE, February, 1992.
- Requirements for Quality Control of Analytical Data, HAZWRAP, DOE/HWP-65/R1, July, 1990.



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- Quality Assurance Manual for Industrial Hygiene Chemistry, AIHA, most current version.
- National Environmental Laboratory Accreditation Conference (NELAC) Standard- most current version.
- ISO/IEC 17025, General requirements for the competence of testing and calibration laboratoriesmost current version.

The following are implemented by normative reference to ISO/IEC 17025:

- o ISO/IEC Guide 99, International vocabulary of metrology Basic and general concepts and associated terms
- ISO/IEC 17000, Conformity assessment Vocabulary and general principles
- Department of Defense Quality Systems Manual (QSM), most current version.
- TNI (The NELAC Institute) Standard- most current version applicable to each lab.
- UCMR Laboratory Approval Requirements and Information Document, most current version.
- US EPA Drinking Water Manual, most current version.

### 3.0 TERMS AND DEFINITIONS

Refer to Appendix C for terms, acronyms, and definitions used in this manual and in other documents used by the laboratory to support the quality management system.

### 4.0 MANAGEMENT REQUIREMENTS

### 4.1 Organization

### 4.1.1 Legal Identity

Pace Analytical Services, LLC is authorized under the State of Minnesota to do business as a limited liability company.

### 4.1.1.1 Change of Ownership

If there is a change of ownership, if a location goes out of business, or if the entire organization ceases to exist, Pace Analytical Services, LLC ensures that regulatory authorities are notified of the change within the time-frame required by each state agency for which the location is certified or accredited.

Requirements for records and other business information are addressed in the ownership transfer agreement or in accordance with appropriate regulatory requirements, whichever takes precedence.

### 4.1.2 Compliance Responsibility

Laboratory management has the responsibility and authority to establish and implement procedures and to maintain sufficient resources necessary to assure its activities are carried out in such a way to meet the compliance requirements of the quality management system.



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### 4.1.3 Scope of the Quality Management System

The quality management system applies to work carried out at each location covered by this manual including permanent facilities, at sites away from its permanent facilities, or in associated temporary or mobile facilities.

The permanent and mobile facilities to which this manual applies include:

Name	Pace Analytical Services, LLC
Address:	7726 Moller Road
City, State, Zip	Indianapolis, IN 46268
Phone Number	317-228-3100
Service Type:	Laboratory

Name	Pace Analytical Services, LLC
Address:	5560 Corporate Exchange Ct. SE
City, State, Zip	Grand Rapids, MI 49512
Phone Number	616-975-4500
Service Type:	Laboratory

Name	Pace Analytical Services, LLC
Address:	4860 Blazer Parkway
City, State, Zip	Dublin, OH 43017
Phone Number	614-486-5421
Service Type:	Laboratory

### 4.1.4 Organization History and Information

Founded in 1978, Pace Analytical Services, LLC (PAS) is a privately held scientific services firm operating one of the largest full service contract laboratory and service center networks in the United States. The company's network offer inorganic, organic and radiochemistry testing capabilities; specializing in the analysis of trace level contamination in air, drinking water, groundwater, wastewater, soil, biota, and waste.

With over 90 laboratories and services centers in the contiguous US and in Puerto Rico, the network provides project support for thousands of industry, consulting, engineering and government professionals.

Pace delivers the highest standard of testing and scientific services in the market. We offer the most advanced solutions in the industry, backed by truly transparent data, a highly trained team, and the service and support that comes from four decades of experience.

### 4.1.4.1 Organization Structure

Each location maintains a local management structure under the oversight and guidance of corporate personnel. Local management is responsible for making dayto-day decisions regarding the operations of the facility, implementing the quality management system, upholding the requirements of the quality program, and for supervision of personnel.



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Local management is provided by a General Manager (GM), Quality Manager (QM), Client Services Manager (CSM), Information Technology (IT) Manager, and/or Department Managers (DM), however named.

Some locations may also have any one of the following management positions: Operations Manager (OM), Technical Director (TD), or Technical Manager (TM). When the location does not have a TD or TM, technical management is provided jointly by the GM, QM, DM, and DS.

The GM, however named reports to a Senior General Manager (SGM), who is responsible for the management of multiple laboratories and service centers within a geographical region, and who reports directly to the Chief Operating Officer (COO). The QM has indirect reporting relationship to the Corporate Director of Quality.

Refer to the organization charts provided in Appendix D to view the management structure, reporting relationships, and the interrelationships between positions.

### 4.1.5 Management Requirements

### 4.1.5.1 Personnel

The laboratory is staffed with administrative and technical personnel who perform and verify work under the supervision of managerial personnel.

- Technical personnel include analysts and technicians that generate or contribute to the generation of analytical data and managerial personnel that oversee day to day supervision of laboratory operations, including the reporting of analytical data and results, monitoring QA/QC performance, and monitoring the validity of analysis to maintain data integrity and reliability.
- Administrative personnel support the day-to-day activities of the laboratory.
- IT personnel maintain the information technology systems and software used at the laboratory.
- Client services personnel include project managers and support staff that manage projects.
- Managerial personnel make day-to-day and longer term decisions regarding the operations of the facility, supervise personnel, implement the quality management system and uphold the requirements of the quality program.

All personnel regardless of responsibilities are expected to carry out their duties in accordance with the policies and processes outlined in this manual and in accordance with standard operating procedures (SOPs) and other quality system documents. The laboratory's policies and procedures are designed for impartiality and integrity. When these procedures are fully implemented, personnel remain free from undue pressure and other influences that adversely impact the quality of their work or data.



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### 4.1.5.1.1 Key Personnel

Key personnel include the management positions that have the authority and responsibility to plan, direct, and control, activities of the division (corporate) or the laboratory.

The following tables list key personnel positions by PAS job title and the position's primary deputy:

#### Key Personnel: Corporate

Key Personnel	Primary Deputy
Chief Executive Officer	Chief Operating Officer
Chief Operating Officer	Chief Executive Officer
Chief Compliance Officer	Quality Director
Corporate Quality Director	Chief Compliance Officer
Health and Safety Director	Chief Compliance Officer
IT Director	LIMS Administrator, however named.

#### Key Personnel: Laboratory

Key Personnel	Primary Deputy
General Manager	Regional Director of Operations or as designated
Quality Manager	Corporate Quality Manager
Client Services Manager	General Manager
Local IT	Corporate IT Director or as designated.
Department Manager	General Manager

Some state certification programs require the agency to be notified when there has been a change in key personnel. Program-specific requirements and time-frames for notification by agency, are tracked and upheld by local QA, when these requirements apply.

### 4.1.5.2 Roles and Responsibilities

The qualifications, duties, and responsibilities for each position are detailed in job descriptions maintained by PAS's corporate Human Resource's Department (HR).

The following summaries briefly identify the responsibility of key personnel positions in relation to the quality management system.

**Chief Executive Officer (CEO):** The CEO has overall responsibility for performance of the organization and endorses the quality program. Working with corporate and laboratory management, the CEO provides the leadership and resources necessary for PAS locations to achieve the goals and objectives of the quality management system and quality policy statement.

**Chief Operating Officer (COO):** The COO oversees all aspects of operations management including, strategic planning, budget, capital expenditure, and management of senior management personnel. In this capacity, the COO provides leadership and resources necessary to help top management at each PAS location achieve the goals and objectives of the quality management system and quality policy statement.



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**Chief Compliance Officer (CCO):** The CCO oversees the quality assurance and environmental health and safety programs (HSE) for each business unit. The CCO is responsible for planning and policy development for these groups to ensure regulatory compliance and to manage risk. The position provides leadership and guidance necessary for all PAS locations to achieve the goals and objectives of the quality and HSE programs.

The CCO also serves as the Ethics Officer (ECO). The ECO develops the Ethics and Data Integrity Policy and Training Program, and provides oversight for reporting and investigation of ethical misconduct to maintain employee confidentiality during the process. The ECO provide guidance and instruction for follow-up actions necessary to remedy the situation and deter future recurrence.

**Corporate Director of Quality:** The Corporate Director of Quality is responsible for developing and maintaining the PAS quality program under guidance and assistance from the CEO, COO, and CCO. This position helps develop corporate quality policy and procedure and analyzes metric data and other performance indicators to assess and communicate the effectiveness of the quality program to top management. The position provides leadership and guidance for implementation of the quality program across all PAS locations.

**Corporate Director of Information Technology:** The Corporate Director of IT oversees the systems and processes of information technology used to support the quality program. These systems include Laboratory Information Management Systems (LIMS); data acquisition, reduction, and reporting software; virus-protection, communication tools, and ensuring the integrity and security of electronic data.

**Regional Director – Operations:** The Regional Director of Operations has full responsibility for administrative and operations management and performance of a group of PAS laboratories and service centers. Working with the COO and local laboratory management, the Regional Director of Operations provides leadership, guidance and resources, including allocation of personnel, necessary to achieve the goals of PAS quality program.

**General Manager (GM):** The GM is responsible for the overall performance and administrative and operations management of a PAS location and associated service center(s). This position is responsible to provide leadership and resources, including allocation and supervision of personnel, necessary for the location to implement and achieve the goals of the PAS quality program. In this capacity, the position assures laboratory personnel are trained on and understand the structure and components of the quality program defined in this manual as well as the policies and procedures in place to implement the quality management system.

The GM of NELAC/TNI Accredited laboratories are also responsible for the designation of technical personnel to serve as acting technical managers for TNI for the fields of accreditation held by the laboratory (See Section 4.1.5.2.1) and for notifying the accreditation body (AB) of any extended absence or reassignment of these designations.



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**Quality Manager (QM):** The QM oversees and monitors implementation of the quality management system and communicates deviations to laboratory management. The QM is independent of the operation activities for which they provide oversight and has the authority to carry out the roles and responsibilities of their position without outside influence.

Additionally, in accordance with the TNI Standard, the QM:

- serves as the focal point for QA/QC and oversees review of QC data for trend analysis;
- evaluates data objectively and perform assessments without outside influence;
- has documented training and experience in QA/QC procedures and the laboratory's quality system;
- has a general knowledge of the analytical methods offered by the laboratory;
- coordinates and conducts internal systems and technical audits;
- notifies laboratory management of deficiencies in the quality system;
- monitors corrective actions;
- provides support to technical personnel and may serve as the primary deputy for the acting TNI Technical Manager(s).

**Client Services Manager (CSM):** The CSM oversees project management personnel. This position is responsible for training and management of client facing staff that serve as the liaison between PAS and the customer to ensure that projects are successfully managed to meet the expectations and needs of PAS customers. This position is also responsible for sharing positive and negative customer feedback with laboratory management so that this information may be used to improve the quality program.

**Systems Administrator:** Local Systems Administrators are responsible for maintaining the IT systems used to support the quality program, ensuring the integrity and security of electronic data. These systems include Laboratory Information Management Systems (LIMS); data acquisition, reduction, and reporting software; virus-protection, and communication systems.

**Department Manager (DM):** The DM is responsible for administrative and operations management and implementation of the quality management system in the work area he/she oversees. These responsibilities include but are not limited to: training and supervision of personnel, monitoring work activity to maintain compliance with this manual, SOPs, policies and other instructional documents that support the quality management system; method development, validation and the establishment and implementation of SOPs to assure regulatory compliance and suitability for intended purpose; monitoring QA/QC performance, proper handling and reporting of nonconforming work, purchasing of supplies and equipment adequate for use, maintaining instrumentation and equipment in proper working



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order and calibration, and general maintenance of administrative and technical processes and procedures established by the laboratory.

**Technical Director (TD):** The TD provides technical oversight and guidance to laboratory personnel. Responsibilities may include but are not limited to: research and development, method development and validation, development of standard operating procedures, proposal and contract review. The TD may also be responsible for QA/QC trend analysis, technical training, and technology improvement.

# 4.1.5.2.1 Acting Technical Manager (TNI Accreditation):

For PAS locations that are NELAC/TNI accredited:

The TNI Standard specifies requirements for the qualification and duties of technical personnel with managerial responsibility. These requirements are associated in the Standard to the designation 'technical manager(s), however named'. These responsibilities may be assigned to multiple individuals and are not associated with any specific job title.

For PAS, these TNI requirements for personnel that provide technical oversight correlate with PAS's job descriptions for Department Manager or Supervisor. However, the duties may be assigned to any PAS employee that meets the TNI specified qualifications.

Personnel assigned this designation retain their PAS assigned job title. The job title may be appended with "*acting as technical manager for TNI*" and the technology or field of accreditation for which the employee is approved, if necessary.

When TNI Accreditation Bodies (AB) refer to these employees as 'technical manager' or 'technical director' on the official certificate or the scope of accreditation, this reference is referring to their approval to carry out duties of the 'technical manager, however named' as specified in the TNI Standard.

In accordance with the TNI Standard, the acting Technical Manager(s) for TNI are responsible for monitoring the performance of QC/QA in the work areas they oversee.

If the absence of any employee that is approved as acting technical manager for TNI exceeds 15 calendar days, the duties and responsibilities specified in the TNI Standard are reassigned to another employee that meets the qualifications for the technology or field of accreditation or they are assigned to the position's deputy, the Quality Manager.

# 4.1.5.3 Conflict of Interest

A conflict of interest is a situation where a person has competing interests. Laboratory management looks for potential conflict of interest and undue pressures



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that might arise in work activities and then includes countermeasures in policies and procedures to mitigate or eliminate the conflict.

See policy COR-POL-0004 Ethics Policy for more information.

# 4.1.5.4 Confidentiality

Laboratory management is committed to preserving the confidentiality of PAS customers and confidentiality of business information.

Procedures used by the laboratory to maintain confidentiality include:

- A Confidentiality Agreement which all employees are required to sign at the time of employment and abide by its conditions throughout employment;
- Record retention and disposal procedures that assure confidentiality is maintained;
- Physical access controls and encryption of electronic data; and
- Protocol for handling Confidential Business Information (CBI).

Client information obtained or created during work activities is considered confidential and is protected from intentional release to any person or entity other than the client or the client's authorized representative information provided to PAS, except when the laboratory is required by law to release confidential information to another party, such as a regulatory agency or for litigation purposes. In which case, the laboratory will notify the client of the release of information and the information provided.

The terms of client confidentiality are included in PAS Standard Terms and Conditions (T&C). With the acceptance of PAS Terms and Conditions and/or the implicit contract for analytical services that occurs when the client sends samples to the laboratory for testing, the client authorizes PAS to release confidential information when required.

See policy COR-POL-0004 Ethics Policy for more information.

# 4.1.5.5 Communication

Management ensures that appropriate communication processes are established within the laboratory and that communication takes place regarding the effectiveness of the management system.

# 4.1.5.5.1 Workplace Communication

Good communication in the workplace is necessary to assure work is done correctly, efficiently, and in accordance with client expectations.

Instructions for how to carry out work activities are communicated to personnel via written policy, standard operating procedures, and standard work instructions.



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Information about laboratory performance (positive and negative) and ideas for improvement are communicated using various communication channels such as face to face meetings, video conferencing, conference calls, email, memoranda, written reports, and posters.

# 4.1.5.5.2 External Communication

Communication with external parties such as customers, vendors, business partners, and regulatory agencies takes place every day.

Laboratory management ensures personnel learn to communicate in professional and respectful ways in order to build strong relationships, and learn to communicate effectively to avoid misunderstanding.

# 4.2 Quality Management System

# 4.2.1 Quality Management System Objectives

The objectives of the laboratory's quality management system are to provide clients with consistent, exemplary professional service, and objective work product that is of known and documented quality that meets their requirements for data usability and regulatory compliance.

Objective work product is analytical services, data, test results, and information that is not influenced by personal feeling or opinions. The quality of being objective is also known as 'impartiality'.

# 4.2.1.1 Impartiality

The laboratory achieves and maintains impartiality by implementing and adhering to the policies and processes of the quality management system, which are based on industry accepted standards and methodologies.

The laboratory's procedures for handling nonconforming work (See 4.9), corrective and preventive actions (See 4.12) and management review (See 4.15) are the primary mechanisms used to identify risk to impartiality and to prompt actions necessary to eliminate or reduce the threat when risk to impartiality is suspected or confirmed.

# 4.2.1.2 Risk and Opportunity Assessment

Risks are variables that make achieving the goals and objectives of the quality management system uncertain. An opportunity is something that has potentially positive consequences for the laboratory.

Laboratory personnel manage risks and opportunities on a daily basis by carrying out the processes that make up the quality management system. Some of the ways in which the quality management system is designed to identify, minimize, or eliminate risk on a daily basis include but are not limited to:

• Capability and capacity reviews of each analytical service request to assure the laboratory can meet the customer's requirements;



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- Maintenance of accreditation and certification for test methods in multiple states and programs to cover a broad range of jurisdiction for regulatory compliance;
- SOPs and other controlled instructional documents provided to personnel to eliminate variability in process. These documents include actions to counter risk factors inherent in the process and are reviewed on a regular basis for on-going suitability and relevancy;
- Participation in proficiency testing programs and auditing activities to verify ongoing competency and comparability in performance;
- Provision of on-the-job training and established protocol for quality control (QC) corrective action for nonconforming events;
- An established program for ethics, and data integrity;
- Tiered data review process;
- Culture of continuous improvement;
- Monitoring activities to assess daily and long term performance; and
- Annual critical review of the effectiveness the quality management system.

PAS also promotes a continuous improvement culture based on the principles of lean manufacturing. These principles include 3P (Process, Productivity, Performance) and Kaizen. 3P is a platform used by Pace to share best practices and to promote standardization across the network to achieve operational excellence. Kaizen is a team based process used to implement tools and philosophies of lean to reduce waste and achieve flow with the purpose of improving both external and internal customer satisfaction. PAS's lean programs and activities help to mitigate risk because they generate a collective understanding of vulnerabilities and utilize group-effort to develop and implement solutions at all levels.

Risk and opportunities may also be formally identified using specific risk and opportunity assessment methods such as SWOT Analysis (Strength, Weakness, Opportunity, Threats) and 3-Stage Impact/Probability Grids.

# 4.2.1.3 Communication of the Quality Management System

This manual is the primary mechanism used by laboratory management to communicate the quality management system to laboratory personnel.

To assure personnel understand and implement the quality program outlined in the manual:

• All laboratory personnel are required to sign a Read and Acknowledgement Statement to confirm the employee has: 1) been informed of the manual by laboratory management, 2) has access to the manual, 3) has read the manual 4) understands the content of the manual, and 5) agrees to abide by the requirements, policies and procedures therein.



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• Personnel are informed that the manual provides the "what" of the quality management system. The "how to" implementation of the quality management system is provided in policies, SOPs, standard work instructions, and other controlled instructional documents.

# 4.2.2 Quality Policy Statement

The quality policy of the laboratory is to provide customers with data of known and documented quality fit for their intended purpose. The laboratory achieves this policy by implementing the quality management system defined in this manual, by following industry accepted protocol for analytical testing and quality assurance and quality control (QA/QC) activities, by conformance with published and industry accepted testing methodologies, and by compliance with international and national standards for the competency and/or accreditation of testing laboratories.

Intrinsic to this policy statement is each of the following principles:

- The laboratory will provide customers with reliable, consistent, and professional service. This is accomplished by making sure the laboratory has the resources necessary to maintain capability and capacity; that staff are trained and competent to perform the tasks they are assigned; that client-facing staff are trained and prepared to find solutions to problems and to assist customers with their needs for analytical services. Customer feedback, both positive and negative, is shared with personnel and used to identify opportunities for improvement.
- The laboratory maintains a quality program that complies with applicable, state, federal, industry standards for analytical testing and competency.

ISO/IEC 17025 and the TNI (The NELAC Institute) Standard are used by PAS to establish the minimum requirements of the PAS quality program.

ISO/IEC 17025 is a competency standard that outlines the general requirements for the management system for calibration and testing laboratories. It is the primary quality system standard from which other quality system standards, such as the TNI Standard, are based. The TNI Standards are consensus standards that provide management and technical requirements for laboratories performing environmental analysis.

- Laboratory management provides training to personnel so that all personnel are familiar with the quality management system outlined in this manual and that they understand that implementation of the quality management system is achieved by adherence to the organization's policies and procedures.
- Laboratory management continuously evaluates and improves the effectiveness
  of the quality management system by responding to customer feedback, and other
  measures of performance, such as but not limited to: the results of
  internal/external audits, proficiency testing, metrics, trend reports, and annual
  and periodic management reviews.

# 4.2.2.1 Ethics Policy / Data Integrity Program

PAS has established a comprehensive ethics and data integrity program that is communicated to all PAS employees to ensure that they understand what is expected



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of them. The program is designed to promote a mindset of ethical behavior and professional conduct that is applied to all work activities.

The key elements of the PAS Ethics / Data Integrity Program include:

- Ethics Policy (COR-POL-0004);
- Ethics Compliance Officer;
- Standardized data integrity training course taken by all new employees on hire and a yearly refresher data integrity training course for all existing employees;
- Policy Acknowledgement Statements that all PAS personnel, including contract and temporary, are required to sign at the time of employment and again during annual refresher training to document the employee's commitment and obligation to abide by the company's standards for ethics, data integrity and confidentiality;
- SOPs that provide instructions for how to carry out a test method or process to assure tasks are done correctly and consistently by each employee;
- On the Job Training;
- Data integrity monitoring activities which include, but are not limited to, secondary and tertiary data review, internal technical and system audits, raw data audits, data mining scans, and proficiency testing; and
- Confidential reporting process for alleged ethics and data integrity issues.

All laboratory managers are expected to provide a work environment where personnel feel safe and can report unethical or improper behavior in complete confidence without fear of retaliation. Retaliation against any employee that reports a concern is not tolerated.

PAS has engaged Lighthouse Services, Inc. to provide personnel with an anonymous reporting process available to them 24 hours a day/7 days per week. The alert line may be used by any employee to report possible violations of the company's ethics and data integrity program. When using the reporting process, the employee does need to specify the location of concern and when reporting by email, also include the company name. Messages are collected, documented, reviewed, and will be followed up on by the Ethics Compliance Officer to resolve the matter. Investigations concerning data integrity are kept confidential.

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# 4.2.3 Management Commitment: Quality Management System

Evidence of management's commitment for the development, maintenance, and on-going improvement of the quality management system is provided by the application of their signature of approval to this manual. Their signature confirms they understand their responsibility to implement the quality management system outlined in this manual, to communicate the quality program to personnel, and to uphold requirements of the program during work activities.

# 4.2.4 Management Commitment: Customer Service

Management communicates the importance of meeting customer and regulatory requirements to personnel by training personnel on the quality management system outlined in this manual, implementing the quality management system outlined in this manual, and upholding these requirements for all work activities.

# 4.2.5 Supporting Procedures

Documents that support this manual and quality management system are referenced throughout this manual. The structure of the document management system is outlined in SOP ENV-SOP-CORQ-0015 *Document Management and Control* and summarized in the following subsections.

# 4.2.5.1 Quality Management System Document Structure

Documents associated with the quality management system are classified into document types that identify the purpose of the document and establish how the document is managed and controlled.

Document types are ranked to establish which documents takes precedence when there is an actual or perceived conflict between documents and to establish the hierarchal relationships between documents. The ranking system also provides information to document writers and reviewers to assure downline documents are in agreement with documents of higher rank. Project-specific documents are not ranked because client-specific requirements are not incorporated into general use documents in order to maintain client confidentiality.

Document Type	Purpose
Quality Manual	Outlines the laboratory's quality management system and structure and how it
	works for a system including policy, goals, objectives and detailed explanation
	of the system and the requirements for implementation of system. Includes
	roles and responsibilities, relationships, procedures, systems and other
	information necessary to meet the objectives of the system described.
Policy	Provide requirements and rules for a PAS process and is used to set course of
	actions and to guide and influence decisions. Policy describes the "what", not
	the "how".
Standard	Provide written and consistent set of instructions or steps for execution of a
Operating	routine process, method, or set of tasks performed by PAS. Includes both
Procedure	fundamental and operational elements for implementation of the systems
	described in PAS manual(s). Assures that activities are performed properly in
	accordance with applicable requirements. Designed to ensure consistency,
	protect HSE of employees and environment, prevent failure in the process
	and ensure compliance with company and regulatory requirements. SOPs
	describes the "how" based on policy.

# PAS Quality Management System Documents: Internal



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Document Type	Purpose
Standard Work Instruction	Provide step by step visual and/or written instruction to carry out a specific task to improve competency, minimize variability, reduce work injury and strain, or to boost efficiency and quality of work (performance). SWI are associated with an SOP unless the task described is unrelated to generation of or contribution to environmental data or analytical results.
Template	Pre-formatted document that serves as a starting point for a new document.
Guide	Provide assistance to carry out a task. Most often used for software applications.
Form	Used for a variety of purposes such as to provide a standardized format to record observations, to provide information to supplement an SOP.

# PAS Quality Management System Documents: External

Document Type	Purpose
Certificate	Lists parameters, methods, and matrices for which the laboratory is
	certified/accredited to perform within the jurisdiction of the issuing
	regulatory agency or accreditation body.
Reference	Provide information, protocol, instructions, and/or requirements. Examples
Document	include quality system standards such as ISO/IEC, TNI, DoD and published
	referenced methods such as Standard Methods, ASTM, SW846, EPA, and
	federal and state regulatory bodies.
Project Document	Provides requirements necessary to meet individual client expectations for
	intended use of data. Examples include: project quality assurance plans
	(QAPP), client program technical specifications, contracts, and other
	agreements.

# Document Hierarchy

Rank	Document
1	Reference Documents
2	Corporate Manual
3	Corporate Policy
4	Corporate SOP
5	Corporate SWI, Templates & Forms
6	Laboratory Manual
7	Laboratory SOP
8	Laboratory SWI, Templates, & Forms
NA	Project Documents

# 4.2.6 Roles and Responsibilities

The roles and responsibilities of technical management and of the Quality Manager are provided in section 4.1.5.2.

# 4.2.7 Change Management

When significant changes to the quality management system are planned, these changes are managed by corporate quality personnel to assure that the integrity of the quality management system is maintained.

# 4.3 Document Control

# 4.3.1 General

The laboratory's procedures for document control are provided in SOP ENV-SOP-CORQ-0015 *Document Management and Control.* 



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The documents that support the quality management system include internally generated documents such as manuals, policies, standard operating procedures, standard work instructions, forms, guides, and templates and external source documents such as but not limited to, regulations, standards, reference methods, manuals, and project-specific documents.

The laboratory uses electronic document management software (eDMS)to administer SOPs and other training documents. eDMS automates the process for unique document identification, version control, approval, access, and archival.

# 4.3.2 Document Approval and Issue

Documents that are part of the quality management system are reviewed by qualified personnel and approved by laboratory management prior by to release for general use.

Local QA maintains a master list of controlled documents used at the laboratory. The master list includes the document control number, document title, and current revision status and is made available to personnel for their reference.

Only the approved versions of documents are available to personnel for use. The eDMS system does not allow user access to draft versions of documents except to personnel assigned to work on the draft. eDMS also restricts access to archived documents except to authorized users, such as local QA, in order to prevent the use of obsolete documents.

See SOP ENV-SOP-CORQ-0015 Document Management and Control for more information.

# 4.3.3 Document Review and Change

Unless a more frequent review is required by regulatory, certification or accreditation program, the laboratory formally reviews documents at least every two years to ensure the document remains current, appropriate, and relevant.

Documents are also informally reviewed every time the document is used. Personnel are expected to refer to and follow instructions in controlled documents when they carry out their work activities. Consequently, any concerns or problems with the document should be caught and brought to the attention of laboratory management on an on-going basis.

Documents are revised whenever necessary to ensure the document remains usable and correct. Older document versions and documents no longer needed are made obsolete and archived for historical purposes.

The laboratory does not allow manual-edits to documents. If an interim change is needed pending re-issue of the document, the interim change is communicated to those that use the document using a formal communication channel, such as SOP Change in Progress form, email, or memorandum.

The document review, revision, and archival process is managed by local QA at the location from which the document was released using the procedures established in SOP ENV-SOP-CORQ-0015 *Document Management and Control.* 

# 4.4 Analytical Service Request, Tender, and Contract Review

The laboratory's management and/or client service personnel perform thorough reviews of requests and contracts for analytical services to verify the laboratory has the capability, capacity, and resources



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necessary to successfully meet the customer's needs. These review procedures are described in laboratory SOP ENV-SOP-IND1-0011 Review of Analytical Requests.

The procedures in this SOP(s) are established to ensure that:

- The laboratory understands the purpose of data collection in order to ensure the test methods requested are appropriate for the intended use of the data and capable of meeting the client's data quality objectives;
- The laboratory and any subcontractor has the capability, capacity, and resources to meet the project requirements and expectations within the requested time frame for delivery of work product;
- Any concerns that arise from review are discussed and resolved with the client; and
- The results of review and any correspondence with the client related to this process and/or any changes made to the contract are recorded and retained for historical purposes.

Capability review confirms that the in-network laboratories and any potential subcontractors hold required certification/accreditation for the test method, matrix, and analyte and verifies the laboratory can achieve the client's target compound list and data quality objectives (DQOs) for analytical sensitivity and reporting limits, QA/QC protocol, and hardcopy test report and electronic data deliverable (EDD) formats.

Capacity review verifies that the in-network laboratories and any potential subcontractors are able to handle the sample load and deliver work production within the delivery time-frame requested.

Resource review verifies that the laboratory and any potential subcontractors have adequate qualified personnel with the skills and competency to perform the test methods and services requested and sufficient and proper equipment and instrumentation needed to perform the services requested.

# 4.5 Subcontracting and In-Network Work Transfer

The terms 'subcontract' and "subcontracting" refers to work sent to a business external to PAS Analytical Services, LLC (PAS) and the term 'subcontractor' refers to these external businesses, which are also called vendors.

Work transferred within the PAS network is referred to as interregional work orders (IRWO) and network laboratories are referred to as IRWO or network laboratory.

The network of PAS laboratories offers comprehensive analytical capability and capacity to ensure PAS can meet a diverse range of client needs for any type of project. If the laboratory receives a request for analytical services and it cannot fulfill the project specifications, the laboratory's client services team will work with the client to place the work within the PAS network. When it is not possible to place the work within network, the laboratory will, with client approval, subcontract the work to a subcontractor that has the capabilities to meet the project specifications and can meet the same commitment agreed to between the laboratory and the client. Some client programs require client consent even for IRWO work transfer, and when this applies, the client services team obtains consent as required. The laboratory retains the record of client notification and their consent in the project record for historical purposes.

Whenever work is transferred to a subcontractor or an IRWO laboratory, the laboratory responsible for management of the project verifies each of these qualifications:



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- The subcontractor or IRWO laboratory has the proper accreditation/certifications required for the project and these are current; and
- The use of the subcontractor or IRWO laboratory is approved by the client and/or regulatory agency, when approval is required. Record of approval is retained in the project record.

When possible, the laboratory selects subcontractors that maintain a quality management system similar to PAS and that complies with ISO/IEC 17025 and the TNI Standard(s).

PAS also evaluates and pre-qualifies subcontractors as part of company's procurement program. The complete list of approved vendors is maintained by the corporate procurement department and is made available to all PAS locations. Pre-qualification of a subcontractor does not replace the requirement for the subcontracting laboratory to verify the capability, capacity, and resources of any selected subcontractor on a project-specific basis to confirm the subcontractor can meet the client's needs.

For both subcontracting and in-network work transfer, the project specifications are always communicated to the subcontractor or the IRWO laboratory by the project manager so that the laboratory performing the work is aware of and understands these requirements.

The procedures for subcontracting are outlined in laboratory SOP ENV-SOP-IND1-0005 *Subcontracting Samples*.

# 4.6 Purchasing Services and Supplies

Vendors that provide services and supplies to the laboratory are prequalified by corporate procurement personnel to verify the vendor's capability to meet the needs of PAS. These needs include but are not limited to: competitive pricing, capacity to fill purchase orders, quality of product, customer service, and business reputation and stability. The records of vendor evaluation and the list of approved vendors is maintained by the corporate procurement department.

The laboratory may purchase goods and services from any supplier on the approved vendor list.

The specifications (type, class, grade, tolerance, purity, etc.) of supplies, equipment, reagents, standard reference materials and other consumables used in the testing process are specified in SOPs. The SOP specifications are based on the governing requirements of the approved reference methods and any additional program driven regulatory specification, such as drinking water compliance. All requisitions for materials and consumables are approved by the department supervisor to confirm the purchase conforms with specified requirements. After approval the requisition is handled by the laboratory's designated purchasing agent. On receipt, the product is inspected and verified before use, when applicable.

The laboratory's procedure for the purchase of services and supplies is specified in laboratory SOP ENV-SOP-IND1-0084 *Purchasing, Receipt, and Storage of Laboratory Supplies.* 

# 4.7 Customer Service

Project details and management is handled by the laboratory's customer service team. Each customer is assigned a Project Manager (PM) that is responsible for review of contract requirements and handling laboratory to customer communication about the project status.



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# 4.7.1 Commitment to Meet Customer Expectations

The laboratory cooperates and works closely with our customers to ensure their needs are met and to establish their confidence in the laboratory's capability to meet their needs for analytical services and expectations for service.

Each customer's project is handled by a project manager (PM) that is the customer's primary point of contact. The PM gathers information from the customer to ensure the details of their request are understood. After samples are received, the PM monitors the progress of the project and alerts the customer of any delays or excursions that may adversely impact data usability. Laboratory supervisors are expected to keep the PM informed of project status and any delays or major issues, so that the PM can keep the client informed.

PAS also has a team of subject matter experts (SME) available to provide customers with advice and guidance and any other assistance needed. SME are selected by top management based on their knowledge, experience, and qualifications.

The laboratory encourages customers to visit the laboratory to learn more about the laboratory's capabilities, observe performance and to meet laboratory personnel.

PAS customers expect confidentiality. Laboratory personnel will not divulge or release information to a third party without proper authorization unless the information is required for litigation purposes. See Section 4.1.5.4 of this manual and policy COR-POL-0004 *Ethics Policy* for more information on the laboratory's policy for client confidentiality.

# 4.7.2 Customer Feedback

The laboratory actively seeks positive and negative feedback from customers through surveys and direct communication. Information from the client about their experience working with the laboratory and their satisfaction with work product is used to enhance processes and practices and to improve decision making. Customer feedback is communicated to laboratory management and corporate personnel in monthly reports and analyzed yearly during management review (See 4.15) to identify risk and opportunity. Corrective, preventive, or continuous improvement actions are taken based on nature of and/or feedback trends.

Also see sections 4.9, 4.10, 4.11, 4.12, 4.14, and 4.15 for more information about how customer feedback is managed by the laboratory and used to enhance the quality management system.

# 4.8 Complaints

Complaints provide opportunities to improve processes and build stronger working relationships with our clients.

The laboratory's complaint resolution process includes three steps. First, handle and resolve the complaint to mutual satisfaction. Second, perform corrective action to prevent recurrence (See 4.11). Third, record and track the complaint and use these records for risk and opportunity assessment and preventive action (See 4.12)

# 4.9 Nonconforming Work

#### 4.9.1 Definition of Nonconforming Work

Nonconforming work is work that does not conform to customer requirements, standard specifications, laboratory policies and procedures, or that does not meet acceptance criteria.



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The discovery of non-conforming work comes from various sources which include, but are not limited to:

- results of quality control samples and instrument calibrations;
- quality checks on consumables and materials;
- general observations of laboratory personnel;
- data review;
- proficiency testing;
- internal and external audits;
- complaints and feedback;
- management review and reports; and
- regulatory and certification and accreditation actions.

The way in which the laboratory handles nonconforming work depends on the significance and impact (risk) of the issue. Some issues may simply require correction, others may require investigation, corrective action (See 4.11) and/or data recall (See 4.16). Data and test results associated with nonconforming QC and acceptance criteria are qualified or non-conformances are noted in the final analytical report to apprise the data user of the situation. (See 5.10)

Nonconforming work also includes unauthorized departure from laboratory policies, procedures and test methods. Authorized departures are explained in the following subsections. Situations that do not conform to these conditions are considered unauthorized departure(s).

#### 4.9.1.1 Authorized Departure from SOP

An authorized departure from a test method SOP is one that has been reviewed and approved by the Department Manager, Technical Manager, Acting Technical Manager for TNI, Quality Manager, or the General Manager. Review is conducted to confirm the departure does not conflict with regulatory compliance requirements for which the data will be used or does not adversely affect data integrity. The departure may originate from client request or may be necessary to overcome a problem.

Departure requests are reviewed and pre-approved by the local Quality Manager. Documentation of SOP departures and approval decisions are retained by the laboratory as evidence that the departure was authorized. When necessary, approved departures from test method SOPs are noted in the final test report to advise the data user of any ramification to data quality.

# 4.9.1.2 Authorized Departure from Test Methods (Method Modifications)

When test results are associated to a published reference test method, the laboratory's test method SOP must be consistent with the test method. If the test method is mandated for use by a specific regulatory program such as drinking water or wastewater or a certification or accreditation program, such as TNI/NELAC, the SOP must also comply with or include these requirements. If the procedures in the SOP are modified from the test method, these modifications must be clearly identified



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in the SOP. The conditions under which the laboratory may establish an SOP that is modified from these reference documents, and what is considered a modification are specified in ENV-SOP-CORQ-0011 *Method Validation and Instrument Verification*. Modifications that do not meet the requirements of this SOP (ENV-SOP-CORQ-0011) are unauthorized.

### 4.9.1.3 Stop Work Authority

Stop Work Authority provides laboratory personnel with the responsibility and obligation to stop work when there is a perceived unsafe condition or behavior that may result in an unwanted event.

All laboratory and corporate personnel have the authority to stop work when needed to preserve data integrity or safety of workers.

Once a stop work order has been initiated and the reason for doing so is confirmed valid; laboratory management is responsible for immediate correction and corrective action (see section 4.11) before resumption of work.

# 4.10 Continuous Improvement

The laboratory's quality management system is designed to achieve continuous improvement through the implementation of the quality policy and objectives outlined in this manual. Information about the laboratory's activities and performance is gained from many sources such as customer feedback, audits, QC, trend analysis, business analytics, management reports, proficiency testing, and management systems review. This information is subsequently used during the laboratory's corrective action (see section 4.11) and preventive action (see section 4.12) processes and to establish goals and objectives during annual review of the management system (see section 4.15).

PAS also promotes a continuous improvement culture based on the principles of lean manufacturing. These principles include 3P (Process, Productivity, Performance) and Kaizen. 3P is a platform used by Pace to share best practices and standardization across the network to achieve operational excellence. Kaizen is a team based process used to implement tools and philosophies of lean to reduce waste and achieve flow with the purpose of improving both external and internal customer satisfaction.

# 4.11 Corrective Action

Corrective action is the process used to eliminate the cause of a detected nonconformity. It is not the same as a correction. A correction is an action taken to fix an immediate problem. The goal of the corrective action process is to find the underlying cause(s) of the problem and to put in place fixes to prevent the problem from happening again. The corrective action process, referred to as CAPA by PAS, is one of the most effective tools used by the laboratory to prevent nonconforming work, identify risk and opportunity, and improve service to our customers.

The laboratory has two general processes for corrective action:

Day-to-day quality control (QC) and acceptance criteria exceptions (nonconformance) are handled as corrections. These events do not usually include formal methods for root cause analysis; instead the reason for the failure is investigated through troubleshooting or other measures. Required actions for correction of routine nonconformance are specified in laboratory SOPs. When correction is not performed, cannot be performed, or is not successful, test results associated with the nonconforming



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work are qualified in the final test report. Documentation of the nonconformance and correction performed are included in the analytical record.

A formal 7 step corrective action process is used when there is a problem or departure from the quality management system, technical activities, or when the extent of a single problem has significant impact on data, regulatory compliance or customer needs. These problems are identified through various activities such as but not limited to: quality control trends, internal and external audits, management review, customer feedback, and general observation.

The laboratory's 7 Step CAPA Process includes:

- 1) Define the Problem
- 2) Define the Scope of the Problem
- 3) Contain the Problem
- 4) Root Cause Analysis
- 5) Plan Corrective Action
- 6) Implement Corrective Action
- 7) Follow Up / Effectiveness Check

The formal CAPA process may be initiated by any employee. Once the process is initiated it is overseen and coordinated by laboratory management. The CAPA process is documented using an electronic or paper-based system. The CAPA record includes tracking information, dates, individuals involved, those responsible for action plan implementation and follow-up, and timelines and due dates.

For more information about the laboratory's procedure for corrective action, see laboratory SOP ENV-SOP-IND1-0020 *Corrective and Preventive Actions*. Additional explanation about certain aspects of the laboratory's corrective action process are outlined in the next three subsections.

# 4.11.1 Root Cause Analysis

Root cause analysis (RCA) is the process of investigation used by the laboratory to identify the underlying cause(s) of the problem. Once causal factors are identified, ways to mitigate the causal factors are reviewed and corrective action(s) most likely to eliminate the problem are selected.

The laboratory uses different methods to conduct this analysis. The most common approach is 5-Why, but fishbone diagrams, or even brainstorming may be appropriate depending on the situation. The method used is documented in the CAPA record.

# 4.11.2 Effectiveness Review

Monitoring corrective actions for effectiveness is shared by laboratory supervisors and quality assurance personnel. Effectiveness means the actions taken were sustainable and appropriate. Sustainable means the change is still in place. Appropriate means the action(s) taken prevented recurrence of the problem since the time corrective action was taken.

The time-frame in which effectiveness review takes place depends on the event and is recorded in the CAPA record with any addition actions that need to be taken.

Corrective action trends are also monitored by laboratory management and used to identify opportunities for preventive action or to gain lessons learned when actions taken were not adequate to solve the problem. See Section 4.12 (Preventive Action) and 4.15 (Management Review) for more information.



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# 4.11.3 Additional Audits

When non-conformances or other problems cast doubt on compliance with the laboratory's policies, procedures, or compliance to regulatory requirements; laboratory management schedules a special audit of the area of activity in accordance with Section 4.14.1 as soon as possible. These special audits are used to determine the scope of the problem and to provide information for the CAPA process. Additional full-scale audits are done when a serious issue or risk to the laboratory's business is identified.

# 4.12 **Preventive Action**

Preventive action is an action taken to eliminate the cause of a potential nonconformity and to achieve improvement. Preventive action is a forward thinking process designed to prevent problems opposed to reacting to them after they have occurred (corrective action).

Some examples of preventative action include, but are not limited to:

- Scheduled instrument maintenance (Preventative maintenance)
- Addition of Staff and Equipment
- Professional Development Activities
- Implementation of New Technology

The laboratory looks for opportunities for preventive action from a variety of sources including but not limited to: employee ideas, customer feedback, input from business partners, trend analysis, business analytics, management reviews, proficiency testing results, lean management events, and riskbenefit analysis.

The process for preventive actions follows the same 7 step process for corrective action except "problem" is replaced with "opportunity", "root cause analysis" is replaced with "benefit analysis", and "corrective action" is replaced with "preventive action".

Laboratory management evaluates the success of preventive actions taken in any given year during annual management review. See Section 4.15 for more information.

# 4.12.1 Change Management

Preventive actions may sometimes result in significant changes to processes and procedures used by the laboratory. Laboratory management evaluates the risks and benefits of change and includes in its implementation of change process, actions to minimize or eliminate any risk. The types of changes for which risk are considered and managed include: infrastructure change, change in analytical service offerings, certification or accreditation status, instrumentation, LIMS changes, and changes in key personnel.

For more information about the laboratory's procedures for preventive action see laboratory SOP ENV-SOP-IND1-0020 *Corrective and Preventive Actions*.

# 4.13 Control of Records

A record is a piece of evidence about the past, especially an account of an act or occurrence kept in writing or some other permanent form. Laboratory records document laboratory activities and



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provide evidence of conformity to the requirements established in the quality management system. These records may be hardcopy or electronic on any form of media.

# 4.13.1 General Requirements

# 4.13.1.1 Procedure

The laboratory's procedures for control of records are provided in laboratory SOP ENV-SOP-IND1-0047 *Data Backup and Records Archival.* 

The procedures in the SOP are established to assure quality and technical records are identified, retained, indexed, and filed to allow for retrieval during the entire retention time frame. During storage, records are kept secure and protected from deterioration. At the end of the retention time, the records are disposed of properly in order to maintain client confidentiality and to protect the interests of the company.

In general, laboratory records fall into three categories: quality, technical, and administrative.

Record Type	Includes Records of:
Quality	Documents: Document Types listed in SOP ENV-SOP-CORQ-016
	Audits: Internal and External
	Certificates and Scopes of Accreditation
	Corrective & Preventive Action
	Management Review
	Data Investigations
	Method Validation
	Instrument Verification
	Training Records
Technical	Raw Data
	Logbooks
	Certificates of Traceability
	Analytical Record
	Test Reports & Project Information
	Technical Training Records & Demonstration of Capability
Administrative	Personnel Records
	Finance/Business

Examples of each are provided in the following table:

# 4.13.1.2 Record Legibility and Storage

Records are designed to be legible and to clearly identify the information recorded. Manual entries are made in indelible ink; automated entries are in a typeface and of sufficient resolution to be read. The records identify laboratory personnel that performed the activity or entered the information.

Records are archived and stored in a way that they can be retrieved. Access to archived records is controlled and managed.

For records stored electronically, the capability to restore or retrieve the electronic record is maintained for the entire retention period. Hardcopy records are filed and stored in a suitable environment to protect from damage, deterioration, or loss. Hardcopy records may be scanned to PDF for retention. Scanned records must be checked against the hardcopy to verify the scan is complete and legible.



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Records are kept for a minimum of 10 years unless otherwise specified by the client or regulatory program.

The date from which retention time is calculated depends on the record. In general, the retention time of technical records of original observation and measurement is calculated from the date the record is created. If the technical record is kept in a chronological logbook, the date of retention may be calculated from the date the logbook is archived. The retention time of test reports and project records, which are considered technical records, is calculated from the date the record is usually calculated from the date the record is archived.

Refer to the laboratory's record management SOP for more information.

#### 4.13.1.3 Security

The laboratory is a secure facility and access to records is restricted to laboratory personnel.

# 4.13.1.4 Electronic Records

The data systems used to store electronic records are backed up in accordance with laboratory SOP ENV-SOP-IND1-0047 *Data Backup and Records Archival*. Access to archived records stored electronically is maintained by personnel responsible for management of the electronic system.

# 4.13.2 Technical Records

In addition to the requirements identified in subsections 4.13.1.1 through 4.13.1.4, the requirements in the following subsections also apply to technical records.

# 4.13.2.1 Description

Technical records are the accumulation of data and information generated from the analytical process. These records may include forms, worksheets, workbooks, checklists, notes, raw data, calibration records, final test reports, and project records. The accumulated records need to provide sufficient detail to historically reconstruct the process and identify the personnel that performed the tasks associated with a test result.

# 4.13.2.2 Real Time Recordkeeping

Personnel are instructed and expected to always record observations, data, and calculations at the time they are made. Laboratory managers are responsible to assure that data entries, whether made electronically or on hardcopy, are relevant and complete.

# 4.13.2.3 Error Correction

Errors in records must never be erased, deleted or made illegible. Use of correction fluid, such as white-out is prohibited. In hardcopy records, the error is corrected by a single line through the original entry and the new entry recorded alongside or footnoted to allow for readability. Corrections are initialed and dated by the person



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making the correction. If the correction is not self-explanatory, a reason for the correction is recorded.

For electronic records, equivalent measures of error correction or traceability of changes is maintained. For example, audit trails provide records of change.

Maintenance of proper practices for error correction is monitored through the tiered data review process described in Section 5.9.3. Laboratory records are reviewed throughout the data review process. Individuals performing these reviews flag errors that are not properly corrected and bring these to the attention of the department manager or supervisor of the work area in which the record was generated so that the problem may be addressed and corrected with the individual(s) that made the improper correction.

# 4.14 Audits

The laboratory performs internal systems and technical audits to assess compliance to this manual and to other laboratory procedures, such as policy, SOP and SWI. Since the processes in this manual are based on the relevant quality system standards and regulatory and accreditation/certification program requirements the laboratory provides services for, the internal audits also assess on-going compliance to these programs.

The laboratory is also audited by external parties such as regulatory agencies, customers, consultants and non-government assessment bodies (NGAB).

Information from internal and external audits is used by laboratory management to address compliance concerns and opportunities where improvement will increase the reliability of data.

Deficiencies, observations, and recommendations from audits are managed by local QA using the laboratory's formal CAPA process. See Section 4.11 for more information.

# 4.14.1 Internal Audit

The laboratory's internal audit program is managed by local QA in accordance with a predetermined audit schedule established at the beginning of each calendar year. The schedule is prepared to assure that all areas of the laboratory are reviewed over the course of the year. Conformance to the schedule is reported to both laboratory management and corporate quality personnel in a monthly QA report prepared by the Quality Manager.

Although the Quality Manager creates the audit schedule, it is the shared responsibility of local QA and laboratory managers to assure the schedule is maintained. Laboratory supervisors cooperate with QA to provide the auditors with complete access to the work area, personnel, and records needed.

Internal audits are performed by personnel approved by the Quality Manager. In general, personnel may not audit their own activities unless it can be demonstrated that an effective and objective audit will be carried out. The auditor must be trained, qualified, and familiar enough with the objectives, principles, and procedures of laboratory operations to be able to perform a thorough and effective evaluation.

The laboratory's internal audit program includes:

System Audits & Method Audits: The purpose of these audits is to determine if daily
practice is consistent with laboratory's SOPs and if SOPs are compliant with adjunct



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policy and procedures. Auditing techniques include analyst interviews and observation and records review. These audits are performed per the pre-determined schedule.

- Raw Data / Final Test Report Audits: The purpose of these audits is to review raw data and/or final test reports to verify the final product is consistent with customer/project requirements and compliant with SOPs and reference methods. Test results should be properly qualified when necessary, should be accurate, and should be of known and documented quality. The reviews should also identify opportunities for improvement and best practices.
- Special Audits: Special audits are those performed ad hoc to follow up on a specific issue such as a client complaint, negative feedback, concerns of data integrity or ethics, or a problem identified through other audits. Special audits may be scheduled or unscheduled. Unscheduled internal audits are conducted whenever doubts are cast on the laboratory's compliance with regulatory requirements or its own policies and procedures. These unscheduled internal audits may be conducted at any time and may be performed without an announcement to laboratory personnel.

When observations and findings from any audit (internal or external) cast doubt on the validity of the laboratory's testing results, the laboratory takes immediate action to investigate the problem and take corrective action. (Also see 4.11 and 4.16)

The laboratory's internal audit program and auditing procedures are further described in laboratory SOP ENV-SOP-IND1-0018 *Internal and External Audits*.

# 4.14.1.1 Corporate Compliance Audit

The laboratory may also be audited by corporate quality personnel to assess the laboratory's compliance to the company's quality management program and to evaluate the effectiveness of implementation of the policies and procedures that make up the quality management system. The purpose of the compliance audit is to identify risks and opportunities and to assist laboratory management in achieving the goals and objectives of the company's quality program.

# 4.15 Management Review

The laboratory's management team formally reviews the management system on an annual basis to assess for on-going suitability and effectiveness and to establish goals, objectives, and action plans for the upcoming year.

At a minimum, the following topics are reviewed and discussed:

- The on-going suitability of policies and procedures including HSE (Health, Safety and Environment) and waste management;
- Reports from managerial and supervisory personnel including topics discussed at regular management meetings held throughout the year;
- The outcome of recent internal audits;
- Corrective and preventive actions;
- Assessments by external bodies;



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- The results of proficiency tests;
- Changes in the volume and type of the work;
- Customer and personnel feedback, including complaints;
- Recommendations for improvement / preventive actions made since last review;
- Internal and external issues of relevance and risk identification;
- A review of the status of actions from prior management reviews; and
- Other relevant factors, such as quality control activities, resources, and staff training.

The discussion and results of this review are documented in a formal report prepared by laboratory management. This report includes a determination of the effectiveness of the management system and its processes; goals and objectives for improvements in the coming year with timelines and responsibilities, any other need for change. See laboratory SOP ENV-SOP-CORQ-0005 *Management Review* for more information.

Goals and action items from annual management systems review are shared with employees to highlight focus areas for improvement in addition to areas in which the laboratory has excelled.

# 4.16 Data Integrity

The laboratory's procedures for data integrity reviews are described in SOP ENV-SOP-CORQ-0010 *Data* Recall.

Customers whose data are affected by these events are notified in a timely manner, usually within 30 days of discovery. Some accreditation programs also require notification to the accreditation body (AB) within a certain time-frame from date of discovery when the underlying cause of the issue impacts accreditation. The laboratory follows any program or project-specific client requirements for notification, when applicable.

# 5.0 TECHNICAL REQUIREMENTS

# 5.1 General

Many factors contribute to the correctness and reliability of the technical work performed by the laboratory. These factors are fall under these general categories:

- Human Performance
- Facility and Environmental Conditions
- Test Method Performance and Validation
- Measurement Traceability
- Handling of Samples

The impact of each of these factors varies based on the type of work performed. To minimize negative effects from each these factors, the laboratory takes into account the contribution from each of these categories when developing test method and process (administrative) SOPs, evaluating personnel qualifications and competence, and in the selection of equipment and supplies.



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# 5.2 Personnel

# 5.2.1 Personnel Qualifications

The laboratory's program for personnel management is structured to ensure personnel are selected, qualified, and competent to perform the roles and responsibilities of their position based on education, experience, and training.

Qualifications, duties, responsibilities, and authorities of each position are specified in job descriptions maintained by corporate HR (See Section 5.2.4). These job descriptions provide the general basis for the selection of personnel for hire and are used by the laboratory to communicate to personnel the duties, responsibilities, and authorities of their position.

The term "personnel" refers to individuals employed by the laboratory directly as full-time, part-time, or temporary employees and individuals employed by the laboratory by contract through an employment agency. The term "personnel" is used interchangeably with the term "employee" throughout this manual. For purposes of this manual, these terms are equivalent.

The personnel management program is structured to establish and maintain records for each of the following:

- Selection of personnel;
- Training of personnel;
- Supervision of personnel;
- Authorization of personnel; and
- Monitoring Competence of personnel.

# 5.2.1.1 Competence

Competence is the ability to apply a skill or series of skills to complete a task or series of tasks correctly within defined expectations.

Competence for technical personnel, authorized by PAS to provide opinion and interpretation of data to customers, also includes the demonstrated ability to:

- Apply knowledge, experience, and skills needed to safely and properly use equipment, instrumentation, and materials required to carry out testing and other work activities in accordance with manufacturer specifications and laboratory SOPs;
- Understand and apply knowledge of general regulatory requirements necessary to achieve regulatory compliance in work product; and
- Understand the significance of departures and deviations from procedure that may occur during the analytical testing process and the capability and initiative to troubleshoot and correct the problem, document the issue, and to properly qualify the data and analytical results.

The laboratory's requirements for the competence of personnel (education, qualification, work experience, technical skills, and responsibilities) are specified in job descriptions created by management and kept by human resources (HR). The job description provides the basis for the selection of personnel for each position.



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An employee is considered competent when he/she has completed documented required training.

The policies and standard operating procedures (SOPs) for the following topics are established by management as minimum required training for all personnel:

- Ethics and Data Integrity
- Quality Manual
- Safety Manual
- Technical Process and Procedure relevant to their job tasks
- Successful Demonstration of Capability (DOC) Analytical Personnel Only

Records of training and qualification provide the record of competence for the individual. Qualification records may include but are not limited to diploma, transcripts, and curriculum vitae (CV).

The on-going competence of each employee is monitored by laboratory management through on-the-job performance. Analytical employees are also required to successfully complete another demonstration capability for each test method performed on an annual basis.

#### 5.2.2 Training

Training requirements are outlined in policies COR-POL-0023 Mandatory Training Policy. COR-POL-0004 Ethics Policy, and laboratory SOP ENV-SOP-IND1-0027 Employee Orientation and Training. Additional training requirements may also be specified in other documents, such as manuals.

#### 5.2.2.1 Training Program and Goals

The laboratory's training program includes 4 elements:

- Identification of Training Needs
- Training Plan Development and Execution
- Documentation and Tracking
- Evaluation of Training Effectiveness

Laboratory management establishes goals and training needs for individual employees based on their role, education, experience, and on-the-job performance.

Training needs for all employees are based on business performance measures that include but are not limited to:

- Quality Control Trends
- Process Error / Rework Trends
- Proficiency Testing Results
- Internal & External Audit Performance



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Management Review Goals

Training is delivered using various methods that incorporate techniques that appeal to the main learning styles: visual, aural, linguistic, and kinesthetic. Techniques include on-the-job, instructor-led, self-study, eLearning, and blended.

The employee's direct supervisor is responsible for oversight of the employee's training plan and for providing adequate time to the employee to complete training assignments. Both the supervisor and employee are responsible to make sure the employee's training status and training records are current and complete.

The laboratory's QA department monitors the training status of personnel and provides the status to the General Manager (GM or AGM) at least monthly or more frequently, if necessary. The status report is used by laboratory management to identify overdue training assignments, the reasons for the gaps, and to make arrangements for completion.

The following subsections highlight specific training requirements:

# 5.2.2.1.1 New Hire Training

New hire training requirements apply to new personnel and to existing employee's starting in a new position or different work area.

Required new hire training includes each of the following:

- Ethics and Data Integrity (See 5.2.2.1.3)
- Quality Manual / Quality Management System (See 5.2.2.1.4)
- Safety Manual and any training requirements specified in the manual.
- Policies & SOPs relevant to their job tasks
- Technical personnel that test samples must also successfully complete an initial demonstration of capability (IDOC) for the test methods performed before independently testing customer samples. (See 5.2.2.1.5). Independent testing means handling of client samples without direct supervision of the work activity by the supervisor or a qualified trainer.

All required training must be current and complete before the employee is authorized to work independently. Until then, the employee's direct supervisor is responsible for review and acceptance of the employee's work product.

# 5.2.2.1.2 On-Going Training

Personnel receive on-going training in each of the following topics:

- Ethics and Data Integrity (See 5.2.2.1.3)
- Quality Manual / Quality Management System (See 5.2.2.1.4)



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- Safety Training
- Changes to Policies & SOPs
- Specialized Training
- Technical personnel that carry out testing must also successfully complete continuing demonstration of capability (DOC) for all test methods performed on an annual basis. (See 5.2.2.1.5)

Personnel are expected to maintain their training status and records of training current and complete and to complete training assignments in a timely manner.

# 5.2.2.1.3 Ethics and Data Integrity Training

Initial data integrity training is provided to all new personnel and refresher data integrity training is provided to all employees on an annual basis. Personnel are required to acknowledge they understand that any infractions of the laboratory data integrity procedures will result in a detailed investigation that could lead to very serious consequences including immediate termination, debarment, or civil/criminal prosecution.

The initial data integrity training and the annual refresher training is documented with a signature attendance sheet or other form of documentation to provide evidence that the employee has participated in training on this topic and understands their obligations related to data integrity.

The following topics and activities are covered:

- Policy for honesty and full disclosure in all analytical reporting;
- Prohibited Practices;
- How and when to report data integrity issues;
- Record keeping. The training emphasizes the importance of proper written documentation on the part of the analyst;
- Training Program, including discussion regarding all data integrity procedures;
- Data integrity training documentation;
- In-depth procedures for data monitoring; and
- Specific examples of breaches of ethical behavior such as improper data manipulations, adjustments of instrument time clocks, and inappropriate changes in concentrations of standards.

All PAS personnel, including contract and temporary, are required to sign an "Attestation of Ethics and Confidentiality" at the time of



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employment and during annual refresher training. This document clearly identifies inappropriate and questionable behavior. Violations of this document result in serious consequences, including termination and prosecution, if necessary.

Also see SOP-ENV-COR-POL-0004 *Ethics Policy* for more information.

# 5.2.2.1.4 Management System Documents Training

PAS Manuals, policies, and SOPs are the primary documents used by regulatory bodies and PAS customers to verify the laboratory's capability, competency, and compliance with their requirements and expectations.

In addition to on-the-job training, employees must have a signed Read and Acknowledgement Statement on record for the laboratory Quality Manual and the policies and SOPs relating to his/her job responsibilities. This statement, when signed by the employee electronically or on paper, confirms that the employee has received, read, and understands the contents of the document, that the employee agrees to follow the document when carrying out their work tasks, and that the employee understands that unauthorized change to procedures in an SOP is not allowed except in accordance with the SOP departure policy (See 4.9.1.1) and SOP ENV-CORQ-0016 *Standard Operating Procedures and Standard Work Instructions* for more information.

# 5.2.2.1.5 Demonstration of Capability (DOC)

Technical personnel must also complete an initial demonstration of capability (IDOC) prior to independent work on client samples analyzed by the test methods they perform. After successful IDOC, the employee must demonstrate continued proficiency (DOC) for the test method on an annual basis. If more than a year has passed since the employee last performed the method; then capability must be re-established with an IDOC.

Demonstration of capability (IDOC and DOC) is based on the employee's capability to achieve acceptable precision and accuracy for each analyte reported by the laboratory for the test method using the laboratory's test method SOP.

Records of IDOC and DOC are kept in the employee's training file.

For more information, see laboratory SOP ENV-SOP-IND1-0027 *Employee Orientation and Training.* 

# 5.2.2.2 Effectiveness of Training

The results of the performance measures used to identify training needs are the same measures used by the laboratory to measure effectiveness of the training program.



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Improvements in key performance measures suggest the training program is successful. (See 5.2.2.1)

Effectiveness of individual employee training is measured by their demonstrated ability to comprehend the training material and apply the knowledge and skills gained to their job task. Measurements include but are not limited to:

- Testing of the employee's knowledge of the quality management system, policies, and technical and administrative procedures through various mechanisms, such as quizzes, observation, and interviews.
- Demonstrated ability to convey information correctly and factually in written and verbal communication to internal and external parties.
- Demonstrated ability to carry out tasks in accordance with SOPs and other work instructions.
- Demonstrated ability to make sound decisions based on guidance and information available.
- Demonstrated initiative to seek help or guidance when the employee is unsure of how to proceed.

# 5.2.3 Personnel Supervision

Every employee is assigned a direct supervisor, however named, who is responsible for their supervision. Supervision is the set of activities carried out by the supervisor to oversee the progress and productivity of the employees that report to them.

General supervisory responsibilities may include but are not limited to:

- Hiring Employees
- Training Employees
- Performance Management
- Development, oversight, and execution of personnel training plans
- Monitoring personnel work product to assure the work is carried out in accordance with this quality manual, policies, SOPs, and other documents that support the quality management system.

# 5.2.4 Job Descriptions

Job Descriptions that define the required education, qualifications, experience, skills, roles and responsibilities, and reporting relationships for each PAS position are established by top management and kept by corporate HR. The job descriptions apply to employees who are directly employed by PAS, part-time, temporary, technical and administrative and by those that are under contract with PAS through other means.

The job descriptions include the education, expertise, and experience required for the position and the responsibilities and duties, including any supervisory or managerial duties assigned to the position.



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# 5.2.5 Authorization of Technical Personnel

Laboratory management authorizes technical personnel to perform the technical aspects of their position after it has been verified that the employee meets the qualifications for the position, has successfully completed required training, and the employee has demonstrated capability. After initial authorization, technical personnel are expected to maintain a current and complete training record, demonstrate on-going capability at least annually for each test method performed, and produce reliable results through accurate analysis of certified reference materials, proficiency testing samples, and/or routine quality control samples in order to remain authorized to continue to perform their duties.

Records to support authorization including education, experience, training, and other evaluations are kept by the laboratory.

# 5.3 Accommodations and Facilities

# 5.3.1 Facilities

The laboratory is designed to appropriately support the performance of procedures and to not adversely affect measurement integrity or safety. Access to the laboratory is controlled by various measures, such as card access, locked doors, and main entry. Visitors to the laboratory are required to sign-in and to be escorted by laboratory personnel during their visit. A visitor is any person that is not an employee of the laboratory.

### 5.3.2 Environmental Conditions

The laboratory is equipped with energy sources, lighting, heating, and ventilation necessary to facilitate proper performance of calibrations and tests. The laboratory ensures that housekeeping, electromagnetic interference, humidity, line voltage, temperature, sound and vibration levels are appropriately controlled to ensure the integrity of specific measurement results and to prevent adverse effects on accuracy or increases in the uncertainty of each measurement.

Environmental conditions are monitored, controlled, and recorded as required by the relevant specifications, methods, and procedures. Laboratory operations are stopped if it is discovered that the laboratory's environmental conditions jeopardize the analytical results.

# 5.3.3 Separation of Incompatible Activities

The layout and infrastructure of each work area including air handling systems, power supplies, and gas supplies of each laboratory work area is specifically designed for the type of analytical activity performed. Effective separation between incompatible work activities is maintained. For example, sample storage, preparation, and chemical handling for volatile organic analysis (VOA) is kept separate from semi-volatile organic analysis (SVOA).

The laboratory separates samples known or suspected to contain high concentration of analytes from other samples to avoid the possibility for cross-contamination. If contamination is found, the source of contamination is investigated and resolved in accordance with laboratory SOPs.

# 5.3.4 Laboratory Security

Security is maintained by controlled access to the building and by surveillance of work areas by authorized personnel. Access is controlled to each area depending on the required



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personnel, the sensitivity of the operations performed, and possible safety concerns. The main entrance is kept unlocked during normal business hours for visitors, and is continuously monitored by laboratory staff. All visitors must sign a visitor's log and a staff member must accompany them during their stay.

#### 5.3.5 Good Housekeeping

The laboratory ensures good housekeeping practices in work areas to maintain a standard of cleanliness necessary for analytical integrity and personnel health and safety. Minimally, these measures include regular cleaning of the work area. Where necessary, areas are periodically monitored to detect and resolve specific contamination and/or possible safety issues.

#### 5.4 Test Methods

#### 5.4.1 General Requirements

The laboratory uses test methods and procedures that are appropriate for the scope of analytical services the laboratory offers.

Instructions on the use and operation of equipment and sample handling, preparation, and analysis of samples are provided in SOPs. The instructions in SOPs may be supplemented with other documents including but not limited to, standard work instructions (SWI), manuals, guides, project documents and reference documents.

These documents are managed using the procedures described in SOP ENV-SOP-CORQ-0015 Document Management and Control and SOP ENV-SOP-CORQ-0016 Standard Operating Procedures and Standard Work Instructions.

Deviations to test method and SOPs are allowed under certain circumstances. See sections 4.9.1.1 and 4.9.1.2 for more information.

#### 5.4.2 Method Selection

The test methods and protocols used by the laboratory are selected to meet the needs of the customer and to conform with regulatory requirements, if applicable.

In general, the test methods offered are industry accepted methods published by international, regional, or national standards. The laboratory bases its procedure on the latest approved edition of a method unless it is not appropriate or possible to do so or unless regulatory requirements allow otherwise.

The laboratory confirms that it can perform the test method and achieve desired outcome before analyzing samples (see section 5.4.5). If there is a change in the published analytical method, then the confirmation is repeated.

When a customer does not specify the test method(s) to be used, the laboratory may suggest test methods that are appropriate for the intended use of the data and the type of samples to be tested. The laboratory will also inform customers when test methods requested are considered inappropriate for their purpose and/or out of date. This discourse takes place during review of analytical requests (See Section 4.4).



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# 5.4.3 Laboratory Developed Methods

A laboratory developed method is a method developed from scratch (no published source method), a procedure that modifies the chemistry from the source method, or a procedure that exceeds the scope and application of the source method.

Laboratory developed methods must be validated prior to use (see section 5.4.5) and the procedure documented in a test method SOP.

The requirements for non-standard methods (Section 5.4.4) also apply to laboratory developed methods.

# 5.4.4 Non-standard Methods

A non-standard method is a method that is not published or approved for use by conventional industry standards for the intended purpose of the data. Non-standard methods must be validated prior to use (see section 5.4.5) and the procedure developed and documented in a test method SOP.

At a minimum, the following information must be included in the procedure:

- Title / Identification of Method;
- Scope and Application;
- Description of the type of item to be analyzed;
- Parameters or quantities and ranges to be determined;
- Apparatus and equipment, including technical performance requirements;
- Reference standards and reference materials required;
- Environmental conditions required and any stabilization period needed
- Description of the procedure, including:
  - Affixing identification marks, handling, transporting, storing and preparing of items;
  - Checks to be made before the work is started;
  - Verifying equipment function and, where required, calibrating and/or adjusting the equipment before each use;
  - Method of recording the observations and results;
  - Any safety measures to be observed;
  - Criteria and/or requirements for approval/rejection of data;
  - o Data to be recorded and method of analysis and presentation; and
  - Uncertainty or procedure for estimating uncertainty.

Use of a non-standard method for testing must be agreed upon with the customer. The agreement, which is retained by the laboratory in the project record, must include the specifications of the client's requirements, the purpose of testing, and their authorization for use of the non-standard method.



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### 5.4.5 Method Validation

#### 5.4.5.1 Validation Description

Validation is the process of conformation and the provision of objective evidence that the stated requirements for a specific method/procedure are fulfilled.

The laboratory's requirements and procedures for method validation are outlined in SOP ENV-SOP-CORQ-0011 *Method Validation and Instrument Verification*.

#### 5.4.5.2 Validation Summary

All test methods offered by the laboratory are validated before use to confirm the procedure works and the data and results achieved meet the goals for the method. The extent of validation performed is based on technology and other factors as defined in the validation SOP (ENV-SOP-CORQ-0011).

Results of validation are retained are kept in accordance with the laboratory's SOP ENV-SOP-IND1-0047 *Data Backup and Records Archival* for retention of technical records.

The need to repeat validation is assessed by laboratory management when there are changes to the test method.

#### 5.4.5.3 Validation of Customer Need

Laboratory management reviews the results of test method validation, which include accuracy, precision, sensitivity, selectivity, linearity, repeatability, reproducibility, and robustness, against general customer needs to ensure the laboratory's procedure for the test method will meet those needs.

The review procedure is detailed in SOP ENV-SOP-CORQ-0011 Method Validation and Instrument Verification.

The following subsections highlight some of these concepts:

#### 5.4.5.3.1 Accuracy

Accuracy is the degree to which the result of a measurement, calculation, or specification conforms to the correct value of a standard. When the result recovers within a specified range from the known value (control limit); the result generated using the laboratory's test method SOP is considered accurate.

# 5.4.5.3.2 Precision

Precision refers to the closeness of two or more measurements to each other. It is generally measured by calculating the relative percent difference (RPD) or relative standard deviation (RSD) from results of separate analysis of the same sample. Precision provides information about repeatability, reproducibility, and robustness of the laboratory's procedure.



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# 5.4.5.3.3 Limits of Detection (LOD)

The LOD is the minimum result which can be reliably differentiated from a blank with a predetermined confidence level. The LOD establishes the limit of method sensitivity and is also known as the detection limit (DL) or the method detection limit (MDL).

Values below the LOD cannot be reliably measured and are not reported by the laboratory unless otherwise specified by regulatory program or test method. If reported, values below the LOD are qualified as estimated.

The LOD is established during method validation and after major changes to the analytical system or procedure that affect sensitivity are made.

The laboratory's procedure for LOD determination is detailed in laboratory SOP ENV-SOP-IND1-0009 *Determination of Detection and Quantitation Limits*. The SOP complies with 40 CFR 136 Appendix B or the current industry approved and accepted guidance for this process.

# 5.4.5.3.4 Limits of Quantitation (LOQ) and Reporting Limit (RL)

The LOQ is the minimum level, concentration, or quantity of a target analyte that can be reported with a specified degree of confidence. The LOQ is established at the same time as the LOD. The laboratory's procedure for determination and verification of the LOQ is detailed in laboratory SOP ENV-SOP-IND1-0009 *Determination of Detection and Quantitation Limits*.

The Lowest Limit of Quantitation (LLOQ) is the value of the lowest calibration standard. The LOQ establishes the routine limit of quantitation.

The LOQ and LLOQ represent quantitative sensitivity of the test method.

- The LOQ must always be equal to or greater than the LLOQ and the LLOQ must always be greater than the LOD.
- Any reported value (detect or non-detect) less than the LLOQ is a qualitative value.

The RL is the value to which the presence of a target analyte is reported as detected or not-detected. The RL is project-defined based on project data quality objectives (DQO). In the absence of project specific requirements, the RL is usually set to the LOQ or the LLOQ.

For more information, refer to laboratory SOP ENV-SOP-IND1-0009 Determination of Detection and Quantitation Limits.



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# 5.4.5.3.5 Linearity

Linearity is a mathematical concept applied to calibration models that employ multiple points to establish a calibration range used for quantitative analysis. Linearity is measured differently based on the calibration model. The accuracy of the linear regression and nonlinear curves is verified by checking percent error or relative standard error (RSE), which is the process of refitting calibration data back to the model to determine if the results are accurate. For linear curves that use average calibration or response factor, error is measured by relative standard difference (RSD).

Linearity also establishes the range of quantitation for the test method used which directly impacts the sensitivity of the test method and uncertainty in measurement results. As previously noted, the LLOQ establishes the lower limit of quantitation. Similarly, the upper range of linearity establishes the upper limit of quantitation. In general, results outside of this range are considered qualitative values. However, some inorganic methods allow for extension of the linear range above the upper limit of quantitation when accuracy at this value is verified.

Linearity can also be used to establish repeatability, reproducibility, and robustness of the laboratory's test method. When linearity is demonstrated using a specific calibration model during method validation, then use of this same calibration model to achieve linearity on a day to day basis confirms the laboratory's method is repeatable, reproducible, and robust.

# 5.4.5.3.6 Demonstration of Capability (DOC)

The DOC performed during method validation confirms that the test method demonstrates acceptable precision and accuracy. The procedure used for DOC for method validation is the same as described in section 5.2.2.1.5 for demonstration of analyst capability.

# 5.4.6 Measurement Uncertainty

The laboratory provides an estimate of uncertainty in testing measurements when required or on client request. In general, the uncertainty of the test method is reflected in the control limits used to evaluate QC performance. (See 5.9.1.1.10).

When measurement uncertainty cannot be satisfied through control limits, the laboratory will provide a reasonable estimation of uncertainty. A reasonable estimation is based on knowledge of method performance and previous experience. When estimating the analytical uncertainty, all uncertainty components which are of importance in the given situation are taken into account.



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# 5.4.7 Control of Data

The laboratory has policies and processes in place to assure that reported data is free from calculation and transcription errors, that quality control is reviewed and evaluated before data is reported, and to address manual calculation and integration.

# 5.4.7.1 Calculations, Data Transfer, Reduction and Review

Whenever possible, calculations, transfer of data, and data reduction are performed using validated software programs. (See 5.4.7.2)

If manual calculations are necessary, the results of these calculations are verified during the data review process outlined in section 5.9.3.

# 5.4.7.1.1 Manual Integration

The laboratory's policy and procedures for manual integration are provided in SOP ENV-SOP-CORQ-0006 *Manual Integration*.

This SOP includes the conditions under which manual integration is allowed and the requirements for documentation.

Required documentation of manual integration includes:

- complete audit trail to permit reconstruction of before and after results;
- identification of the analyst that performed the integration and the reason the integration was performed; and
- the individual(s) that reviewed the integration and verified the integration was done and documented in compliance with the SOP.

# 5.4.7.2 Use of Computers and Automated Acquisition

Whenever possible the laboratory uses software and automation for the acquisition, processing, recording, reporting, storage, and/or retrieval of data.

Software applications developed by PAS are validated by corporate IT for adequacy before release for general use. Commercial off-the-shelf software is considered sufficiently validated when the laboratory follows the manufacturer's or vendor's manual for set-up and use. Records of validation are kept by the corporate information technology (IT) group or by the local laboratory, whichever group performed the validation.

The laboratory's process for the protection of data stored in electronic systems includes:

- Individual user names and passwords for Laboratory Information Management Systems (LIMS) and auxiliary systems used to store or process data.
- Employee Training in Computer Security Awareness



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- Validation of spreadsheets used for calculations to verify formulas and logic yield correct results and protection of these cells to prevent unauthorized change.
- Operating system and file access safeguards
- Protection from Computer Viruses
- Regular system backup; and testing of retrieved data

The laboratory's process for software development and testing process includes:

- Verification the software application works as expected and is adequate for use and fulfills compliance requirements, such as the need to record date/time of data generation.
- Change control to assure requests for changes are reviewed and approved by management before the change is made.
- Communication channels to assure all staff are aware of changes made.
- Version Control and maintenance of historical records.

#### 5.5 Equipment

#### 5.5.1 Availability of Equipment

The laboratory is furnished with all equipment and instrumentation necessary to perform the tests offered in compliance with the specifications of the test method and to achieve the accuracy and sensitivity required.

#### 5.5.2 Calibration

Equipment and instrumentation is checked prior to use to verify it performs within tolerance for its intended application.

Laboratory management is made aware of the status of equipment and instrumentation and any needs for either on a daily basis. This information is obtained during laboratory Lean Daily Management (LDM) walkthroughs that are conducted as part of the laboratory's lean program.

# 5.5.2.1 Support Equipment

The laboratory confirms support equipment is in proper working order and meets the specifications for general laboratory use prior to placement in service and with intermediate checks thereafter. Equipment that does not meet specifications is removed from service until repaired or replaced. Records of repair and maintenance activities are maintained.

Procedures used to carry out and record these checks are outlined laboratory SOP ENV-SOP-IND1-0086 *Support Equipment*.

#### 5.5.2.2 Analytical Instruments

Analytical instruments are checked prior to placement in service in accordance with SOP ENV-SOP-CORQ-0011 Method Validation and Instrument Verification. After the



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initial service date, the calibration of instruments and verification calibration is performed in accordance with local test method SOPs.

The calibration procedures in the test method SOPs comply with the requirements for acceptable calibration practices outlined in corporate document ENV-SOT-CORQ-0026 *Calibration Procedures*, the reference methods, and any applicable regulatory or program requirements.

# 5.5.3 Equipment Use and Operation

Equipment is operated and maintained by laboratory personnel that are trained on the test method SOP. Up-to-date instructions and procedures for the use and maintenance of analytical equipment are included in SOPs and/or supplemental documents such as standard work instructions (SWI), maintenance logbooks, or instrument manuals which are made readily accessible in the work area to all laboratory personnel.

#### 5.5.4 Equipment Identification

The laboratory uniquely identifies equipment by serial number or any other unique ID system, when practical.

#### 5.5.5 Equipment Lists and Records

#### 5.5.5.1 Equipment List

The laboratory maintains a master list of equipment that includes equipment description, manufacturer, model, associated methods, and the year it was placed into service. The date of purchase is tracked by the procurement record. The equipment list(s) for each location covered by this manual is provided in Appendix E.

# 5.5.5.2 Equipment Records

In addition to the equipment list, the laboratory maintains records of equipment that include:

- Verification that equipment conforms with specifications.
- Calibration records including dates, results, acceptance criteria, and next calibration date, if scheduled.
- Maintenance plan and records
- Records of damage, malfunction, or repair

The laboratory follows an equipment maintenance program designed to optimize performance and to prevent instrument failure which is described in laboratory SOPs, instrument maintenance logbooks, or instrument user manuals.

The maintenance program includes routine maintenance activities which are performed as recommended by the manufacturer at the frequency recommended and non-routine maintenance, which is performed to resolve specific problems such as loss of sensitivity or repeated failure of instrument performance checks and quality control samples.

Maintenance is performed by laboratory personnel or by outside service providers.



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All maintenance activities performed by laboratory personnel are recorded by the individual(s) that performed the activity at the time the maintenance was performed in an instrument maintenance log.

The maintenance record minimally includes the date of maintenance, the initials of the person(s) performing maintenance, the problem encountered, a description of the activity performed, and evidence of return to analytical control. When maintenance is performed by an external vendor, the laboratory staples the service record into hardcopy maintenance logs or scans the record for easy retrieval. The laboratory provides unrestricted access to instrument maintenance logs in order to promote good instrument maintenance and recordkeeping practices.

If an instrument must be moved, the laboratory will use safe practices for handling and transport to minimize damage and contamination.

#### 5.5.6 Out of Service Protocol

Equipment that has been subjected to overloading, mishandling, gives suspect results, has been shown to be defective, or is performing outside of specified limits is taken out of service. The equipment is either removed from the work area or labeled to prevent accidental use until it has been repaired and verified to perform correctly.

When analytical equipment is taken out of service, the laboratory examines the potential effect it may have had on previous analytical results to identify any non-conforming work. (See section 4.9).

#### 5.5.7 Calibration Status

The laboratory labels support equipment to indicate calibration status, whenever practicable, or otherwise maintains the calibration status in a visible location in the work area. These procedures are described in laboratory SOP ENV-SOP-IND1-0086 *Support Equipment*.

The calibration status of analytical instruments is documented in the analytical record. Analysts verify on-going acceptability of calibration status prior to use and with instrument performance check standards. These procedures are described in test method SOPs.

#### 5.5.8 Returned Equipment Checks

When equipment or instruments are sent out of the laboratory for service, the laboratory ensures that the function and calibration status of the equipment is checked and shown to be satisfactory before the equipment is returned to service. These procedures are outlined in SOP ENV-SOP-CORQ-0011 *Method Validation and Instrument Verification*.

#### 5.5.9 Intermediate Equipment Checks

The laboratory performs intermediate checks on equipment to verify the on-going calibration status. For example, most test methods require some form of continuing calibration verification check and these procedures are included in the test method SOP. Periodic checks of support equipment are also performed.

#### 5.5.10 Safeguarding Equipment Integrity

The laboratory safeguards equipment integrity using a variety of mechanisms that include but are not limited to:



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- Adherence to manufacturer's specifications for instrument use so that settings do not exceed manufacturer's recommendations or stress the performance of the equipment.
- Established maintenance programs.
- Transparent maintenance records and unrestricted access to maintenance logs.
- Validation and approval of software before use.
- Audits to confirm instrument settings are consistent with SOPs.
- On-the-job training for safe and proper use of laboratory equipment.

#### 5.6 Measurement Traceability

#### 5.6.1 General

Measurement traceability refers to a property of a measurement result whereby the result can be related to a reference through an unbroken chain of calibration, each contributing to the measurement uncertainty. Traceability requires an established calibration of equipment used during testing including support equipment. The laboratory assures this equipment is calibrated prior to being put into service and that the reference standard and materials used for calibration are traceable to the international standard of units (SI) or national measurement standard.

When strict traceability to SI units cannot be made, the laboratory establishes traceability with the use of reference standards and equipment obtained from competent suppliers that provide calibration certificates and/or certificates of analysis (COA).

#### 5.6.2 Equipment Correction Factors

When correction factors are used to adjust results the laboratory will assure that results in computer software are also updated. For example, if the direct instrument or reading output must be corrected based on preparation factor or concentration factors, laboratory management will assure the corrected result is also updated in the software, whenever possible.

#### 5.6.3 Specific Requirements

#### 5.6.3.1 Requirements for Calibration Laboratories

The laboratory does not offer calibration services to customers.

#### 5.6.3.2 Requirements for Testing Laboratories

The laboratory has procedures in place to verify equipment is calibrated prior to being put into service (See 5.5.2), and ensures the reference standard and materials used for calibration are traceable to the international standard of units (SI) or national measurement standard. When strict traceability to SI units cannot be made, the laboratory establishes traceability with the use of reference standards and equipment obtained from competent suppliers that provide calibration certificates and/or certificates of analysis (COA).



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#### 5.6.4 Reference Standards and Reference Materials

#### 5.6.4.1 Reference Standards

The laboratory uses reference standards of measurement to verify adequacy of working weights and thermometers. The working weight is the weight(s) used for daily balance calibration checks and the working thermometers are used for temperature measurements on a daily basis.

The measurements from working weights and thermometers are compared to measurement taken by the reference standard which is traceable to SI or a national standard. The reference weights and thermometers are used solely for verification purposes unless the laboratory can prove that daily use does not adversely affect performance of the reference standard.

The laboratory performs intermediate checks of the working weights at least annually.

Working thermometers are checked against the reference thermometer annually (glass) or quarterly (digital).

The calibration of liquid in glass reference thermometers is verified every 5 years and the calibration of digital reference thermometers is verified bi-annually by an ISO/IEC 17025 accredited calibration laboratory or service provider that provides traceability to a national standard.

The calibration of the reference weight(s) is verified every 5 years by an ISO/IEC 17025 accredited calibration laboratory.

See laboratory ENV-SOP-IND1-0086 *Support Equipment* for more information about this process.

#### 5.6.4.2 Reference Materials

The laboratory purchases chemical reference materials used as analytical standards and reagents from vendors that are accredited to ISO 17034 or Guide 34. Purchased reference materials must be received with a Certificate of Analysis (COA), where available. If a reference material cannot be purchased with a COA, it must be verified by analysis and comparison to a certified reference material and/or there must be a demonstration of capability for characterization. COA are reviewed for adequacy and retained by the laboratory for future reference.

The laboratory procedure for traceability and use of these materials is provided in laboratory SOP ENV-SOP-IND1-0031 *Standard and Reagent Management and Traceability*.

This SOP includes each of the following requirements:

- Procedures for documentation of receipt and tracking. The record of entry includes name of the material, the lot number, receipt date, and expiration date.
- Storage conditions and requirements. Reference materials must be stored separately from samples, extracts, and digestates.



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- Requirements to assure that preparations of intermediate or working solutions are recorded and assigned a unique identification number for tracking. Records of preparation include the lot number of the stock standard(s) used, the type and lot number of the solvent, the formulation, date, expiration date, and the preparer's initials. The lot number of the working standards is recorded in the analytical record to provide traceability to the standard preparation record. The preparation record provides traceability to the COA, which is traceable to SI or the national measurement standard.
- A requirement that the expiration dates of prepared standards may not exceed the expiration date of the parent standard. Standards, reference materials, and reagents are not used after their expiration dates unless their reliability is thoroughly documented and verified by the laboratory. If a standard exceeds its expiration date and is not re-certified, the laboratory removes the standard and/or clearly designates it as acceptable for qualitative/troubleshooting purposes only. All prepared standards, reference materials, and reagents are verified to meet the requirements of the test method through routine analysis of quality control samples.
- The second source materials used for verification of instrument calibration are obtained from a different manufacturer or different lot from the same manufacturer.
- Procedures to check reference materials for degradation and replacement of material if degradation or evaporation is suspected.
- Procedures for labeling. At a minimum the container must identify the material, the ID of the material and the expiration date. Original containers should also be labeled with date opened.

## 5.6.4.3 Intermediate Checks

Checks to confirm the calibration status of standards and materials are described in laboratory SOPs. These checks include use of second source standards and reference materials reserved only for the purpose of calibration checks.

#### 5.6.4.4 Transport and Storage

The laboratory handles and transports reference standards and materials in a manner that protects the integrity of the materials. Reference standard and material integrity is protected by separation from incompatible materials and/or minimizing exposure to degrading environments or materials. Standards and reference materials are stored separately from samples, extracts, and digestates. All standards are stored according to the manufacturer's recommended conditions. Temperatures colder than the manufacturer's recommendation are acceptable if it does not compromise the integrity of the material (e.g. remains in liquid state and does not freeze solid). In the event a standard is made from more than a single source with different storage conditions, the standard will be stored according to the conditions specified in the analytical method.



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See the applicable analytical SOPs for specific reference material storage and transport protocols.

### 5.7 Sampling

Sampling refers to the field collection of samples for analytical testing.

Subsampling refers to a measured portion of sample used for analysis. Procedures are included SOP ENV-SOP-IND1-0028 *Sample Homogenization, Subsampling, and Compositing* to assure the portion used for testing is representative of the field collected sample.

The requirements in the following subsections apply when field sampling is performed by the laboratory.

#### 5.7.1 Sampling Plans and SOPs

When the laboratory performs field collection of samples, sampling is carried out in accordance with a written sample plan prepared by the customer or by the laboratory and by relevant sampling SOPs. These documents are made readily accessible at the sampling location. Sampling plans and SOPs are, whenever reasonable, based on appropriate governing methods and addresses the factors to be controlled to ensure the validity of the analytical results.

#### 5.7.2 Customer Requested Deviations

When the customer requires deviations, additions, or exclusions from the documented laboratory sampling plan and/or procedure, the laboratory records the client's change request in detail with the sampling record, communicates the change to sampling personnel, and may include this information in the final test report.

#### 5.7.3 Recordkeeping

The laboratory assures the sampling record includes the sampling procedure used, any deviations from the procedure, the date and time of sampling, the identification of the sampler, environmental conditions (if relevant), and the sampling location.

#### 5.8 Sample Management & Handling

#### 5.8.1 Procedures

The laboratory's procedures for sample management and handling are outlined in laboratory SOP ENV-SOP-IND1-0001 *Sample Management*.

The procedures in this SOP are established to maintain the safe handling and integrity of samples from receipt, transport, storage, to disposal and during all processing steps inbetween; to maintain client confidentiality, and to protect the interests of PAS and its customers.

#### 5.8.1.1 Chain of Custody

All samples received by the laboratory must be accompanied with a Chain of Custody (COC) record. The COC provides information about the samples collected and submitted for testing and it documents the possession of samples from time of collection to receipt by the laboratory.



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The COC record must minimally include the following information:

- Client name, address, phone number
- Project Reference
- Client Sample Identification (Client ID)
- Date, Time, and Location of Sampling
- Samplers Name or Initials
- Matrix of samples
- Type of container, and total number of containers collected for each sample
- Preservatives, if applicable
- Analyses Requested
- Any special instructions
- The date, time, and signature documenting each sample transfer from the time of collection to receipt in the laboratory. When the COC is transported inside the cooler, independent couriers do not sign the COC. Shipping manifests and/or air bills are the records of possession during transport.

A complete and legible COC is required. If the laboratory observes that the COC is incomplete or illegible, the client is contacted for resolution. The COC must be filled out in indelible ink. Personnel correct errors by drawing a single line through the original entry so the entry is not obscured, entering the correct information, and initialing and dating the change.

#### 5.8.1.2 Legal Chain of Custody

Legal chain of custody is a chain of custody protocol used for evidentiary or legal purposes. The protocol is followed by the laboratory when requested by customer or where mandated by a regulatory program.

Legal chain of custody (COC) protocol establishes an intact, continuous record of the physical possession*, storage, and disposal of "samples" which includes sample aliquots and sample extracts/digestates/distillates.

Legal COC records account for all time periods associated with the samples, and identify all individuals who physically handled individual samples. Legal COC begins at the point established by legal authority, which is usually at the time the sample containers are provided by the laboratory for sample collection or when sample collection begins.

*A sample is in someone's custody if:

- It is in one's physical possession;
- It is in one's view after being in one's physical possession;
- It has been in one's physical possession and then locked or sealed so that no one can tamper with it; and/or



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• It is kept in a secure area, restricted to authorized personnel only.

Refer to laboratory SOP ENV-SOP-IND1-0051 Internal Chain-of-Custody for more information.

#### 5.8.2 Unique Identification

Each sample is assigned a unique identification number by the laboratory (Lab ID) after the sample has been checked and accepted by the laboratory in accordance with the laboratory's sample acceptance policy (See 5.8.3). The Lab ID is affixed to the sample container using a durable label.

The unique identification of samples also applies to subsamples, and prepared samples, such as extracts, digestates, etc.

The lab ID is linked to the field ID (client ID) in the laboratory's record. Both IDs are linked to the testing activities performed on the sample and the documentation records of the test.

For additional information, see 5.8.4.

#### 5.8.3 Sample Receipt Checks and Sample Acceptance Policy

The laboratory checks the condition and integrity of samples at the time of receipt and compares the labels on the sample containers to the COC record. Any problem or discrepancy is recorded. If the problem impacts the suitability of the sample for analysis or if the documentation is incomplete, the client is notified for resolution. Decisions and instructions from the client are documented in the project record.

#### 5.8.3.1 Sample Receipt Checks

The following checks are performed:

- Verification that the COC is complete and legible.
- Verification that each sample's container label includes the client sample ID, the date and time of collection and the preservative, if applicable, in indelible ink.
- The container type and preservative, if applicable, is appropriate for each test requested.
- Adequate volume is received for each test requested.
- Visual inspection for damage or evidence of tampering.
- Visual inspection for presence of headspace in VOA vials. (VOA = volatile organic analysis).
- Thermal Preservation: For chemical testing methods for which thermal preservation is required, temperature on receipt is acceptable if the measurement is above freezing but ≤6°C. For samples that are hand-delivered to the laboratory immediately after sample collection, there must be evidence that the chilling process has begun, such as arrival on ice. The requirements for thermal preservation vary based on the scope of testing performed. For example, for microbiology, temperature on receipt is acceptable if the measurement is <10°C. Refer to the laboratory's SOP for sample receipt for more information.</li>



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- Chemical Preservation, if applicable
- Holding Time: Sample receiving personnel are trained to recognize tests with holding time ≤48 hours and to expedite the login of these samples. When samples are received out of hold, the laboratory will notify the client and request instruction. If the decision is made to proceed with analysis, the final test report will include documentation of this instruction. Samples that include tests with a holding time of 15 minutes or less from collection are processed without client approval and final test report is qualified.

### 5.8.3.2 Sample Acceptance Policy

The laboratory maintains a sample acceptance policy in accordance with regulatory guidelines to clearly establish the circumstances in which sample receipt is accepted or rejected. When receipt does not meet acceptance criteria for any one of these conditions, the laboratory must document the noncompliance, contact the customer, and either reject the samples or fully document any decisions to proceed with testing. In accordance with regulatory specifications, receipt conditions that do not meet criteria are documented in the final test report.

All samples received must meet each of the following:

- Be listed on a complete and legible COC.
- Be received in properly labeled sample containers.
- Be received in appropriate containers that identify preservative, if applicable.
- The COC must include the date and time of collection for each sample.
- The COC must include the test requested for each sample.
- Be received within holding time. Any samples received beyond the holding time will not be processed without prior customer approval. An exception to this policy is made for tests with a 15 minute holding time, such as pH, residual chlorine, and ferrous iron. Those tests are performed without customer approval and the data is qualified.
- Have sufficient sample volume to proceed with the analytical testing. If insufficient sample volume is received, analysis will not proceed without customer approval.
- Be received within appropriate temperature ranges (not frozen but ≤6°C) unless program requirements or customer contractual obligations mandate otherwise. The cooler temperature is recorded directly on the COC. For samples that are hand-delivered to the laboratory immediately after sample collection, there must be evidence that the chilling process has begun, such as arrival on ice. If samples arrive that are not compliant with these temperature requirements, the customer will be notified. The analysis will NOT proceed unless otherwise directed by the customer. If less than 72 hours remain in the hold time for the analysis, the analysis may be started while the customer is contacted to avoid missing the hold time.



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### 5.8.4 Sample Control and Tracking

The samples are controlled and tracked using the Laboratory Information Management System (LIMS). The LIMS stores information about the samples and the project. The process of entering information into the LIMS is called login and these procedures are described in laboratory SOP ENV-SOP-IND1-0001 *Sample Management*. After login, a label is generated and affixed to each sample container. Information on this label, such as the lab ID, links the sample container to the information in LIMS.

At a minimum, the following information is entered during login:

- Client Name and Contact Information;
- The laboratory ID linked to the client ID;
- Date and time of sample collection;
- Date and time of sample receipt;
- Matrix of sample;
- Tests Requested.

### 5.8.5 Sample Storage, Handling, and Disposal

The laboratory procedures for sample storage, handling and disposal are detailed in laboratory SOPs ENV-SOP-IND1-0001 *Sample Management* and ENV-SOP-IND1-0004 *Waste Handling and Management*.

#### 5.8.5.1 Sample Storage

The samples are stored according to method and regulatory requirements as per test method SOPs. Samples are stored away from all standards, reagents, or other potential sources of contamination and stored in a manner that prevents cross contamination. Volatile samples are stored separately from other samples. All sample fractions, extracts, leachates, and other sample preparation products are stored in the same manner as actual samples or as specified by the analytical method.

Refrigerated storage areas are maintained at  $\leq$ 6°C (but not frozen) and freezer storage areas are maintained at <-10°C (unless otherwise required per method or program). The temperature of each storage area is checked and documented at least once each day of use. If the temperature falls outside the acceptable limits, then corrective actions are taken and appropriately documented.

The laboratory is operated under controlled access protocols to ensure sample and data integrity. Visitors must register at the front desk and be properly escorted at all times. Samples are taken to the appropriate storage location immediately after sample receipt and login procedures are completed. All sample storage areas have limited access. Samples are removed from storage areas by designated personnel and returned to the storage areas as soon as possible after the required sample quantity has been taken.



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#### 5.8.5.2 Sample Retention and Disposal

The procedures used by the laboratory for sample retention and disposal are detailed in laboratory SOP ENV-SOP-IND1-0004 *Waste Handling and Management*.

In general, unused sample volume and prepared samples such as extracts, digestates, distillates and leachates are retained by the laboratory for the period of time necessary to protect the interests of the laboratory and the customer.

Samples may be stored at ambient temperature when all analyses are complete, the hold time is expired, the report has been delivered, and/or when allowed by the customer or program. Samples requiring storage beyond the minimum sample retention time due to special requests or contractual obligations may be stored at ambient temperature unless the laboratory has sufficient capacity to store them refrigerated or frozen and their presence does not compromise the integrity of other samples.

After this period expires, non-hazardous samples are properly disposed of as non-hazardous waste. The preferred method for disposition of hazardous samples is to return the excess sample to the customer.

### 5.9 Assuring the Quality of Test Results

#### 5.9.1 Quality Control (QC) Procedures

The laboratory monitors the validity and reliability of test results using quality control (QC) samples that are prepared and analyzed concurrently with field samples in the same manner as field samples. See the glossary for definition of preparation and analytical batch.

The results of QC performed during the testing process are used by the laboratory to assure the results of analysis are consistent, comparable, accurate, and/or precise within a specified limit. When the results are not within acceptance criteria or expectations for method performance, correction and corrective action(s) are taken. These actions may include retesting samples or reporting data with qualification to alert the end user of the situation.

Other QC measures performed include the use of certified reference materials (see 5.6.4), participation in interlaboratory proficiency testing (see 5.9.1.2), verification that formulae used for reduction of data and calculation of results is accurate (see 5.9.3), on-going monitoring of environmental conditions that could impact test results (see 5.3.2), and evaluation and verification of method selectivity and sensitivity (see 5.4.5).

QC results are also used by the laboratory to monitor statistical trends in performance over time and to establish acceptance criteria when no method or regulatory criteria exist (see 5.9.1.4).

#### 5.9.1.1 Essential QC

Although the general principles of QC for the testing process apply to all testing, the QC protocol used for each test depends on the type of test performed.

QC protocol used by the laboratory to monitor the validity of the test are specified in test method SOPs. The SOP includes QC type, frequency, acceptance criteria, corrective actions, and procedures for reporting of nonconforming work.



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These requirements in the SOP conform to the reference method and any applicable regulations or certification and accreditation program requirement for which results of the test are used. When a project requires more stringent QC protocol than specified in the SOP, project specification is followed.

The following are examples of essential QC for Chemistry:

#### 5.9.1.1.1 Second-Source Standard (ICV/QCS)

The second-source standard is obtained from a different vendor than the standards used for calibration or is a different standard lot from the same vendor. It is a positive control used to verify the accuracy of a new calibration. This check is referred to in test method and quality system standards as the Initial Calibration Verification (ICV) or Quality Control Sample (QCS). The second source standard is analyzed immediately after the calibration and before analysis of any samples. When the ICV is not within acceptance criteria, a problem with the purity or preparation of the standards may be indicated.

### 5.9.1.1.2 Continuing Calibration Verification (CCV)

CCV is analyzed to determine if the analytical response has significantly changed since initial calibration. If the response of the CCV is within criteria, the initial calibration is considered valid. If not, there is a problem that requires further investigation. Actions taken are technology and method specific.

#### 5.9.1.1.3 Method Blank (MB) / Other Blanks

A method blank is a negative control used to assess for contamination during the prep/analysis process. The MB consists of a clean matrix, similar to the associated samples, that is known to be free of analytes of interest. The MB is processed along with and under the same conditions as the associated samples to include all steps of the analytical procedure.

In general, contamination is suspected when the target analyte is detected in the MB above the reporting limit. Some programs may require evaluation of the MB to  $\frac{1}{2}$  the reporting limit or to the detection limit (LOD). When contamination is evident, the source is investigated and corrections are taken to reduce or eliminate it. Analytical results associated with a MB that does not meet criteria are qualified in the final test report when applicable.

Other types of blanks that serve as negative controls in the process may include:

- Trip Blanks (VOA)
- Storage Blanks
- Equipment Blanks
- Field Blanks



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- Calibration Blanks
- Cleanup Blanks
- Instrument Blanks

### 5.9.1.1.4 Laboratory Control Sample (LCS)

The LCS is positive control used to evaluate the performance of the total analytical system, including all preparation and analytical steps. The LCS is spiked by the laboratory with a known amount of analyte. The spike is a standard solution that is pre-made or prepared from a certified reference standard.

When the percent recovery (%R) of the LCS is within the established control limit, sufficient accuracy has been achieved. If not, the source of the problem is investigated and corrected and the procedure may be repeated. Analytical results associated with LCS that does not meet criteria are qualified in the final test report when applicable.

## 5.9.1.1.5 Matrix Spike (MS) and Matrix Spike Duplicate (MSD)

Matrix spikes measure the effect the sample matrix has on precision and accuracy of the determinative test method. The MS and MSD are replicates of a client sample that are spiked with a known amount of target analyte.

Due to the heterogeneity of matrices even of the same general matrix type, matrix spike results mostly provide information on the effect of the matrix to the client whose sample was used and on samples of the same matrix from the same sampling site. Therefore, MS should be client-specific when the impact of matrix on accuracy and precision is a project data quality objective. When there is not a client-specified MS for any sample in the batch, the laboratory randomly selects a sample from the batch; the sample selected at random is called a "batch" matrix spike.

The MS/MSD results for percent recovery and relative percent difference are checked against control limits. Because the performance of matrix spikes is matrix-dependent, the result of the matrix spike is not used to determine the acceptability of the test batch.

## 5.9.1.1.6 Sample Duplicate (SD)

A sample duplicate is a second replicate of sample that is prepared and analyzed in the laboratory along another replicate. The SD is used to measure precision.

The relative percent difference between replicates is evaluated against the method or laboratory derived criteria for relative percent difference (RPD), when this criterion is applicable. If RPD is not met, associated test results are reported with qualification.



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### 5.9.1.1.7 Surrogates

Surrogates, when required, are compounds that mimic the chemistry of target analytes but are not expected to occur naturally in real world samples. Surrogates are added to each sample and matrix QC samples (MS, MSD, SD) at known concentration to measure the impact of the matrix on the accuracy of method performance. Surrogates are also added to the positive and negative control samples (MB, LCS) to evaluate performance in a clean matrix, and included in the calibration standards and calibration check standards.

The percent recovery of surrogates is evaluated against methodspecified limits or statistically derived in-house limits. Projectspecific limits and/or program-specific limits are used when required. Results with surrogate recovery out of limits in samples are reported with qualification. Samples with surrogate failures can also be re-extracted and/or re-analyzed to confirm that the out-ofcontrol value was caused by the matrix of the sample and not by some other systematic error.

### 5.9.1.1.8 Internal Standards

Internal Standards are compounds not expected to occur naturally in field samples. They are added to every standard and sample at a known concentration prior to analysis for the purpose of adjusting the response factor used in quantifying target analytes. The laboratory follows specific guidelines for the treatment of internal standard recoveries and further information can be found in the applicable laboratory SOP.

## 5.9.1.1.9 QC Acceptance Criteria and Control Limits

The QC acceptance criteria are specified in test method SOPs. The criteria in the SOP are based on the requirements in the published test method or regulatory program. When there are no established acceptance criteria, the laboratory develops acceptance criteria in accordance with recognized industry standards.

Some methods and programs require the laboratory to develop and use control limits for LCS, MS/MSD and surrogate evaluation. Laboratory-developed limits are referred to as "in-house" control limits or statistical control limits. Statistical control limits represent  $\pm$  3 Standard Deviations (99% confidence level) from the average recovery of at least 20 data points generated using the same preparation and analytical procedure in a similar matrix.

See laboratory SOP ENV-SOP-IND1-0039 *Control Chart Generation* for more information.



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# 5.9.1.2 Proficiency Testing (PT)

The laboratory participates in proficiency testing (PT) studies to measure performance of the test method and to identify or solve analytical problems. PT samples measure laboratory performance through the analysis of unknown samples provided by an external source.

The PT samples are obtained from accredited proficiency testing providers (PTP) and handled as field samples which means they are included in the laboratory's normal analytical processes and do not receive extraordinary attention due to their nature.

The laboratory does not share PT samples with other laboratories, does not communicate with other laboratories regarding current PT sample results during the duration of the study, and does not attempt to obtain the assigned value of any PT sample from the PT provider.

The laboratory initiates an investigation and corrective action plan whenever PT results are deemed unacceptable by the PT provider.

The frequency of PT participation is based on the certification and accreditation requirements held by the laboratory.

### 5.9.2 QC Corrective Action

When the results of QC are not within acceptance criteria or expectations for method performance, correction and corrective action(s) are taken per the specifications in the test method SOP. These actions may include retesting or reporting of data with qualification to alert the end user of the situation.

#### 5.9.3 Data Review

The laboratory uses a tiered system for data review. The tiered process provides sequential checks to verify data transfer is complete; manual calculations, if performed, are correct, manual integrations are appropriate and documented, calibration and QC requirements are met, appropriate corrective action was taken when required, test results are properly qualified, process and test method SOPs were followed, project specific requirements were met, when applicable, and the test report is complete.

The sequential process includes three tiers referred to as primary review, secondary review, and administrative/completeness review.

Detailed procedures for the data review process are described in laboratory SOP ENV-SOP-IND1-0023 *Data Review Process*. The general expectations for the tiered review process are described in the following sections:

#### 5.9.3.1 Primary Review

Primary review is performed by the individual that performed the analytical testing. All laboratory personnel are responsible for review of their work product to assure it is complete, accurate, documented, and consistent with policy and SOPs.

Checks performed during primary review include but are not limited to:

Verification that data transfer and acquisition is complete



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- Manual calculations, if performed, are documented and accurate
- Manual integrations, if performed, are documented and comply with SOP ENV-SOP-CORQ-006 *Manual Integration*
- Calibration and QC criteria were met, and/or proper correction and corrective actions were taken, and data and test results associated with QC and criteria exceptions are properly qualified
- Work is consistent with SOPs and any other relevant instructional document such as SWI, program requirements, or project QAPP

#### 5.9.3.2 Secondary Review

Secondary review is performed by qualified peer or supervisor. Secondary review is essentially a repeat of the checks performed during primary review by another person. In addition to the checks of primary review, secondary review includes chromatography review to check the accuracy of analyte identification.

#### 5.9.3.3 Completeness Review

Completeness review is an administrative review performed prior to release of the test report to the customer. Completeness review verifies that the final test report is complete and meets project specification. This review also assures that information necessary for the client's interpretation of results are explained in the case narrative, if applicable, or qualified in the test report.

### 5.9.3.4 Data Audits

In addition to the 3 tier data review process, test reports may be audited by local QA to verify compliance with SOPs and to check for data integrity, technical accuracy, and regulatory compliance. These audits are not usually done prior to issuance of the test report to the customer. The reports chosen for the data audits are selected at random.

If any problems with the data or test results are found during the data audit, the impact of the nonconforming work is evaluated using the process described in Section 4.9.

Also see Section 4.14 for internal audits.

#### 5.10 Reporting

#### 5.10.1 General Requirements

The laboratory reports the results of testing in a way that assures the results are clear and unambiguous. All data and results are reviewed prior to reporting to assure the results reported are accurate and complete.

Test results are summarized in test reports that include all information necessary for the customer's interpretation of the test results. Additional information necessary to clarify the data or disclose nonconformance, exceptions, or deviations that occurred during the analytical process are also reported to the customer in the test report.

The specifications for test reports and electronic data deliverables (EDD) are established between the laboratory and the customer at the time the request for analytical services is



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initiated. The report specifications include the test report format, protocol for the reporting limit (RL) and conventions for the reporting of results less than the limit of quantitation (LOQ). Information about review of analytical service requests is provided in Section 4.4.

### 5.10.2 Test Reports: Required Items

Test Reports are prepared by the laboratory at the end of the testing process. The format of the report depends on the level of reporting requested by the customer. The laboratory offers a variety of standardized test report formats and can also provide custom test report formats, when necessary.

The level of detail required in the test report depends on the customer's needs for data verification, validation, and usability assessments that occur after the laboratory releases the test report to the customer. The test report formats offered by the laboratory provide gradient levels of detail to meet the unique needs of each customer. The laboratory project manager helps the customer select the test report format that best meets their needs. When a specific report format or protocol is required for regulatory or program compliance, the laboratory project manager must ensure the test report selected meets those requirements.

Every test report issued by the laboratory includes each of the following items:

- a) Title
- b) Name and phone number of a point of contact from the laboratory issuing the report.
- c) Name and address of the laboratory where testing was performed. When testing is done at multiple locations within network (IRWO), the report must clearly identify which network laboratory performed each test and must include the physical address of each laboratory.
- d) Unique identification of the test report, an identifier on each page of the report, and clear identification of the end of the report.
- e) The name and address of the customer
- f) Identification of test methods used
- g) Cross reference between client sample identification number (Sample ID) and the laboratory's identification number for the sample (Lab ID) to provide unambiguous identification of samples.
- h) The date of receipt of samples, condition of samples on receipt, and identification of any instance where receipt of the samples did not meet sample acceptance criteria.
- i) Date and times of sample collection, receipt, preparation, and analysis.
- j) Test results and units of measurement.
- k) Qualifiers appended to results, when required.
- l) Name, title, signature of the person(s) authorizing release of the test report and date of release.
- m) A statement that the results in the test report relate only to the items tested.
- n) Statement that the test report may not be reproduced except in full without written approval from the laboratory.



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### 5.10.3 Test Reports: Supplemental Items

#### 5.10.3.1 Supplemental Requirements

The following items are included in the test report when required or relevant:

- a) Explanation of departure from test method SOPs including, what the departure was and why it was necessary.
- b) Statistical methods used. (Required for Whole Effluent Toxicity)
- c) For solid samples, specification that results are reported on a dry weight or wet weight basis.
- d) Signed Affidavit, when required by client or regulatory agency.
- e) A statement of compliance / non-compliance with requirements or specifications (client, program, or standard) that includes identification of test results that did not meet acceptance criteria.
- f) When requested by the client, statement of estimated measurement uncertainty. In general, for environmental testing, estimated uncertainty of measurement is extrapolated from LCS control limits. Control limits incorporate the expected variation of the data derived from the laboratory's procedure. When the control limits are specified by the test method or regulatory program, the control limits represent the expected variation of the test method and/or matrices for which the test method was designed.
- g) Opinions and Interpretations (See Section 5.10.5).
- h) If a claim of accreditation/certification is included in the test report, identification of any test methods or analytes for which accreditation/certification is not held by the laboratory. The fields of accreditation/certification vary between agencies and it cannot be presumed that because accreditation/certification is not held that it is offered or required.
- i) Certification Information, including certificate number and issuing body.

#### 5.10.3.2 Test Reports: Sampling Information

The following items are included in the test report when samples are collected by the laboratory or when this information is necessary for the interpretation of test results:

- a) Date of Sampling.
- b) Unambiguous identification of material samples.
- c) Location of sampling including and diagrams, sketches, or photographs.
- d) Reference to the sampling plan and procedures used.
- e) Details of environmental conditions at time of sample that may impact test results.
- f) Any standard or other specification for the sampling method or procedure, and deviations, additions to or exclusions from the specification concerned.
- g) Results of field measurements, if requested.



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### 5.10.4 Calibration Certificates

The laboratory does not perform calibration activities for its customers and calibration certificates are not offered or issued.

#### 5.10.5 Opinions and Interpretations

The laboratory provides objective data and information to its customers of sufficient detail for their interpretation and decision making. Objective data and information is based solely on fact and does not attempt to explain the meaning (interpret) or offer a view or judgment (opinion). Sometimes the customer may request the laboratory provide opinion or interpretation to assist them with their decisions about the data.

When opinions and interpretations are included in the test report, the laboratory will document the basis upon which the opinions and interpretations have been made and clearly identify this content as opinion or interpretation in the test report.

Examples of opinion and interpretation include but are not limited to:

- The laboratory's viewpoint on how a nonconformance impacts the quality of the data or usability of results.
- The laboratory's judgment of fulfillment of contractual requirements.
- Recommendations for how the customer should use the test results and information.
- Suggestions or guidance to the customer for improvement.

When opinions or interpretations are verbally discussed with the customer, the content of these conversations is summarized by the laboratory and kept in the project record.

#### 5.10.6 Subcontractor Reports

When analytical work has been subcontracted to an organization external to PAS, the test report from the subcontractor is included in its entirety as an amendment to the final test report.

Note: Test results for analytical work performed within the PAS network may be merged into a single test report. The merged test report issued clearly identifies the location and address of each network laboratory that performed testing and which tests they performed. (See 5.10.2)

#### 5.10.7 Electronic Transmission of Results

When test results and/or reports are submitted to the customer through electronic transmission, the procedures established in this manual are followed for confidentiality and protection of data.

#### 5.10.8 Format of Test Reports

The test formats offered by the laboratory are designed to accommodate each type of analytical test method carried out by the laboratory and to minimize the possibility of misunderstanding or misuse of analytical results. The format of electronic data deliverables (EDD) follows the specifications for the EDD.



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#### 5.10.9 Amendments to Test Reports

Test reports that are revised or amended by the laboratory after date of release of the final test report to the customer are issued as a new test report that is clearly identified as an amendment or revision and that includes a reference to the originally issued final test report.

Changes made to test results and data before the final test report is issued to the customer are not amendments or revisions, these are corrections to errors found during the laboratory's data verification and review process.

The laboratory's procedure for report amendments and revision are outlined in laboratory SOP ENV-SOP-IND1-0048 *Final Report and Data Deliverable Content*.

# 6.0 **REVISION HISTORY**

This Version:

Section	Description of Change
All	This version is a complete rewrite of the document this version supersedes.

This document supersedes the following documents:

Document Number	Title	Version
ENV-MAN-CORQ-0001	Quality Assurance Manual	01



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# 7.0 APPENDICES

# 7.1 Appendix A: Certification / Accreditation Listing

The certifications / accreditation lists provided in this manual represent those that were held by the named location on the effective date of this manual. This information is subject to change without notice and must not be considered valid proof of certification or accreditation status. Current certificates are maintained by Local QA and a copy of the certificate is posted to PAS's eDMS Portal for access by all PAS employees. External parties should contact the laboratory for the most current information.

#### Indianapolis Laboratory Certifications Accrediting Accrediting Authority **Program Category** Accreditation # Agency Hazardous Waste 200074 Illinois (Secondary TNI) IL-EPA Illinois (Secondary TNI) Non-Potable Water 200074 IL-EPA Indiana Drinking Water IN-SDH C-49-06 Kansas (Primary TNI) Hazardous Waste KS-DHE E-10177 Kansas (Primary TNI) Non-Potable Water KS-DHE E-10177 Kentucky UST KY-DEP 80226 Kentucky Wastewater KY-DEP KY98019 Michigan Drinking Water MI-DEQ/EGLE 9050 Ohio VAP-Hazardous Waste OH-EPA CL0065 Ohio VAP-Non-Potable Water OH-EPA CL0065 Oklahoma Non-Potable Water 9204 **OK-DEQ** Oklahoma Solids 9204 **OK-DEQ** Texas (Secondary TNI) Non-Potable Water TX-CEQ T104704355 Texas (Secondary TNI) Solid Chemical Mat. TX-CEQ T104704355 USDA Foreign Soil Permit USDA P330-19-00257 West Virginia Hazardous Waste WV-DEP 330 West Virginia Non-Potable Water WV-DEP 330 Wisconsin Non-Potable Water WI-DNR 999788130 Wisconsin WI-DNR 999788130 Potable Water Grand Rapids Laboratory Certifications Accrediting Accrediting Authority **Program Category** Accreditation # Agency 026-999-161 Minnesota (Primary TNI) Non-Potable Water MDH MI-EGLE Michigan Drinking Water 0034

### 7.1.1 PAS-Indianapolis and PAS-Grand Rapids



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# 7.2 Appendix B: Capability Listing

The capabilities listed in this Appendix were held by the location referenced on the effective date of this manual. This information is subject to change without notice. External parties should contact the laboratory for the most current information regarding laboratory capabilities and certifications.

Table Legend:

- DW = Drinking Water
- NPW = Non-Potable Water
- SCM = Solid and Chemical Materials
- Waste = Non-Aqueous Phase Liquid (NAPL), Oil

Parameter	Method	Matrices			
		DW	NPW	SCM	Waste
Specific Conductance	EPA 120.1/SM 2510B		x		
Mercury, Low-Level	EPA 1631E		x		
Oil and Grease, HEM/SGT-HEM	EPA 1664A		x		
Turbidity	EPA 180.1		x		
ICP Metals	EPA 200.7	x	x		
ICP Metals	SW 6010B		x	x	x
ICP-MS Metals	EPA 200.8	x	x		
ICP-MS Metals	SW 6020		x	x	x
Apparent Color	SM 2120B		x		
Acidity	SM 2310B		x		
Alkalinity	SM 2320B		x		
Hardness	SM 2340B		x		
Mercury	EPA 245.1	x	x		
Mercury	SW 7470A		x		
Mercury	SW 7471A			x	x
Total Solids	SM 2540B		x	x	x
Total Dissolved Solids	SM 2540C		x		
Total Suspended Solids	SM 2540D		x		
Total Volatile Solids	SM 2540E		x		
Settleable Solids	SM 2540F		x		
Percent Moisture/Percent Solids/Total Volatile Solids	SM 2540G			x	x
Anions	EPA 300.0	x	x		

### 7.2.1 PAS-Indianapolis



Parameter	Method		Matrices			
		DW	NPW	SCM	Waste	
Anions	SW 9056A		x	x		
Cyanide	EPA 335.4	x	x			
Cyanide	SM 4500CN-E/SW 9012A		x	x	x	
Cyanide, Amenable	EPA 335.4		x			
Cyanide, Amenable	SM 4500CN-G/SW 9012A		x	x	x	
Cyanide, Free	SW 9014/OIA 1677		x	x		
Cyanide, Available	OIA 1677		x	x		
Hexavalent Chromium	SM 3500Cr-B		x			
Hexavalent Chromium	SW 7196A		x	x	x	
Ferrous Iron	Hach 8146		x			
Ammonia	EPA 350.1/SM 4500NH3-G		x	x		
Total Kjeldahl Nitrogen	EPA 351.2		x	x		
Nitrogen, Nitrate/Nitrite	EPA 353.2	x	x	x		
Total Phosphorus	EPA 365.1		x	x		
Chemical Oxygen Demand (COD)	EPA 410.4		x			
Total Recoverable Phenolics	EPA 420.4/SW 9066		x	x		
Chloride	SM 4500Cl-E		x			
Residual Chlorine	SM 4500Cl-G		x			
Fluoride	SM 4500F-C		x			
pН	SM 4500H+-B		x			
pН	SW 9045C			x	x	
Orthophosphate as P	SM 4500P-E		x			
Sulfide	SM 4500S2- D		x			
Sulfate	SW 9038/ASTM D516		x			
Biochemical Oxygen Demand (BOD)	SM 5210B		x			
Total Organic Carbon (TOC)	SM 5310C		x			
Anionic Surfactants (MBAS)	SM 5540C		x			
Volatile Organic Compounds (VOCs)	EPA 524.2	x				
Volatile Organic Compounds (VOCs)	EPA 624.1		x			
Volatile Organic Compounds (VOCs)	SW 8260C		x	x	x	
Polynuclear Aromatic Hydrocarbons (PAHs)	SW 8270C SIM		x	x		
Semivolatile Organic Compounds (SVOCs)	EPA 625.1		x			



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Parameter	Method		Matrices		
		DW	NPW	SCM	Waste
Semivolatile Organic Compounds (SVOCs)	SW 8270C		x	x	x
Organochlorine Pesticides	EPA 608.3		x		
Organochlorine Pesticides	SW 8081B		x	x	x
Polychlorinated Biphenyls (PCBs)	EPA 608.3		x		
Polychlorinated Biphenyls (PCBs)	SW 8082A		x	x	x
EDB and DBCP	SW 8011		x		
Diesel Range Organics (DRO/ERO)	SW 8015D		x	x	
Gasoline Range Organics (GRO)	SW 8015D		x	x	
Alcohols and Glycols	SW 8015D		x	x	
Organophosphorus Pesticides	SW 8141B		x	x	
Chlorinated Herbicides	SW 8151A		x	x	
Flash Point	EPA 1010A			x	x
Toxicity Characteristic Leaching Procedure (TCLP)	SW 1311		x	x	x
Synthetic Precipitation Leaching Procedure (SPLP)	SW 1312		x	x	x
Free Liquids (Paint Filter Test)	SW 9095			x	x
Dissolved Gases	RSK 175		x		

# 7.2.2 PAS-Grand Rapids

Parameter	Method		Matrices			
		DW	NPW	SCM	Waste	
Apparent Color	SM 2120B		x			
Turbidity	SM 2130B		x			
Hexavalent Chromium	SM 3500Cr-B/SW 7196A		x			
Ferrous Iron	SM 3500Fe-B		x			
Nitrogen, Nitrate/Nitrite	SM 4500NO3-F	x	x			
Orthophosphate as P	SM 4500P-E		x			
Sulfite	SM 4500SO3-B		x			
Biochemical Oxygen Demand (BOD)	SM 5210B		x			
Carbon Dioxide	SM 4500CO2-C		x			
Fecal Coliform	SM 9222D	x	x			
Total Coliform	SM 9223B	x	x			
True Color	NCASI 71.01		x			



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## 7.3 Appendix C: Glossary

This glossary provides common terms and definitions used in the laboratory. It is not intended to be a complete list of all terms and definitions used. The definitions have been compiled mostly from the TNI Standard and DoD QSM. Although this information has been reproduced with care, errors cannot be entirely excluded. Definitions for the same term also vary between sources. When the meaning of a term used in a laboratory document is different from this glossary or when the glossary does not include the term, the term and definition is included or defined in context in the laboratory document.

Term	Definition
3P Program	PAS-The continuous improvement program used by PAS that focuses on Process, Productivity, and Performance.
Acceptance Criteria	TNI- Specified limits placed on characteristics of an item, process, or service defined in requirement documents.
Accreditation	TNI- The process by which an agency or organization evaluates and recognizes a laboratory as meeting certain predetermined qualifications or standards, thereby accrediting the laboratory. DoD- Refers to accreditation in accordance with the DoD ELAP.
Accreditation Body (AB)	TNI- The organization having responsibility and accountability for environmental laboratory accreditation and which grants accreditation under this program. DoD- Entities recognized in accordance with the DoD-ELAP that are required to operate in accordance with ISO/IEC 17011, <i>Conformity assessment: General requirements for accreditation bodies accrediting conformity assessment bodies.</i> The AB must be a signatory, in good standing, to the International Laboratory Accreditation Cooperation (ILAC) mutual recognition arrangement (MRA) that verifies, by evaluation and peer assessment, that its signatory members are in full compliance with ISO/IEC 17011 and that its accredited laboratories comply with ISO/IEC 17025.
Accuracy	TNI- The degree of agreement between an observed value and an accepted reference value. Accuracy includes a combination of random error (precision) and systematic error (bias) components that are due to sampling and analytical operations; a data quality indicator.
Activity, Absolute	TNI- Rate of nuclear decay occurring in a body of material, equal to the number of nuclear disintegrations per unit time. NOTE: Activity (absolute) may be expressed in becquerels (Bq), curies (Ci), or disintegrations per minute (dpm), and multiples or submultiples of these units.
Activity, Areic	TNI- Quotient of the activity of a body of material and its associated area.
Activity, Massic	TNI- Quotient of the activity of a body of material and its mass; also called specific activity.
Activity, Volumic	TNI- Quotient of the activity of a body of material and its volume; also called activity concentration. NOTE: In this module [TNI Volume 1, Module 6], unless otherwise stated, references to activity shall include absolute activity, areic activity, massic activity, and volumic activity.
Activity Reference Date	TNI- The date (and time, as appropriate to the half-life of the radionuclide) to which a reported activity result is calculated. NOTE: The sample collection date is most frequently used as the Activity Reference Date for environmental measurements, but different programs may specify other points in time for correction of results for decay and ingrowth.
Aliquot	DoD- A discrete, measured, representative portion of a sample taken for analysis.
American Society for Testing and Materials (ASTM)	An international standards organization that develops and publishes voluntary consensus standards for a wide range of materials, products, systems and services.
Analysis	DoD- A combination of sample preparation and instrument determination.
Analysis Code (Acode)	All the set parameters of a test, such as Analytes, Method, Detection Limits and Price.
Analysis Sequence	A compilation of all samples, standards and quality control samples run during a specific amount of time on a particular instrument in the order they are analyzed.
Analyst	TNI- The designated individual who performs the "hands-on" analytical methods and associated techniques and who is the one responsible for applying required laboratory practices and other pertinent quality controls to meet the required level of quality.



Analyte	TNI- A substance, organism, physical parameter, property, or chemical constituent(s) for which an
	environmental sample is being analyzed.
	DoD- The specific chemicals or components for which a sample is analyzed; it may be a group of
	chemicals that belong to the same chemical family and are analyzed together.
Analytical Method	DoD- A formal process that identifies and quantifies the chemical components of interest (target
A polytical Lipportainty	analytes) in a sample.
Analytical Uncertainty	TNI- A subset of Measurement Uncertainty that includes all laboratory activities performed as part of the analysis.
Aliquot	DoD- A discrete, measured, representative portion of a sample taken for analysis.
Annual (or Annually)	Defined by PAS as every 12 months $\pm$ 30 days.
Assessment	TNI - The evaluation process used to measure or establish the performance, effectiveness, and
10505511011	conformance of an organization and/or its system to defined criteria (to the standards and requirements
	of laboratory accreditation).
	DoD- An all-inclusive term used to denote any of the following: audit, performance evaluation, peer
	review, inspection, or surveillance conducted on-site.
Atomic Absorption	Instrument used to measure concentration in metals samples.
Spectrometer	r
Atomization	A process in which a sample is converted to free atoms.
Audit	TNI- A systematic and independent examination of facilities, equipment, personnel, training, procedures,
	record-keeping, data validation, data management, and reporting aspects of a system to determine
	whether QA/QC and technical activities are being conducted as planned and whether these activities will
	effectively achieve quality objectives.
Batch	TNI- Environmental samples that are prepared and/or analyzed together with the same process and
	personnel, using the same lot(s) of reagents. A preparation batch is composed of one to 20
	environmental samples of the same quality systems matrix, meeting the above-mentioned criteria and
	with a maximum time between the start of processing of the first and last sample in the batch to be 24
	hours or the time-frame specified by the regulatory program. An analytical batch is composed of
	prepared environmental samples (extracts, digestates or concentrates) which are analyzed together as a
	group. An analytical batch can include prepared samples originating from various quality system matrices
	and can exceed 20 samples.
Batch, Radiation	TNI- An RMB is composed of 1 to 20 environmental samples that are counted directly without
Measurements (RMB)	preliminary physical or chemical processing that affects the outcome of the test (e.g., non-destructive
	gamma spectrometry, alpha/beta counting of air filters, or swipes on gas proportional detectors). The
	samples in an RMB share similar physical and chemical parameter, and analytical configurations (e.g.,
	analytes, geometry, calibration, and background corrections). The maximum time between the start of
	processing of the first and last in an RMB is 14 calendar days.
Bias	TNI- The systematic or persistent distortion of a measurement process, which causes errors in one
D1 1	direction (i.e., the expected sample measurement is different from the sample's true value).
Blank	TNI and DoD- A sample that has not been exposed to the analyzed sample stream in order to monitor
	contamination during sampling, transport, storage or analysis. The blank is subjected to the usual
	analytical and measurement process to establish a zero baseline or background value and is sometimes
	used to adjust or correct routine analytical results (See Method Blank). DoD- Blank samples are negative control samples, which typically include field blank samples (e.g., trip
	blank, equipment (rinsate) blank, and temperature blank) and laboratory blank samples (e.g., mp
	blank, reagent blank, instrument blank, calibration blank, and storage blank).
Blind Sample	A sub-sample for analysis with a composition known to the submitter. The analyst/laboratory may know
Bind Sample	the identity of the sample but not its composition. It is used to test the analyst's or laboratory's
	proficiency in the execution of the measurement process.
BNA (Base Neutral Acid	A list of semi-volatile compounds typically analyzed by mass spectrometry methods. Named for the way
compounds)	they can be extracted out of environmental samples in an acidic, basic or neutral environment.
BOD (Biochemical	Chemical procedure for determining how fast biological organisms use up oxygen in a body of water.
Oxygen Demand)	
.0 /	



Calibration	TNI- A set of operations that establish, under specified conditions, the relationship between values of quantities indicated by a measuring instrument or measuring system, or values represented by a material measure or a reference material, and the corresponding values realized by standards. 1) In calibration of support equipment, the values realized by standards are established through the use of reference standards that are traceable to the International System of Units (SI); 2) In calibration according to test methods, the values realized by standards are typically established through the use of Reference Materials that are either purchased by the laboratory with a certificate of analysis or purity, or prepared by the laboratory using support equipment that has been calibrated or verified to meet specifications.
Calibration Curve	TNI- The mathematical relationship between the known values, such as concentrations, of a series of calibration standards and their instrument response.
Calibration Method	A defined technical procedure for performing a calibration.
Calibration Range	DoD- The range of values (concentrations) between the lowest and highest calibration standards of a multi-level calibration curve. For metals analysis with a single-point calibration, the low-level calibration check standard and the high standard establish the linear calibration range, which lies within the linear dynamic range.
Calibration Standard	TNI- A substance or reference material used for calibration.
Certified Reference Material (CRM)	TNI- Reference material accompanied by a certificate, having a value, measurement uncertainty, and stated metrological traceability chain to a national metrology institute.
Chain of Custody	An unbroken trail of accountability that verifies the physical security of samples, data, and records.
Chain of Custody Form (COC)	TNI- Record that documents the possession of the samples from the time of collection to receipt in the laboratory. This record generally includes: the number and type of containers; the mode of collection, the collector, time of collection; preservation; and requested analyses.
Chemical Oxygen Demand (COD)	A test commonly used to indirectly measure the amount of organic compounds in water.
Client (referred to by	Any individual or organization for whom items or services are furnished or work performed in response
ISO as Customer)	to defined requirements and expectations.
Code of Federal Regulations (CFR)	A codification of the general and permanent rules published in the Federal Register by agencies of the federal government.
Comparability	An assessment of the confidence with which one data set can be compared to another. Comparable data are produced through the use of standardized procedures and techniques.
Completeness	The percent of valid data obtained from a measurement system compared to the amount of valid data expected under normal conditions. The equation for completeness is: % Completeness = (Valid Data Points/Expected Data Points)*100
Confirmation	<ul> <li>TNI- Verification of the identity of a component through the use of an approach with a different scientific principle from the original method. These may include, but are not limited to: second-column confirmation; alternate wavelength; derivatization; mass spectral interpretation; alternative detectors; or additional cleanup procedures.</li> <li>DoD- Includes verification of the identity and quantity of the analyte being measured by another means (e.g., by another determinative method, technology, or column). Additional cleanup procedures alone are not considered confirmation techniques.</li> </ul>
Conformance	An affirmative indication or judgment that a product or service has met the requirements of the relevant specifications, contract, or regulation; also the state of meeting the requirements.
Congener	A member of a class of related chemical compounds (e.g., PCBs, PCDDs).
Consensus Standard	DoD- A standard established by a group representing a cross-section of a particular industry or trade, or a part thereof.
Continuing Calibration Blank (CCB)	A blank sample used to monitor the cleanliness of an analytical system at a frequency determined by the analytical method.
Continuing Calibration Check Compounds (CCC)	Compounds listed in mass spectrometry methods that are used to evaluate an instrument calibration from the standpoint of the integrity of the system. High variability would suggest leaks or active sites on the instrument column.
Continuing Calibration Verification	DoD- The verification of the initial calibration. Required prior to sample analysis and at periodic intervals. Continuing calibration verification applies to both external and internal standard calibration techniques, as well as to linear and non-linear calibration models.
Continuing Calibration Verification (CCV) Standard	Also referred to as a Calibration Verification Standard (CVS) in some methods, it is a standard used to verify the initial calibration of compounds in an analytical method. CCVs are analyzed at a frequency determined by the analytical method.



Continuous Emission	A flue gas analyzer designed for fixed use in checking for environmental pollutants.
Monitor (CEM)	
Continuous Improvement Plan (CIP)	The delineation of tasks for a given laboratory department or committee to achieve the goals of that department.
Contract Laboratory Program (CLP)	A national network of EPA personnel, commercial labs, and support contractors whose fundamental mission is to provide data of known and documented quality.
Contract Required	Detection limit that is required for EPA Contract Laboratory Program (CLP) contracts.
Detection Limit (CRDL) Contract Required	Quantitation limit (reporting limit) that is required for EPA Contract Laboratory Program (CLP)
Quantitation Limit (CRQL)	contracts.
Control Chart	A graphic representation of a series of test results, together with limits within which results are expected when the system is in a state of statistical control (see definition for Control Limit)
Control Limit	A range within which specified measurement results must fall to verify that the analytical system is in control. Control limit exceedances may require corrective action or require investigation and flagging of non-conforming data.
Correction	DoD- Action taken to eliminate a detected non-conformity.
Corrective Action	DoD- The action taken to eliminate the causes of an existing non-conformity, defect, or other undesirable situation in order to prevent recurrence. A root cause analysis may not be necessary in all cases.
Corrective and Preventative Action (CAPA)	The primary management tools for bringing improvements to the quality system, to the management of the quality system's collective processes, and to the products or services delivered which are an output of established systems and processes.
Critical Value	TNI- Value to which a measurement result is compared to make a detection decision (also known as critical level or decision level). NOTE: The Critical Value is designed to give a specified low probability $\alpha$ of false detection in an analyte-free sample, which implies that a result that exceeds the Critical Value, gives high confidence $(1 - \alpha)$ that the radionuclide is actually present in the material analyzed. For radiometric methods, $\alpha$ is often set at 0.05.
Customer	DoD- Any individual or organization for which products or services are furnished or work performed in response to defined requirements and expectations.
Data Integrity	TNI- The condition that exists when data are sound, correct, and complete, and accurately reflect activities and requirements.
Data Quality Objective (DQO)	Systematic strategic planning tool based on the scientific method that identifies and defines the type, quality, and quantity of data needed to satisfy a specified use or end user.
Data Reduction	TNI- The process of transforming the number of data items by arithmetic or statistical calculation, standard curves, and concentration factors, and collating them into a more usable form.
Definitive Data	DoD- Analytical data of known quantity and quality. The levels of data quality on precision and bias meet the requirements for the decision to be made. Data that is suitable for final decision-making.
Demonstration of Capability (DOC)	<ul><li>TNI- A procedure to establish the ability of the analyst to generate analytical results of acceptable accuracy and precision.</li><li>DoD- A procedure to establish the ability of the analyst to generate analytical results by a specific method that meet measurement quality objectives (e.g., for precision and bias).</li></ul>
Department of Defense (DoD)	An executive branch department of the federal government of the United States charged with coordinating and supervising all agencies and functions of the government concerned directly with national security.
Detection Limit (DL)	DoD- The smallest analyte concentration that can be demonstrated to be different than zero or a blank concentration with 99% confidence. At the DL, the false positive rate (Type 1 error) is 1%. A DL may be used as the lowest concentration for reliably reporting a detection of a specific analyte in a specific matrix with a specific method with 99% confidence.
Detection Limit (DL) for Safe Drinking Water Act (SDWA) Compliance	TNI- Laboratories that analyze drinking-water samples for SDWA compliance monitoring must use methods that provide sufficient detection capability to meet the detection limit requirements established in 40 CFR 141. The SDWA DL for radioactivity is defined in 40 CFR Part 141.25.c as the radionuclide concentration, which can be counted with a precision of plus or minus 100% at the 95% confidence level (1.96 $\sigma$ where $\sigma$ is the standard deviation of the net counting rate of the sample).
Deuterated Monitoring Compounds (DMCs)	DoD- SIM specific surrogates as specified for GC/MS SIM analysis.
Diesel Range Organics (DRO)	A range of compounds that denote all the characteristic compounds that make up diesel fuel (range can be state or program specific).



Field of Accreditation	TNI- Those matrix, technology/method, and analyte combinations for which the accreditation body
	structure that meets the requirements of a mobile laboratory.
	measured on-site, close in time and sPAS to the matrices being sampled/measured, following accepted test methods. This testing is performed in the field outside of a fixed-laboratory or outside of an enclosed
Field Measurement	Determination of physical, biological, or radiological properties, or chemical constituents that are
	preservative, if any, for the specific sampling activity being undertaken.
Field Blank	A blank sample prepared in the field by filling a clean container with reagent water and appropriate
	a level of interest when the analyte is actually present at or below the level of interest.
False Positive	DoD- A result that erroneously identifies (detects) an analyte or reporting an analyte to be present above
	level of interest when the analyte is actually above the level of interest.
False Negative	DoD- A result that fails to identify (detect) an analyte or reporting an analyte to be present at or below a
raciiity	identifications.
Facility	instrument blanks prior to analysis. Used for isotope dilution methods. A distinct location within the company that has unique certifications, personnel and waste disposal
Standard Analyte	Added to samples and batch QC samples prior to the first step of sample extraction and to standards and instrument blanks prior to analysis. Used for isotope dilution methods
Extracted Internal	Isotopically labeled analogs of analytes of interest added to all standards, blanks and samples analyzed.
	decontamination procedures.
Equipment Blank	A sample of analyte-free media used to rinse common sampling equipment to check effectiveness of
D D D	solid wastes
	Waste - Aqueous and non-aqueous liquid wastes, chemical solids, and industrial liquid and
	<ul> <li>Soil - Predominately inorganic matter ranging in classification from sands to clays.</li> </ul>
	<ul> <li>Sludge - Municipal sludges and industrial sludges.</li> </ul>
	municipal influents/effluents, and industrial influents/effluents
	• Water/Wastewater - Raw source waters for public drinking water supplies, ground waters,
	Drinking Water - Delivered (treated or untreated) water designated as potable water
	chemicals, and TCLP leachates or other extracts)
	Non Potable Water (Includes surface water, ground water, effluents, water treatment
	samples can generally be classified as follows:
	for which determination of composition or contamination is requested or required. Environmental
Environmental Sample	A representative sample of any material (aqueous, non-aqueous, or multimedia) collected from any source
(EPA)	by Congress.
Protection Agency	protecting human health and the environment by writing and enforcing regulations based on laws passed
Environmental	An agency of the federal government of the United States which was created for the purpose of
Monitoring	The process of measuring of concerning environmental data.
Environmental	ecological or health effects and consequences; or the performance of environmental technology. The process of measuring or collecting environmental data.
Environmental Data	DoD- Any measurements or information that describe environmental processes, locations, or conditions;
Elution Environmental Data	A process in which solutes are washed through a stationary phase by movement of a mobile phase.
Elute	To extract, specifically, to remove (absorbed material) from an absorbent by means of a solvent.
Eluent	A solvent used to carry the components of a mixture through a stationary phase.
Deliverable (EDD)	review and comparison to historical results.
Electronic Data	A summary of environmental data (usually in spreadsheet form) which clients request for ease of data
Detector (ECD)	
Electron Capture	Device used in GC methods to detect compounds that absorb electrons (e.g., PCB compounds).
Duplicate)	but not the precision of sampling, preservation or storage internal to the laboratory.
Replicate or Laboratory	same sample. The results of duplicate analyses are used to evaluate analytical or measurement precision
Duplicate (also known as	The analyses or measurements of the variable of interest performed identically on two subsamples of the
Dry Weight	The weight after drying in an oven at a specified temperature.
Documents	DoD- Written components of the laboratory management system (e.g., policies, procedures, and instructions).
Demonstr	correct version at the location where the prescribed activity is performed.
	approved for release by authorized personnel, distributed properly and controlled to ensure use of the
Document Control	The act of ensuring that documents (and revisions thereto) are proposed, reviewed for accuracy,
	target analytes in the sample to a more easily measured form.
Digestion	DoD- A process in which a sample is treated (usually in conjunction with heat and acid) to convert the



Field of Proficiency	TNI- Matrix, technology/method, analyte combinations for which the composition, spike concentration
Testing (FoPT)	ranges and acceptance criteria have been established by the PTPEC.
Finding	TNI- An assessment conclusion referenced to a laboratory accreditation standard and supported by
	objective evidence that identifies a deviation from a laboratory accreditation standard requirement.
	DoD- An assessment conclusion that identifies a condition having a significant effect on an item or
	activity. An assessment finding may be positive, negative, or neutral and is normally accompanied by
	specific examples of the observed condition. The finding must be linked to a specific requirement (e.g.,
	this standard, ISO requirements, analytical methods, contract specifications, or laboratory management
	systems requirements).
Flame Atomic	Instrumentation used to measure the concentration of metals in an environmental sample based on the
Absorption Spectrometer	fact that ground state metals absorb light at different wavelengths. Metals in a solution are converted to
(FAA)	the atomic state by use of a flame.
Flame Ionization	A type of gas detector used in GC analysis where samples are passed through a flame which ionizes the
Detector (FID)	sample so that various ions can be measured.
Gas Chromatography	Instrumentation which utilizes a mobile carrier gas to deliver an environmental sample across a stationary
<u>(GC)</u>	phase with the intent to separate compounds out and measure their retention times.
Gas Chromatograph/	In conjunction with a GC, this instrumentation utilizes a mass spectrometer which measures fragments of
Mass Spectrometry	compounds and determines their identity by their fragmentation patterns (mass spectra).
(GC/MS)	
Gasoline Range Organics	A range of compounds that denote all the characteristic compounds that make up gasoline (range can be
(GRO)	state or program specific).
Graphite Furnace	Instrumentation used to measure the concentration of metals in an environmental sample based on the
Atomic Absorption	absorption of light at different wavelengths that are characteristic of different analytes.
	absorption of light at different wavelenguis that are characteristic of different analytes.
Spectrometry (GFAA)	
High Pressure Liquid	Instrumentation used to separate, identify and quantitate compounds based on retention times which are
Chromatography	dependent on interactions between a mobile phase and a stationary phase.
(HPLC)	
Holding Time	TNI- The maximum time that can elapse between two specified activities.
0	40 CFR Part 136- The maximum time that samples may be held prior to preparation and/or analysis as
	defined by the method and still be considered valid or not compromised.
	For sample prep purposes, hold times are calculated using the time of the start of the preparation
	procedure.
	DoD- The maximum time that may elapse from the time of sampling to the time of preparation or
	analysis, or from preparation to analysis, as appropriate.
Homogeneity	The degree to which a property or substance is uniformly distributed throughout a sample.
Homologue	One in a series of organic compounds in which each successive member has one more chemical group in
	its molecule than the next preceding member. For instance, methanol, ethanol, propanol, butanol, etc.,
	form a homologous series.
Improper Actions	DoD- Intentional or unintentional deviations from contract-specified or method-specified analytical
improper redoils	practices that have not been authorized by the customer (e.g., DoD or DOE).
I (10 1	
Incremental Sampling	Soil preparation for large volume (1 kg or greater) samples.
Method (ISM)	
In-Depth Data	TNI- When used in the context of data integrity activities, a review and evaluation of documentation
Monitoring	related to all aspects of the data generation process that includes items such as preparation, equipment,
	software, calculations, and quality controls. Such monitoring shall determine if the laboratory uses
	appropriate data handling, data use and data reduction activities to support the laboratory's data integrity
	policies and procedures.
Inductively Coupled	
	Analytical technique used for the detection of trace metals which uses plasma to produce excited atoms
Plasma Atomic Emission	that emit radiation of characteristic wavelengths.
Spectrometry (ICP-AES)	
Inductively Coupled	An ICP that is used in conjunction with a mass spectrometer so that the instrument is not only capable of
Plasma- Mass	detecting trace amounts of metals and non-metals but is also capable of monitoring isotopic speciation
Spectrometry (ICP/MS)	for the ions of choice.
Infrared Spectrometer	An instrument that uses infrared light to identify compounds of interest.
(IR)	In motionent and uses minated light to rectary compounds of interest.
(111)	



Initial Calibration (ICAL)	The process of analyzing standards, prepared at specified concentrations, to define the quantitative response relationship of the instrument to the analytes of interest. Initial calibration is performed whenever the results of a calibration verification standard do not conform to the requirements of the method in use or at a frequency specified in the method.
Initial Calibration Blank (ICB)	A blank sample used to monitor the cleanliness of an analytical system at a frequency determined by the analytical method. This blank is specifically run in conjunction with the Initial Calibration Verification (ICV) where applicable.
Initial Calibration Verification (ICV)	DoD- Verifies the initial calibration with a standard obtained or prepared from a source independent of the source of the initial calibration standards to avoid potential bias of the initial calibration.
Injection Internal Standard Analyte	Isotopically labeled analogs of analytes of interest (or similar in physiochemical properties to the target analytes but with a distinct response) to be quantitated. Added to all blanks, standards, samples and batch QC after extraction and prior to analysis.
Instrument Blank	A clean sample (e.g., distilled water) processed through the instrumental steps of the measurement process; used to determine instrument contamination.
Instrument Detection Limits (IDLs)	Limits determined by analyzing a series of reagent blank analyses to obtain a calculated concentration. IDLs are determined by calculating the average of the standard deviations of three runs on three non- consecutive days from the analysis of a reagent blank solution with seven consecutive measurements per day.
Interference, spectral	Occurs when particulate matter from the atomization scatters incident radiation from the source or when the absorption or emission from an interfering species either overlaps or is so close to the analyte wavelength that resolution becomes impossible.
Interference, chemical	Results from the various chemical processes that occur during atomization and later the absorption characteristics of the analyte.
Internal Standard	TNI and DoD- A known amount of standard added to a test portion of a sample as a reference for evaluating and controlling the precision and bias of the applied analytical method.
International Organization for Standardization (ISO)	An international standard-setting body composed of representatives from various national standards organizations.
Intermediate Standard Solution	Reference solutions prepared by dilution of the stock solutions with an appropriate solvent.
International System of Units (SI)	The coherent system of units adopted and recommended by the General Conference on Weights and Measures.
Ion Chromatography (IC)	Instrumentation or process that allows the separation of ions and molecules based on the charge properties of the molecules.
Isomer	One of two or more compounds, radicals, or ions that contain the same number of atoms of the same element but differ in structural arrangement and properties. For example, hexane (C6H14) could be n-hexane, 2-methylpentane, 3-methylpentane, 2,3-dimethylbutane, 2,2-dimethylbutane.
Laboratory	A body that calibrates and/or tests.
Laboratory Control Sample (LCS)	TNI- (also known as laboratory fortified blank (LFB), spiked blank, or QC check sample): A sample matrix, free from the analytes of interest, spiked with verified known amounts of analytes or a material containing known and verified amounts of analytes and taken through all sample preparation and analytical steps of the procedure unless otherwise noted in a reference method. It is generally used to establish intra-laboratory or analyst-specific precision and bias or to evaluate the performance of all or a portion of the measurement system.
Laboratory Duplicate	Aliquots of a sample taken from the same container under laboratory conditions and processed and analyzed independently.
Laboratory Information Management System (LIMS)	DoD- The entirety of an electronic data system (including hardware and software) that collects, analyzes, stores, and archives electronic records and documents.
Learning Management System (LMS)	A web-based database used by the laboratories to track and document training activities. The system is administered by the corporate training department and each laboratory's learn centers are maintained by a local administrator.
Legal Chain-of-Custody Protocols	TNI- Procedures employed to record the possession of samples from the time of sampling through the retention time specified by the client or program. These procedures are performed at the special request of the client and include the use of a Chain-of-Custody (COC) Form that documents the collection, transport, and receipt of compliance samples by the laboratory. In addition, these protocols document all handling of the samples within the laboratory.



Limit(s) of Detection	TNI- The minimum result, which can be reliably discriminated from a blank with predetermined
(LOD)	confidence level.
	DoD- The smallest concentration of a substance that must be present in a sample in order to be detected
	at the DL with 99% confidence. At the LOD, the false negative rate (Type II error) is 1%. A LOD may
	be used as the lowest concentration for reliably reporting a non-detect of a specific analyte in a specific
	matrix with a specific method at 99% confidence.
Limit(s) of Quantitation	TNI- The minimum levels, concentrations, or quantities of a target variable (e.g., target analyte) that can
(LOQ)	be reported with a specified degree of confidence.
	DoD- The smallest concentration that produces a quantitative result with known and recorded precision
	and bias. For DoD/DOE projects, the LOQ shall be set at or above the concentration of the lowest
	initial calibration standard and within the calibration range.
Linear Dynamic Range	DoD- Concentration range where the instrument provides a linear response.
Liquid chromatography/	Instrumentation that combines the physical separation techniques of liquid chromatography with the
tandem mass	mass analysis capabilities of mass spectrometry.
spectrometry	
(LC/MS/MS)	
Lot	TNI- A definite amount of material produced during a single manufacturing cycle, and intended to have
	uniform character and quality.
Management	Those individuals directly responsible and accountable for planning, implementing, and assessing work.
Management System	System to establish policy and objectives and to achieve those objectives.
Manager (however	The individual designated as being responsible for the overall operation, all personnel, and the physical
named)	plant of the environmental laboratory. A supervisor may report to the manager. In some cases, the
	supervisor and the manager may be the same individual.
Matrix	TNI- The substrate of a test sample.
Matrix Duplicate	TNI- A replicate matrix prepared in the laboratory and analyzed to obtain a measure of precision.
Matrix Spike (MS)	TNI- A sample prepared, taken through all sample preparation and analytical steps of the procedure
(spiked sample or	unless otherwise noted in a referenced method, by adding a known amount of target analyte to a specified
fortified sample)	amount of sample for which an independent test result of target analyte concentration is available. Matrix
Tortuned Sumprey	spikes are used, for example, to determine the effect of the matrix on a method's recovery efficiency.
Matrix Spike Duplicate	TNI- A replicate matrix spike prepared in the laboratory and analyzed to obtain a measure of the
(MSD) (spiked sample or	precision of the recovery for each analyte.
fortified sample	precision of the recovery for each manyte.
duplicate)	
Measurement	DoD- Criteria that may be general (such as completion of all tests) or specific (such as QC method
Performance Criteria	acceptance limits) that are used by a project to judge whether a laboratory can perform a specified activity
(MPC)	to the defined criteria.
Measurement Quality	TNI- The analytical data requirements of the data quality objectives are project- or program-specific and
Objective (MQO)	can be quantitative or qualitative. MQOs are measurement performance criteria or objectives of the
	analytical process. Examples of quantitative MQOs include statements of required analyte detectability
	and the uncertainty of the analytical protocol at a specified radionuclide activity, such as the action level.
	Examples of qualitative MQOs include statements of the required specificity of the analytical protocol,
M	e.g., the ability to analyze for the radionuclide of interest given the presence of interferences.
Measurement System	TNI- A method, as implemented at a particular laboratory, and which includes the equipment used to
	perform the test and the operator(s).
	DoD- A test method, as implemented at a particular laboratory, and which includes the equipment used
26	to perform the sample preparation and test and the operator(s).
Measurement	DoD- An estimate of the error in a measurement often stated as a range of values that contain the true
Uncertainty	value within a certain confidence level. The uncertainty generally includes many components which may
	be evaluated from experimental standard deviations based on repeated observations or by standard
	deviations evaluated from assumed probability distributions based on experience or other information.
	For DoD/DOE, a laboratory's Analytical Uncertainty (such as use of LCS control limits) can be reported
	as the minimum uncertainty.
Method	TNI- A body of procedures and techniques for performing an activity (e.g., sampling, chemical analysis,
	quantification), systematically presented in the order in which they are to be executed.
Method Blank	TNI- A sample of a matrix similar to the batch of associated samples (when available) that is free from
	the analytes of interest and is processed simultaneously with and under the same conditions as samples
	through all steps of the analytical procedures, and in which no target analytes or interferences are present
	at concentrations that impact the analytical results for sample analyses.



Method Detection Limit	TNI- One way to establish a Detection Limit; defined as the minimum concentration of a substance that
(MDL)	can be measured and reported with 99% confidence that the analyte concentration is greater than zero
(MDL)	and is determined from analysis of a sample in a given matrix containing the analyte.
Mathada 6 Standard	
Method of Standard	A set of procedures adding one or more increments of a standard solution to sample aliquots of the same
Additions	size in order to overcome inherent matrix effects. The procedures encompass the extrapolation back to
	obtain the sample concentration.
Minimum Detectable	TNI- Estimate of the smallest true activity that ensures a specified high confidence, $1 - \beta$ , of detection
Activity (MDA)	above the Critical Value, and a low probability $\beta$ of false negatives below the Critical Value. For
	radiometric methods, $\beta$ is often set at 0.05. NOTE 1: The MDS is a measure of the detection capability
	of a measurement process and as such, it is an a priori concept. It may be used in the selection of
	methods to meet specified MQOs. Laboratories may also calculate a "sample specific" MDA, which
	indicates how well the measurement process is performing under varying real-world measurement
	conditions, when sample-specific characteristics (e.g., interferences) may affect the detection capability.
	However, the MDA must never be used instead of the Critical Value as a detection threshold. NOTE 2:
	For the purpose of this Standard, the terms MDA and minimum detectable concentration (MDC) are
	equivalent.
MintMiner	Program used by PAS to review large amounts of chromatographic data to monitor for errors or data
	integrity issues.
Mobile Laboratory	TNI- A portable enclosed structure with necessary and appropriate accommodation and environmental
	conditions for a laboratory, within which testing is performed by analysts. Examples include but are not
	limited to trailers, vans, and skid-mounted structures configured to house testing equipment and
	personnel.
National Environmental	See definition of The NELAC Institute (TNI).
Laboratory Accreditation	
Conference (NELAC)	
National Institute of	National institute charged with the provision of training, consultation and information in the area of
Occupational Safety and	occupational safety and health.
Health (NIOSH)	
National Institute of	TNI- A federal agency of the US Department of Commerce's Technology Administration that is
Standards and	designed as the United States national metrology institute (or NMI).
Technology (NIST)	
National Pollutant	A permit program that controls water pollution by regulating point sources that discharge pollutants into
Discharge Elimination	U.S. waters.
System (NPDES)	
Negative Control	Measures taken to ensure that a test, its components, or the environment do not cause undesired effects,
	or produce incorrect test results.
Nitrogen Phosphorus	A detector used in GC analyses that utilizes thermal energy to ionize an analyte. With this detector,
Detector (NPD)	nitrogen and phosphorus can be selectively detected with a higher sensitivity than carbon.
Nonconformance	An indication or judgment that a product or service has not met the requirement of the relevant
	specifications, contract, or regulation; also the state of failing to meet the requirements.
Not Detected (ND)	The result reported for a compound when the detected amount of that compound is less than the
	method reporting limit.
Operator Aid	DoD- A technical posting (such as poster, operating manual, or notepad) that assists workers in
	performing routine tasks. All operator aids must be controlled documents (i.e., a part of the laboratory
	management system).
Performance Based	An analytical system wherein the data quality needs, mandates or limitations of a program or project are
Measurement System	specified and serve as criteria for selecting appropriate test methods to meet those needs in a cost-
(PBMS)	effective manner.
Physical Parameter	TNI- A measurement of a physical characteristic or property of a sample as distinguished from the
,	concentrations of chemical and biological components.
Photo-ionization	An ion detector which uses high-energy photons, typically in the ultraviolet range, to break molecules into
Detector (PID)	positively charged ions.
Polychlorinated	A class of organic compounds that were used as coolants and insulating fluids for transformers and
Biphenyls (PCB)	capacitors. The production of these compounds was banned in the 1970's due to their high toxicity.
Positive Control	Measures taken to ensure that a test and/or its components are working properly and producing correct
	or expected results from positive test subjects.
Post-Digestion Spike	A sample prepared for metals analyses that has analytes spike added to determine if matrix effects may be
	a factor in the results.



Power of Hydrogen (pH)	The measure of acidity or alkalinity of a solution.
Practical Quantitation	Another term for a method reporting limit. The lowest reportable concentration of a compound based
Limit (PQL)	on parameters set up in an analytical method and the laboratory's ability to reproduce those conditions.
Precision	TNI- The degree to which a set of observations or measurements of the same property, obtained under
	similar conditions, conform to themselves; a data quality indicator. Precision is usually expressed as
	standard deviation, variance or range, in either absolute or relative terms.
Preservation	TNI and DoD- Any conditions under which a sample must be kept in order to maintain chemical,
	physical, and/or biological integrity prior to analysis.
Primary Accreditation	TNI- The accreditation body responsible for assessing a laboratory's total quality system, on-site
Body (Primary AB)	assessment, and PT performance tracking for fields of accreditation.
Procedure	TNI- A specified way to carry out an activity or process. Procedures can be documented or not.
Proficiency Testing (PT)	TNI- A means to evaluate a laboratory's performance under controlled conditions relative to a given set
	of criteria, through analysis of unknown samples provided by an external source.
Proficiency Testing	TNI- The aggregate of providing rigorously controlled and standardized environmental samples to a
Program (PT Program)	laboratory for analysis, reporting of results, statistical evaluation of the results and the collective
riogram (r r riogram)	demographics and results summary of all participating laboratories.
Proficiency Testing	TNI- A person or organization accredited by a TNI-approved Proficiency Testing Provider Accreditor to
Provider (PT Provider)	operate a TNI-compliant PT Program.
Proficiency Testing	TNI- An organization that is approved by TNI to accredit and monitor the performance of proficiency
Provider Accreditor	testing providers.
(PTPA)	testing providers.
Proficiency Testing	TNI- A statistically derived value that represents the lowest acceptable concentration for an analyte in a
Reporting Limit (PTRL)	PT sample, if the analyte is spiked into the PT sample. The PTRLs are specified in the TNI FoPT tables.
Proficiency Testing	TNI- A sample, the composition of which is unknown to the laboratory, and is provided to test whether
Sample (PT)	the laboratory can produce analytical results within the specified acceptance criteria.
Proficiency Testing (PT)	TNI- a) Scheduled PT Study: A single complete sequence of circulation and scoring of PT samples to all
Study	participants in a PT program. The study must have the same pre-defined opening and closing dates for all
	participants; b) Supplemental PT Study: A PT sample that may be from a lot previously released by a PT
	Provider that meets the requirements for supplemental PT samples given in Volume 3 of this Standard
	[TNI] but that does not have a pre-determined opening date and closing date.
Proficiency Testing Study	TNI- a) Scheduled PT Study: The calendar date by which all participating laboratories must submit
Closing Date	analytical results for a PT sample to a PT Provider; b) Supplemental PT Study: The calendar date a
	laboratory submits the results for a PT sample to the PT Provider.
Proficiency Testing Study	TNI- a) Scheduled PT Study: The calendar date that a PT sample is first made available to all participants
Opening Date	of the study by a PT Provider; b) Supplemental PT Study: The calendar date the PT Provider ships the
	sample to a laboratory.
Protocol	TNI- A detailed written procedure for field and/or laboratory operation (e.g., sampling, analysis) that
	must be strictly followed.
Qualitative Analysis	DoD- Analysis designed to identify the components of a substance or mixture.
Quality Assurance (QA)	TNI- An integrated system of management activities involving planning, implementation, assessment,
Quality ressurance (Qri)	reporting and quality improvement to ensure that a process, item, or service is of the type and quality
	needed and expected by the client.
Quality Assurance	A document stating the management policies, objectives, principles, organizational structure and
Manual (QAM)	authority, responsibilities, accountability, and implementation of an agency, organization, or laboratory, to
	ensure the quality of its product and the utility of its product to its users.
Quality Assurance	A formal document describing the detailed quality control procedures by which the quality requirements
Project Plan (QAPP)	defined for the data and decisions pertaining to a specific project are to be achieved.
Quality Control (QC)	TNI- The overall system of technical activities that measures the attributes and performance of a process,
Quality Control (QC)	item, or service against defined standards to verify that they meet the stated requirements established by
	the customer; operational techniques and activities that are used to fulfill requirements for quality; also the
	system of activities and checks used to ensure that measurement systems are maintained within
	prescribed limits, providing protection against "out of control" conditions and ensuring that the results
Orality Court 10 1	are of acceptable quality.
Quality Control Sample	TNI- A sample used to assess the performance of all or a portion of the measurement system. One of
(QCS)	any number of samples, such as Certified Reference Materials, a quality system matrix fortified by spiking,
	or actual samples fortified by spiking, intended to demonstrate that a measurement system or activity is in
	control.



Quality Manual	TNI- A document stating the management policies, objectives, principles, organizational structure and
	authority, responsibilities, accountability, and implementation of an agency, organization, or laboratory, to
	ensure the quality of its product and the utility of its product to its users.
Quality System	TNI and DoD- A structured and documented management system describing the policies, objectives,
	principles, organizational authority, responsibilities, accountability, and implementation plan of an
	organization for ensuring quality in its work processes, products (items), and services. The quality system
	provides the framework for planning, implementing, and assessing work performed by the organization
	and for carrying out required quality assurance and quality control activities.
Quality System Matrix	TNI and DoD- These matrix definitions shall be used for purposes of batch and quality control
Quality System Matrix	requirements and may be different from a field of accreditation matrix:
	• Air and Emissions: Whole gas or vapor samples including those contained in flexible or rigid
	wall containers and the extracted concentrated analytes of interest from a gas or vapor that are
	collected with a sorbant tube, impinger solution, filter, or other device
	<ul> <li>Aqueous: Any aqueous sample excluded from the definition of Drinking Water or</li> </ul>
	Saline/Estuarine. Includes surface water, groundwater effluents, and TCLP or other
	extracts.
	• <b>Biological Tissue</b> : Any sample of a biological origin such as fish tissue, shellfish or plant
	material. Such samples shall be grouped according to origin.
	• Chemical Waste: A product or by-product of an industrial process that results in a matrix
	not previously defined.
	Drinking Water: Any aqueous sample that has been designated a potable or potentially
	potable water source.
	Non-aqueous liquid: Any organic liquid with <15% settleable solids
	• Saline/Estuarine: Any aqueous sample from an ocean or estuary, or other salt water source
	such as the Great Salt Lake.
	• Solids: Includes soils, sediments, sludges, and other matrices with >15% settleable solids.
Quantitation Range	DoD- The range of values (concentrations) in a calibration curve between the LOQ and the highest
Quandandon range	successively analyzed initial calibration standard used to relate instrument response to analyte
	concentration. The quantitation range (adjusted for initial sample volume/weight, concentration/dilution
	and final volume) lies within the calibration range.
Quantitative Analysis	DoD- Analysis designed to determine the amounts or proportions of the components of a substance.
Random Error	The EPA has established that there is a 5% probability that the results obtained for any one analyte will
	exceed the control limits established for the test due to random error. As the number of compounds
	measured increases in a given sample, the probability for statistical error also increases.
Raw Data	TNI- The documentation generated during sampling and analysis. This documentation includes, but is
Tuw Dau	not limited to, field notes, electronic data, magnetic tapes, untabulated sample results, QC sample results,
	print outs of chromatograms, instrument outputs, and handwritten records.
Reagent Blank (method	A sample consisting of reagent(s), without the target analyte or sample matrix, introduced into the
reagent blank)	analytical procedure at the appropriate point and carried through all subsequent steps to determine the
reagent blank)	contribution of the reagents and of the involved analytical steps.
Reagent Grade	Analytical reagent (AR) grade, ACS reagent grade, and reagent grade are synonymous terms for reagents
Reagent Glade	that conform to the current specifications of the Committee on Analytical Reagents of the American
	Chemical Society.
Records	DoD- The output of implementing and following management system documents (e.g., test data in
Records	electronic or hand-written forms, files, and logbooks).
Reference Material	TNI- Material or substance one or more of whose property values are sufficiently homogenized and well
Reference Materiai	established to be used for the calibration of an apparatus, the assessment of a measurement method, or
	for assigning values to materials.
Reference Method	TNI- A published method issued by an organization generally recognized as competent to do so. (When
	the ISO language refers to a "standard method", that term is equivalent to "reference method"). When a
	laboratory is required to analyze by a specified method due to a regulatory requirement, the
	analyte/method combination is recognized as a reference method. If there is no regulatory requirement
	for the analyte/method combination, the analyte/method combination is recognized as a reference
D.C. 1.1	method if it can be analyzed by another reference method of the same matrix and technology.
Reference Standard	TNI- Standard used for the calibration of working measurement standards in a given organization or at a
	given location.



Relative Percent	A measure of precision defined as the difference between two measurements divided by the average
Difference (RPD)	concentration of the two measurements.
Reporting Limit (RL)	The level at which method, permit, regulatory and customer-specific objectives are met. The reporting limit may never be lower than the Limit of Detection (i.e., statistically determined MDL). Reporting limits are corrected for sample amounts, including the dry weight of solids, unless otherwise specified. There must be a sufficient buffer between the Reporting Limit and the MDL. DoD- A customer-specified lowest concentration value that meets project requirements for quantitative
Deserting Limit	data with known precision and bias for a specific analyte in a specific matrix.
Reporting Limit Verification Standard (RLVS)	A standard analyzed at the reporting limit for an analysis to verify the laboratory's ability to report to that level.
Representativeness	A quality element related to the ability to collect a sample reflecting the characteristics of the part of the environment to be assessed. Sample representativeness is dependent on the sampling techniques specified in the project work plan.
Requirement	Denotes a mandatory specification; often designated by the term "shall" or "must".
Retention Time	The time between sample injection and the appearance of a solute peak at the detector.
Revocation	TNI- The total or partial withdrawal of a laboratory's accreditation by an accreditation body.
Sample	Portion of material collected for analysis, identified by a single, unique alphanumeric code. A sample may consist of portions in multiple containers, if a single sample is submitted for multiple or repetitive analysis.
Sample Condition Upon Receipt Form (SCURF)	Form used by sample receiving personnel to document the condition of sample containers upon receipt to the laboratory (used in conjunction with a COC).
Sample Delivery Group (SDG)	A unit within a single project that is used to identify a group of samples for delivery. An SDG is a group of 20 or fewer field samples within a project, received over a period of up to 14 calendar days. Data from all samples in an SDG are reported concurrently.
Sample Receipt Form (SRF)	Letter sent to the client upon login to show the tests requested and pricing.
Sample Tracking	Procedures employed to record the possession of the samples from the time of sampling until analysis, reporting and archiving. These procedures include the use of a chain-of-custody form that documents the collection, transport, and receipt of compliance samples to the laboratory. In addition, access to the laboratory is limited and controlled to protect the integrity of the samples.
Sampling	TNI- Activity related to obtaining a representative sample of the object of conformity assessment, according to a procedure.
Selected Ion Monitoring (SIM)	A mode of analysis in mass spectrometry where the detector is set to scan over a very small mass range, typically one mass unit. The narrower the range, the more sensitive the detector. DoD- Using GC/MS, characteristic ions specific to target compounds are detected and used to quantify in applications where the normal full scan mass spectrometry results in excessive noise.
Selectivity	TNI- The ability to analyze, distinguish, and determine a specific analyte or parameter from another component that may be a potential interferent or that may behave similarly to the target analyte or parameter within the measurement system.
Sensitivity	TNI- The capability of a method or instrument to discriminate between measurement responses representing different levels (e.g., concentrations) of a variable of interest.
Serial Dilution	The stepwise dilution of a substance in a solution.
Shall (also Must)	Denotes a requirement that is mandatory whenever the criterion for conformance with the specification requires that there be no deviation. This does not prohibit the use of alternative approaches or methods for implementing the specification as long as the requirement is fulfilled.
Should (also May)	Denotes a guideline or recommendation whenever noncompliance with the specification is permissible.
Signal-to-Noise Ratio (S/N)	DoD- A measure of signal strength relative to background noise. The average strength of the noise of most measurements is constant and independent of the magnitude of the signal. Thus, as the quantity being measured (producing the signal) decreases in magnitude, S/N decreases and the effect of the noise on the relative error of a measurement increases.
Source Water	TNI- When sampled for drinking water compliance, untreated water from streams, rivers, lakes, or underground aquifers, which is used to supply private and public drinking water supplies.
Spike	A known mass of target analyte added to a blank sample or sub-sample; used to determine recovery efficiency or for other quality control purposes.
Standard (Document)	TNI- The document describing the elements of a laboratory accreditation that has been developed and established within the consensus principles of standard setting and meets the approval requirements of standard adoption organizations procedures and policies.



Standard (Chemical)	Standard samples are comprised of a known amount of standard reference material in the matrix undergoing analysis. A standard reference material is a certified reference material produced by US NIST
	and characterized for absolute content, independent of analytical test method.
Standard Blank (or Reagent Blank)	A calibration standard consisting of the same solvent/reagent matrix used to prepare the calibration standards without the analytes. It is used to construct the calibration curve by establishing instrument background.
Standard Method	A test method issued by an organization generally recognized as competent to do so.
Standard Operating Procedure (SOP)	TNI- A written document that details the method for an operation, analysis, or action with thoroughly prescribed techniques and steps. SOPs are officially approved as the methods for performing certain routine or repetitive tasks.
Standard Reference Material (SRM)	A certified reference material produced by the US NIST or other equivalent organization and characterized for absolute content, independent of analytical method.
Statement of Qualifications (SOQ)	A document that lists information about a company, typically the qualifications of that company to compete on a bid for services.
Stock Standard	A concentrated reference solution containing one or more analytes prepared in the laboratory using an assayed reference compound or purchased from a reputable commercial source.
Storage Blank	DoD- A sample of analyte-free media prepared by the laboratory and retained in the sample storage area of the laboratory. A storage blank is used to record contamination attributable to sample storage at the laboratory.
Supervisor	The individual(s) designated as being responsible for a particular area or category of scientific analysis. This responsibility includes direct day-to-day supervision of technical employees, supply and instrument adequacy and upkeep, quality assurance/quality control duties and ascertaining that technical employees have the required balance of education, training and experience to perform the required analyses.
Surrogate	DoD- A substance with properties that mimic the analyte of interest. It is unlikely to be found in environmental samples and is added to them for quality control purposes.
Suspension	TNI- The temporary removal of a laboratory's accreditation for a defined period of time, which shall not exceed 6 months or the period of accreditation, whichever is longer, in order to allow the laboratory time to correct deficiencies or area of non-conformance with the Standard.
Systems Audit	An on-site inspection or assessment of a laboratory's quality system.
Target Analytes	DoD- Analytes or chemicals of primary concern identified by the customer on a project-specific basis.
Technical Director	Individual(s) who has overall responsibility for the technical operation of the environmental testing laboratory.
Technology Test	TNI- A specific arrangement of analytical instruments, detection systems, and/or preparation techniques. A technical operation that consists of the determination of one or more characteristics or performance of a given product, material, equipment, organism, physical phenomenon, process or service according to a specified procedure. The result of a test is normally recorded in a document sometimes called a test report or a test certificate.
Test Method	DoD- A definitive procedure that determines one or more characteristics of a given substance or product.
Test Methods for Evaluating Solid Waste, Physical/ Chemical (SW- 846)	EPA Waste's official compendium of analytical and sampling methods that have been evaluated and approved for use in complying with RCRA regulations.
Test Source	TNI- A radioactive source that is tested, such as a sample, calibration standard, or performance check source. A Test Source may also be free of radioactivity, such as a Test Source counted to determine the subtraction background, or a short-term background check.
The NELAC Institute (INI)	A non-profit organization whose mission is to foster the generation of environmental data of known and documented quality through an open, inclusive, and transparent process that is responsive to the needs of the community. Previously known as NELAC (National Environmental Laboratory Accreditation Conference).
Total Petroleum	A term used to denote a large family of several hundred chemical compounds that originate from crude
Hydrocarbons (TPH)	oil. Compounds may include gasoline components, jet fuel, volatile organics, etc.
Toxicity Characteristic Leaching Procedure (TCLP)	A solid sample extraction method for chemical analysis employed as an analytical method to simulate leaching of compounds through a landfill.



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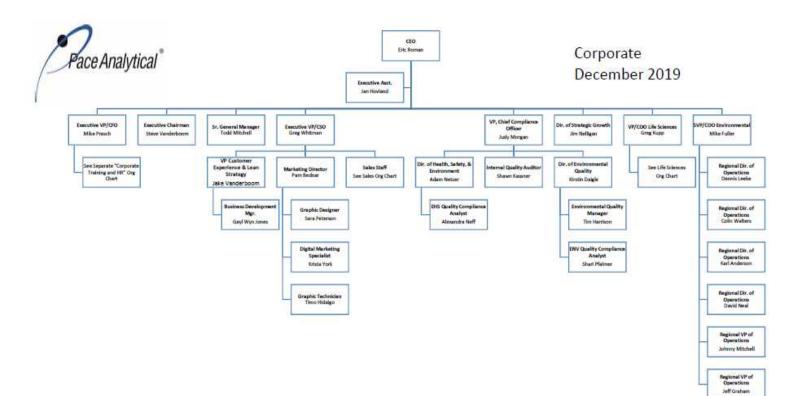
Traceability	TNI- The ability to trace the history, application, or location of an entity by means of recorded
Traceability	identifications. In a calibration sense, traceability relates measuring equipment to national or international
	standards, primary standards, basic physical conditions or properties, or reference materials. In a data
	collection sense, it relates calculations and data generated throughout the project back to the requirements
T · · · · · · · · · · · · · · · · · · ·	for the quality of the project.
Training Document	A training resource that provides detailed instructions to execute a specific method or job function.
Trip Blank	This blank sample is used to detect sample contamination from the container and preservative during
	transport and storage of the sample. A cleaned sample container is filled with laboratory reagent water
	and the blank is stored, shipped, and analyzed with its associated samples.
Tuning	A check and/or adjustment of instrument performance for mass spectrometry as required by the
	method.
Ultraviolet	Instrument routinely used in quantitative determination of solutions of transition metal ions and highly
Spectrophotometer (UV)	conjugated organic compounds.
Uncertainty, Counting	TNI- The component of Measurement Uncertainty attributable to the random nature of radioactive
8	decay and radiation counting (often estimated as the square root of observed counts (MARLAP). Older
	references sometimes refer to this parameter as Error, Counting Error or Count Error (c.f., Total
	Uncertainty).
Uncertainty, Expanded	TNI- The product of the Standard Uncertainty and a coverage factor, k, which is chosen to produce an
Uncertainty, Expanded	
	interval about the result that has a high probability of containing the value of the measurand (c.f.,
	Standard Uncertainty). NOTE: Radiochemical results are generally reported in association with the Total
	Uncertainty. Either if these estimates of uncertainty can be reported as the Standard Uncertainty (one-
	sigma) or as an Expanded Uncertainty (k-sigma, where $k \ge 1$ ).
Uncertainty,	TNI- Parameter associated with the result of a measurement that characterizes the dispersion of the
Measurement	values that could reasonably be attributed to the measurand.
Uncertainty, Standard	TNI- An estimate of the Measurement Uncertainty expressed as a standard deviation (c.f., Expanded
	Uncertainty).
Uncertainty, Total	TNI- An estimate of the Measurement Uncertainty that accounts for contributions from all significant
	sources of uncertainty associated with the analytical preparation and measurement of a sample. Such
	estimates are also commonly referred to as Combined Standard Uncertainty or Total Propagated
	Uncertainty, and in some older references as the Total Propagated Error, among other similar items (c.f.,
	Counting Uncertainty).
Unethical actions	DoD- Deliberate falsification of analytical or quality control results where failed method or contractual
enethear actions	requirements are made to appear acceptable.
United States	A department of the federal government that provides leadership on food, agriculture, natural resources,
Department of	rural development, nutrition and related issues based on public policy, the best available science, and
Agriculture (USDA)	effective management.
United States Geological	Program of the federal government that develops new methods and tools to supply timely, relevant, and
Survey (USGS)	useful information about the Earth and its processes.
Unregulated	EPA program to monitor unregulated contaminants in drinking water.
Contaminant Monitoring	
Rule (UCMR)	
Validation	DoD- The confirmation by examination and provision of objective evidence that the particular
	requirements for a specific intended use are fulfilled.
Verification	TNI- Confirmation by examination and objective evidence that specified requirements have been met. In
	connection with the management of measuring equipment, verification provides a means for checking
	that the deviations between values indicated by a measuring instrument and corresponding known values
	of a measured quantity are consistently smaller than the maximum allowable error defined in a standard,
	regulation or specification peculiar to the management of the measuring equipment.
Voluntary Action	A program of the Ohio EPA that gives individuals a way to investigate possible environmental
Program (VAP)	contamination, clean it up if necessary and receive a promise from the State of Ohio that no more
	cleanup is needed.
Whole Effluent Toxicity	The aggregate toxic effect to aquatic organisms from all pollutants contained in a facility's wastewater
(WET)	(effluent).



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# 7.4 Appendix D: Organization Chart(s)

# 7.4.1 PAS-Corporate

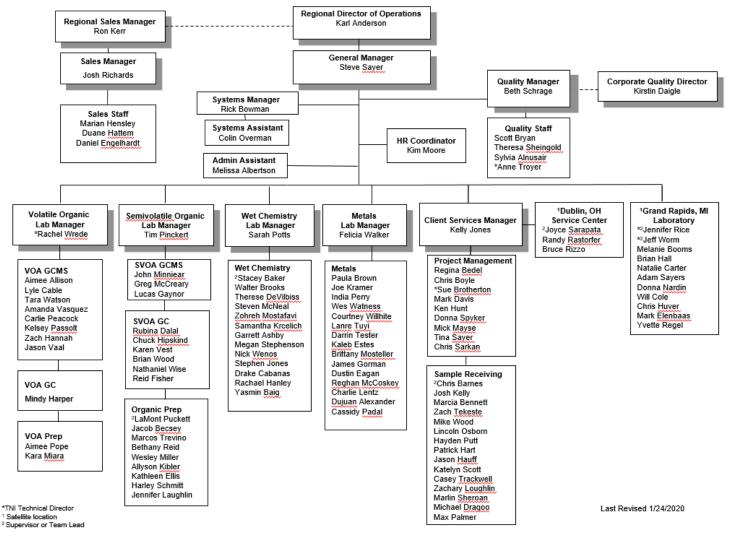




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# 7.4.2 PAS-Indianapolis/Grand Rapids/Dublin

# PACE ANALYTICAL SERVICES - INDIANAPOLIS





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# 7.5 Appendix E: Equipment Listing

The equipment listed represents equipment held by each location on the effective date of this manual. This information is subject to change without notice. External parties should contact the location for the most current information.

# 7.5.1 PAS-Indianapolis and PAS-Grand Rapids

# Pace Analytical - Indianapolis Equipment/Instrumentation List

		MODEL				
INSTRUMENT	MANUFACTURER	NUMBER	DETECTOR	AUTOSAMPLER	SERVICE ANALYSIS	YEAR
GC/MS	Agilent	6890	MS 5973	Centurion W/S	8260/624 VOC	2003
GC/MS	Agilent	6890	MS 5973	Centurion	8260/624/524.2 VOC	2005
GC/MS	Agilent	6890	MS 5973	Centurion W/S	8260/624 VOC	2007
GC/MS	Agilent	6850N	MS 5975	Centurion	8260/624/524.2 VOC	2005
GC/MS	Agilent	6890	MS 5973	Centurion W/S	8260/624 VOC	2004
GC/MS	Agilent	6850N	MS 5975	Centurion	8260/624 VOC	2010
GC/MS	Agilent	6890	MS 5973	Archon	8260/624 VOC	2010
GC/MS	Agilent	6890N	MS 5975	Centurion	8260/624/524.2 VOC	2010
GC/MS	Hewlett-Packard	6890	MS 5973	7683	8270 PAH SIM	2000
GC/MS (2)	Agilent	7890	MS 5975	7683	8270/625 BNA	2008
GC/MS (2)	Agilent	6890	MS 5975	7683	8270 PAH SIM	2009
GC/MS (3)	Agilent	6890	MS 5973	7683	8270/625 BNA	2008
GC/MS	Agilent	7890	MS 5975	7683	8270 PAH SIM	2009
GC/MS (2)	Hewlett-Packard	5890	MS 5971	7673	Solvent Screen	2007
GC/MS	Agilent	7890B	MS 5977	7693	8270/PAH SIM	2017
GC/MS	Agilent	7890B	MS 5977	7693	8270/PAH SIM	2018
Gas Chromatograph	Agilent	6890	FID	7683	8015 Alcohols	2006
Gas Chromatograph	Hewlett-Packard	6890	FID	6890	8015 Glycols	2008
Gas Chromatograph	Agilent	7890A	FID	7693	8015 DRO/ERO	2009
Gas Chromatograph	Agilent	7890A	Dual ECD	7693	8082/608 PCBs/8011 EDB/DBCP	2009/2013
Gas Chromatograph	Hewlett-Packard	5890	FID	6890	Benzene	2006
Gas Chromatograph	Hewlett-Packard	5890	FID	8100	8015 GRO	2011
Gas Chromatograph	Hewlett-Packard	5890	FID	EST LGX50	RSK175 Dissolved gases	2006
Gas Chromatograph	Agilent	6890N	FID	Archon	8015 GRO	2008
Gas Chromatograph	Agilent	6890	Dual NPD	7683	Pesticides	2008
Gas Chromatograph (2)	Agilent	6890	Dual ECD	7683	PCBs	2008
Gas Chromatograph	Hewlett-Packard	6890	Dual ECD	7683	Herbicides	2008
Gas Chromatograph	Agilent	7890	Dual ECD	7693	Pesticides	2010
Microwave Extractors (2)	CEM	230/60	n/a	n/a	soil extraction	2008/2011
Spe-Dex	Horizon	4790	n/a	n/a	1664A Oil & Grease	2008
Trace ICP (2)	Thermo Scientific	ICAP 6500	n/a	ASX520	6010/200.7 Metals	2008/2011
Trace ICP	Thermo Scientific	ICAP 6500	n/a	ESI SC-4 FAST	6010/200.7 Metals	2011
ICP/MS	Agilent	7700	n/a	ASX520	6020/200.8 Metals	2012
ICP/MS	Agilent	7800	n/a	ASX520	6020/200.8 Metals	2018
Mercury Analyzer	CETAC	M-6100	n/a	ASX520	7470/7471/245 Mercury	2012/2010
Mercury Analyzer	Teledyne Leeman	M-7600	n/a	ASX520	7470/7471/245 Mercury	2016
Low-Level Mercury Analyzer (2)	CETAC	M-8000	n/a	ASX520/ASX560	Low-Level Mercury	2015/2018
Auto Analyzer (2)	Lachat	Quick Chem	n/a	n/a	NO3,Cl,Phenol, NH3,TKN	2010/2012
Titrosampler	Metrohm	855	n/a	n/a	Alkalinity, Acidity	2014
Automated Flash Point	Tanaka	APM-8	n/a	n/a	flash point	2010
Spectrophotometer	Hach	DR5000	n/a	n/a	Sulfate,Cr6+,Fe2+, PO4	2007
Spectrophotometer	Thermo	AquaMatePlus	n/a	n/a	Surfactants, COD	2005
Turbidimeter	Hach	2100P	n/a	n/a	Turbidity	2006
pH/ISE Meter (2)	Accumet	AR25/XL25	n/a	n/a	pH, Fluoride, Redox	2003/2010
pH/ISE Meter	Thermo Orion Star	A214	n/a	n/a	pH, Fluoride, Redox	2013
Conductivity Meter	Oakton	CON 700	n/a	n/a	Conductivity	2016
Dissolved Oxygen/pH Meter	Hach	HQ440d	n/a	n/a	BOD, cBOD	2014
BOD Analyzer	Thermo	AutoEz	n/a	n/a	BOD, cBOD	2013
TOC Analyzer	Shimadzu	TOC-Vwp	n/a	n/a	TOC, DOC	2008
Discrete Analyzer	Smart Chem	200	n/a	n/a	Cyanide, Phosphorus	2006
Flow Analyzer	OIA	FS3100	n/a	n/a	Free and Available Cyanide	2018
Ion Chromatograph	Dionex	ICS2100	n/a	AS-AP	Cl-, F-, SO4-, Br-, NO3/NO2	2013
Ion Chromatograph (3)	Dionex	AQUION	n/a	AS-AP	Cl-, F-, SO4-, Br-, NO3/NO2	2019
Pace Ana	alytical - Gra	nd Rapid	ls Equipr	nent/Instru	mentation List	
pH/ISE Meter (2)	Accumet	AB150	n/a	n/a	pН	2017
BOD Meter and Probe	Hach	HQ40d	n/a	n/a	BOD, cBOD	2017
FIA Analyzer	OIA	FS-3100	n/a	n/a	Nitrate and Nitrite	2017
Spectrophotometer	Shimadzu	UV-1800	n/a	n/a	Cr6+,Fe2+, PO4, Color	2017
Turbidimeter	Hach	2100N	n/a	n/a	Turbidity	2017
i uroidillicter	114011	21001	11/ đ	11/ a	rubiuity	2017

APPENDIX B

Pace Greensburg, Pennsylvania Quality Assurance Manual



# **Document Information**

Document Number:	Revision:
Document Title:	
Department(s):	
Date Information	

2400 11101 111401

**Effective Date:** 

Notes

**Document Notes:** 

All Dates and Times are listed in:

**Document Number:** ENV-MAN-PITTS-0001 **Title:** Quality Manual

All dates and times are in Central Time Zone.

# ENV-MAN-PITTS-0001

# **QM** Approval

Name/Signature	Title	Date	Meaning/Reason
Charlotte Washlaski (003467)	Manager - Quality	20 Feb 2020, 11:35:54 AM	Approved

# **Management Approval**

Name/Signature	Title	Date	Meaning/Reason
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Charlotte Washlaski (003467)	Manager - Quality	20 Feb 2020, 11:36:07 AM	Approved
Patrick McLoughlin (003466)	Manager	20 Feb 2020, 02:33:07 PM	Approved
Aaron Kerr (003454)	Scientist 2	24 Feb 2020, 09:03:31 AM	Approved
Mark Mikesell (003456)	Manager	25 Feb 2020, 03:19:04 PM	Approved
Colin Walters (005945)	<b>Regional Director - Operations</b>	26 Feb 2020, 07:39:36 AM	Approved



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# TITLE PAGE

# LABORATORY QUALITY MANUAL

# Prepared for:

Pace Analytical Energy Services, LLC. 220 William Pitt Way Pittsburgh, PA 15238 Phone: 412-826-5245



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# Manual Approval Signatories

Approval of this manual by managerial personnel is recorded on the Signature Manifest located before the Title Page of this manual.

The individuals listed below represent the management team that was in place on the effective date of this version of the manual for the following location:

Pace Analytical Energy Services, LLC 220 William Pitt Way Pittsburgh, PA 15238 Phone: 412-826-5245

Each of the following individuals is a signatory for the manual for the location listed above. The application of their signature to the manual signifies their commitment to communicate, implement, and uphold the requirements, policies and procedures specified in this manual and their commitment to continuously improve the effectiveness of the quality management system based on customer feedback and internal assessment.

Name ¹	Title	Address ²	Phone ²
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Ruth Welsh	Assistant General Manager		
Charlotte Washlaski	Manager-Quality/ Safety Officer		
Aaron Kerr	IT		
Mark Mikesell	Manager-Lab Services ³		
Patrick McLoughlin	Manager- Lab Services		

¹ Members of the local management team are subject to change during the life-cycle of this document version.

² Include if different from the physical address and phone number of the facility.

³This individual serves as an Acting Technical Manager for TNI for one or more fields of accreditation.



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# **1.0 PURPOSE AND SCOPE**

# 1.1 Purpose

This quality manual (manual) outlines the quality management system and management structure of the laboratories and service centers affiliated with Pace Analytical Services, LLC (PAS). A laboratory is defined by PAS as any PAS facility, however named, that provides testing, sampling, or field measurement services. When the term 'laboratory'' is used in this manual, the term refers to all locations listed on the Title Page of this manual and in Section 4.1.3 unless otherwise specified.

The PAS quality management system is also referred to as the quality program throughout this document. In this context, the phrase "quality management system" and "quality program" are synonymous.

The quality management system is the collection of policies and processes established by PAS management to consistently meet customer requirements and expectations, and to achieve the goals to provide PAS customers with high quality, cost-effective, analytical measurements and services.

The quality management system is also intended to establish conformance¹ and compliance with the current versions of the following international and national quality system standards:

- ISO/IEC 17025: General requirements for the competence of testing and calibration laboratories
- NELAC/TNI Standard Volume 1: Management and Technical Requirements for Laboratories Performing Environmental Analysis

¹The statement of conformity to these Standards pertains only to testing and sampling activities carried out by the laboratory at its physical address, in temporary or mobile facilities, in-network, or by laboratory personnel at a customer's facility.

In addition to the international and national standards, the quality management system is designed to achieve regulatory compliance with the various federal and state programs for which the laboratory provides compliance testing and/or holds certification or accreditation. When federal or state requirements do not apply to all PAS locations, the requirements for compliance are provided in addendum to this manual or in other documents that supplement the manual. Customer-specific project and program requirements are not included in the manual in order to maintain client confidentiality.

- A list of accreditation and certifications held by each laboratory associated with this manual is provided in Appendix A.
- A list of analytical testing capabilities offered by each laboratory associated with this manual is provided in Appendix B.

# 1.2 Scope and Application

This manual applies to each of the PAS locations listed on the Title Page and in Section 4.1.3.

The manual was prepared from a quality manual template (template) created by PAS corporate quality personnel. The template outlines the minimum requirements PAS management considers necessary for every PAS laboratory, regardless of scope of services or number of personnel, to establish in order to maintain a quality management system that achieves the objectives of PAS's Quality Policy (See 4.2.2). In this regard, the template is the mechanism used by the corporate officers (a.k.a. 'top



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management') to communicate their expectations and commitment for the PAS quality program to all PAS personnel.

The laboratory also has the responsibility to comply with federal and state regulatory and program requirements for which it provides analytical services and holds certification or accreditation. When those requirements are more stringent than the template, the requirements for compliance are provided in addendum to this manual or in other documents that supplement the manual. This document structure maintains consistency in the presentation of the quality management system across the network while providing the laboratory a mechanism to describe and achieve compliance requirements on a program basis.

# 1.2.1 Quality Manual Template

The quality manual template is developed by the Corporate Quality Director with contribution and input from corporate quality personnel and the corporate officers. Approval of the template by the corporate officers (aka "top management") confirms their commitment to develop and maintain a quality management system appropriate for the analytical services offered by the organization and to communicate their expectations of the quality program to all personnel.

The template and instructions for use of the template are released by corporate quality personnel to quality assurance manager(s) responsible for each laboratory (Local QA). Local QA uses the template to prepare the laboratory's manual by following the instructions provided. Since the template provides the minimum requirements by which all PAS locations must abide, the laboratory may not alter the font, structure or content of the template except where specified by instruction to do so. As previously stated, program specific requirements are provided in addendum or in documents that supplement this manual.

The template is reviewed by corporate quality personnel every two years and updated if needed. More frequent review and revision may be necessary to manage change, to maintain conformance and compliance to relevant standards, or to meet customer expectations.

See standard operating procedure (SOP) ENV-SOP-CORQ-00015 Document Management and Control for more information.

# 1.2.2 Laboratory Quality Manual

The manual is approved and released to personnel under the authority of local management. The manual is reviewed annually and location specific information is updated, if needed. More frequent review and revision may be necessary when there are significant changes to the organizational structure, capabilities, and resources of the laboratory. Review and revision of the manual is overseen by local QA. If review indicates changes to the main body of the manual are necessary to maintain conformance and compliance to relevant standards, or to meet customer expectations, local QA will notify corporate quality personnel to initiate review and/or revision of the template.

See SOP ENV-SOP-CORQ-00015 Document Management and Control for more information.

# 1.2.3 References to Supporting Documents

The template and the manual include references to other laboratory documents that support the quality management system such as policies and standard operating procedures (SOPs).



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These references include the document's document control number and may include the document title.

This information is subject to change. For example, an SOP may be converted to a policy or the document's title may change. For these types of administrative changes, the manual and template are updated to reflect the editorial change during the document's next scheduled review/revision cycle or the next time a new version of the document is released, whichever is sooner.

Local QA maintains a current list of controlled documents used at each PAS location to support the quality management system. This list, known as the Master List, lists each document used by document control number, title, version, effective date, and reference to any document(s) that the current version supersedes. When there is a difference between the template and/or manual and the Master List, the document information in the Master List takes precedence. The current Master List is readily available to personnel for their use and cross-reference. Parties external to the laboratory should contact the laboratory for the most current version.

# 2.0 **REFERENCES**

References used to prepare this manual include:

- "Guidelines Establishing Test Procedures for the Analysis of Pollutants Under the Clean Water Act." Federal Register, 40 CFR Part 136, most current version.
- "Test Methods for Evaluating Solid Wastes: Physical/Chemical Methods." SW-846.
- "Methods for Chemical Analysis of Water and Wastes", EPA 600-4-79-020, 1979 Revised 1983, U.S. EPA.
- U.S. EPA Contract Laboratory Program Statement of Work for Organic Analysis, current version.
- U.S. EPA Contract Laboratory Program Statement of Work for Inorganic Analysis, current version.
- "Standard Methods for the Examination of Water and Wastewater." Current Edition APHA-AWWA-WPCF.
- "Annual Book of ASTM Standards", Section 4: Construction, Volume 04.04: Soil and Rock; Building Stones, American Society of Testing and Materials.
- "Annual Book of ASTM Standards", Section 11: Water and Environmental Technology, American Society of Testing and Materials.
- "NIOSH Manual of Analytical Methods", U.S. Department of Health and Human Services, National Institute for Occupational Safety and Health, most current version.
- "Methods for the Determination of Organic Compounds in Finished Drinking Water and Raw Source Water", U.S. EPA, Environmental Monitoring and Support Laboratory – Cincinnati (Sep 1986).
- Quality Assurance of Chemical Measurements, Taylor, John K.; Lewis Publishers, Inc. 1987.
- Methods for Non-conventional Pesticides Chemicals Analysis of Industrial and Municipal Wastewater, Test Methods, EPA-440/1-83/079C.



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- Environmental Measurements Laboratory (EML) Procedures Manual, HASL-300, US DOE, February, 1992.
- Requirements for Quality Control of Analytical Data, HAZWRAP, DOE/HWP-65/R1, July, 1990.
- Quality Assurance Manual for Industrial Hygiene Chemistry, AIHA, most current version.
- National Environmental Laboratory Accreditation Conference (NELAC) Standard- most current version.
- ISO/IEC 17025, General requirements for the competence of testing and calibration laboratoriesmost current version.

The following are implemented by normative reference to ISO/IEC 17025:

- o ISO/IEC Guide 99, International vocabulary of metrology Basic and general concepts and associated terms
- o ISO/IEC 17000, Conformity assessment Vocabulary and general principles
- Department of Defense Quality Systems Manual (QSM), most current version.
- TNI (The NELAC Institute) Standard- most current version applicable to each lab.
- UCMR Laboratory Approval Requirements and Information Document, most current version.
- US EPA Drinking Water Manual, most current version.

# 3.0 TERMS AND DEFINITIONS

Refer to Appendix C for terms, acronyms, and definitions used in this manual and in other documents used by the laboratory to support the quality management system.

# 4.0 MANAGEMENT REQUIREMENTS

# 4.1 Organization

# 4.1.1 Legal Identity

Pace Analytical Services, LLC is authorized under the State of Minnesota to do business as a limited liability company.

#### 4.1.1.1 Change of Ownership

If there is a change of ownership, if a location goes out of business, or if the entire organization ceases to exist, Pace Analytical Services, LLC ensures that regulatory authorities are notified of the change within the time-frame required by each state agency for which the location is certified or accredited.

Requirements for records and other business information are addressed in the ownership transfer agreement or in accordance with appropriate regulatory requirements, whichever takes precedence.

# 4.1.2 Compliance Responsibility

Laboratory management has the responsibility and authority to establish and implement procedures and to maintain sufficient resources necessary to assure its activities are carried out in such a way to meet the compliance requirements of the quality management system.



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# 4.1.3 Scope of the Quality Management System

The quality management system applies to work carried out at each location covered by this manual including permanent facilities, at sites away from its permanent facilities, or in associated temporary or mobile facilities.

The permanent and mobile facilities to which this manual applies includes:

Name	Pace Analytical Energy Services, LLC
Address:	220 William Pitt Way
City, State, Zip	Pittsburgh, PA 15238
Phone Number	412-826-5245
Service Type:	Laboratory

# 4.1.4 Organization History and Information

Founded in 1978, Pace Analytical Services, LLC (PAS) is a privately held scientific services firm operating one of the largest full service contract laboratory and service center networks in the United States. The company's network offer inorganic, organic and radiochemistry testing capabilities; specializing in the analysis of trace level contamination in air, drinking water, groundwater, wastewater, soil, biota, and waste.

With over 90 laboratories and services centers in the contiguous US and in Puerto Rico, the network provides project support for thousands of industry, consulting, engineering and government professionals.

Pace delivers the highest standard of testing and scientific services in the market. We offer the most advanced solutions in the industry, backed by truly transparent data, a highly trained team, and the service and support that comes from four decades of experience.

# 4.1.4.1 Organization Structure

Each location maintains a local management structure under the oversight and guidance of corporate personnel. Local management is responsible for making dayto-day decisions regarding the operations of the facility, implementing the quality management system, upholding the requirements of the quality program, and for supervision of personnel.

Local management is provided by a General Manager (GM) or Assistant (AGM), Quality Manager (QM), Client Services Manager (CSM), Information Technology (IT) Manager, Department Managers (DM) and/or Department Supervisors (DS), however named.

Some locations may also have any one of the following management positions: Senior Quality Manager (SQM), Operations Manager (OM), Technical Director (TD), or Technical Manager (TM). When the location does not have a TD or TM, technical management is provided jointly by the GM, QM, DM, and DS.

The GM (or AGM), however named reports to a Senior General Manager (SGM), who is responsible for the management of multiple laboratories and service centers within a geographical region, and who reports directly to the Chief Operating Officer (COO). The QM and SQM have indirect reporting relationship to the Corporate Director of Quality.



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Refer to the organization charts provided in Appendix D to view the management structure, reporting relationships, and the interrelationships between positions.

# 4.1.5 Management Requirements

# 4.1.5.1 Personnel

The laboratory is staffed with administrative and technical personnel who perform and verify work under the supervision of managerial personnel.

- Technical personnel include analysts and technicians that generate or contribute to the generation of analytical data and managerial personnel that oversee day to day supervision of laboratory operations. Including the reporting of analytical data and results, monitoring QA/QC performance, and monitoring the validity of analysis to maintain data integrity and reliability.
- Administrative personnel support the day-to-day activities of the laboratory.
- IT personnel maintain the information technology systems and software used at the laboratory.
- Client services personnel include project managers and support staff that manage projects.
- Managerial personnel make day-to-day and longer term decisions regarding the operations of the facility, supervise personnel, implement the quality management system and uphold the requirements of the quality program.

All personnel regardless of responsibilities are expected to carry out their duties in accordance with the policies and processes outlined in this manual and in accordance with standard operating procedures (SOPs) and other quality system documents. The laboratory's policies and procedures are designed for impartiality and integrity. When these procedures are fully implemented, personnel remain free from undue pressure and other influences that adversely impact the quality of their work or data.

# 4.1.5.1.1 Key Personnel

Key personnel include the management positions that have the authority and responsibility to plan, direct, and control, activities of the division (corporate) or the laboratory.

The following tables list key personnel positions by PAS job title and the position's primary deputy:

Key Personnel	Primary Deputy
Chief Executive Officer	Chief Operating Officer
Chief Operating Officer	Chief Executive Officer
Chief Compliance Officer	Quality Director
Corporate Quality Director	Chief Compliance Officer
Health and Safety Director	Chief Compliance Officer
IT Director	LIMS Administrator, however named.

Key Personnel: Corporate



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Key Personnel	Primary Deputy
Senior General Manager	Chief Operating Officer or as designated.
General Manager / Assistant GM	Senior General Manager
Quality Manager	Corporate Quality Manager or as
	designated.
Client Services Manager	General Manager
Local IT	Corporate IT Director or as designated.
Department Manager	General Manager
Senior Quality Manager ¹	Corporate Quality Manager
Technical Director ¹ /Manager ¹	Quality Manager
Acting Technical Manager TNI	
Operations Manager ¹	General Manager or Assistant GM.

¹ Position may not be staffed at each location.

Some state certification programs require the agency to be notified when there has been a change in key personnel. Program-specific requirements and time-frames for notification by agency, are tracked and upheld by local QA, when these requirements apply.

# 4.1.5.2 Roles and Responsibilities

The qualifications, duties, and responsibilities for each position are detailed in job descriptions maintained by PAS's corporate Human Resource's Department (HR).

The following summaries briefly identify the responsibility of key personnel positions in relation to the quality management system.

Chief Executive Officer (CEO): The CEO has overall responsibility for performance of the organization and endorses the quality program. Working with corporate and laboratory management, the CEO provides the leadership and resources necessary for PAS locations to achieve the goals and objectives of the quality management system and quality policy statement.

Chief Operating Officer (COO): The COO oversees all aspects of operations management including, strategic planning, budget, capital expenditure, and management of senior management personnel. In this capacity, the COO provides leadership and resources necessary to help top management at each PAS location achieve the goals and objectives of the quality management system and quality policy statement.

Chief Compliance Officer (CCO): The CCO oversees the quality assurance and environmental health and safety programs (HSE) for each business unit. The CCO is responsible for planning and policy development for these groups to ensure regulatory compliance and to manage risk. The position provides leadership and guidance necessary for all PAS locations to achieve the goals and objectives of the quality and HSE programs.

The CCO also serves as the Ethics Officer (ECO). The ECO develops the Ethics and Data Integrity Policy and Training Program, and provides oversight for reporting and investigation of ethical misconduct to maintain employee confidentiality during the process. The ECO provide guidance and instruction for follow-up actions necessary to remedy the situation and deter future recurrence.



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**Corporate Director of Quality:** The Corporate Director of Quality is responsible for developing and maintaining the PAS quality program under guidance and assistance from the CEO, COO, and CCO. This position helps develop corporate quality policy and procedure and analyzes metric data and other performance indicators to assess and communicate the effectiveness of the quality program to top management. The position provides leadership and guidance for implementation of the quality program across all PAS locations.

**Corporate Director of Information Technology:** The Corporate Director of IT oversees the systems and processes of information technology used to support the quality program. These systems include Laboratory Information Management Systems (LIMS); data acquisition, reduction, and reporting software; virus-protection, communication tools, and ensuring the integrity and security of electronic data.

**Senior General Manager (SGM):** The SGM has full responsibility for administrative and operations management and performance of a group of PAS laboratories and service centers. Working with the COO and local laboratory management, the SGM provides leadership, guidance and resources, including allocation of personnel, necessary to achieve the goals of PAS quality program.

**General Manager (GM) / Assistant General Manager (AGM):** The GM or AGM is responsible for the overall performance and administrative and operations management of a PAS location and associated service center(s). This position is responsible to provide leadership and resources, including allocation and supervision of personnel, necessary for the location to implement and achieve the goals of the PAS quality program. In this capacity, the position assures laboratory personnel are trained on and understand the structure and components of the quality program defined in this manual as well as the policies and procedures in place to implement the quality management system.

The GM/AGM of NELAC/TNI Accredited laboratories are also responsible for the designation of technical personnel to serve as acting technical managers for TNI for the fields of accreditation held by the laboratory (See Section 4.1.5.2.2) and for notifying the accreditation body (AB) of any extended absence or reassignment of these designations.

**Quality Manager (QM):** The QM oversees and monitors implementation of the quality management system and communicates deviations to laboratory management. The QM is independent of the operation activities for which they provide oversight and has the authority to carry out the roles and responsibilities of their position without outside influence.

Additionally, in accordance with the TNI Standard, the QM:

- serves as the focal for QA/QC and oversees review of QC data for trend analysis;
- evaluates data objectively and perform assessments without outside influence;
- has document training and experience in QA/QC procedures and the laboratory's quality system;



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- has a general knowledge of the analytical methods offered by the laboratory;
- coordinates and conducts internal systems and technical audits;
- notifies laboratory management of deficiencies in the quality system;
- monitors corrective actions;
- provides supports to technical personnel and may serve as the primary deputy for the acting TNI Technical Manager(s).

**Client Services Manager (CSM):** The CSM oversees project management personnel. This position is responsible for training and management of client facing staff that serve as the liaison between PAS and the customer to ensure that projects are successfully managed to meet the expectations and needs of PAS customers. This position is also responsible for sharing positive and negative customer feedback with laboratory management so that this information may be used to improve the quality program.

Local IT Manager, however named: Local IT managers are responsible for maintaining the IT systems used to support the quality program. These systems include Laboratory Information Management Systems (LIMS); data acquisition, reduction, and reporting software; virus-protection, communication tools, and ensuring the integrity and security of electronic data.

**Department Manager (DM):** The DM is responsible for administrative and operations management and implementation of the quality management system in the work area he/she oversees. These responsibilities include but are not limited to: training and supervision of personnel, monitoring work activity to maintain compliance with this manual, SOPs, policies and other instructional documents that support the quality management system; method development, validation and the establishment and implementation of SOPs to assure regulatory compliance and suitability for intended purpose; monitoring QA/QC performance, proper handling and reporting of nonconforming work, purchasing of supplies and equipment adequate for use, maintaining instrumentation and equipment in proper working order and calibration, and general maintenance of administrative and technical processes and procedures established by the laboratory.

**Senior Quality Manager (SQM):** The SQM provides support to the quality manager and assists the quality manager with implementation of the quality management system for one or more site locations.

**Technical Director (TD):** The TD provides technical oversight and guidance to laboratory personnel. Responsibilities may include but are not limited to: research and development, method development and validation, development of standard operating procedures, proposal and contract review. The TD may also be responsible for QA/QC trend analysis, technical training, and technology improvement.

**Operations Manager (OM):** The OM is responsible for management of production and/or other duties assigned by the GM or SGM.



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# 4.1.5.2.1 Acting Technical Manager (TNI Accreditation):

For PAS locations that are NELAC/TNI accredited:

The TNI Standard specifies requirements for the qualification and duties of technical personnel with managerial responsibility. These requirements are associated in the Standard to the designation 'technical manager(s), however named'. These responsibilities may be assigned to multiple individuals and are not associated with any specific job title.

For PAS, these TNI requirements for personnel that provide technical oversight correlate with PAS's job descriptions for Department Manager or Supervisor. However, the duties may be assigned to any PAS employee that meets the TNI specified qualifications.

Personnel assigned this designation retain their PAS assigned job title. The job title may be appended with *"acting as technical manager for TNI"* and the technology or field of accreditation for which the employee is approved, if necessary.

When TNI Accreditation Bodies (AB) refer to these employees as 'technical manager' or 'technical director' on the official certificate or the scope of accreditation, this reference is referring to their approval to carry out duties of the 'technical manager, however named' as specified in the TNI Standard.

In accordance with the TNI Standard, the acting Technical Manager(s) for TNI are responsible for monitoring the performance of QC/QA in the work areas they oversee.

If the absence of any employee that is approved as acting technical manager for TNI exceeds 15 calendar days, the duties and responsibilities specified in the TNI Standard are reassigned to another employee that meets the qualifications for the technology or field of accreditation or they are assigned to the position's deputy, the quality manager.

# 4.1.5.3 Conflict of Interest

A conflict of interest is a situation where a person has competing interests. Laboratory management looks for potential conflict of interest and undue pressures that might arise in work activities and then includes countermeasures in policies and procedures to mitigate or eliminate the conflict.

See policy COR-POL-0004 Ethics Policy for more information.

#### 4.1.5.4 Confidentiality

Laboratory management is committed to preserving the confidentiality of PAS customers and confidentiality of business information.



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Procedures used by the laboratory to maintain confidentiality include:

- A Confidentiality Agreement which all employees are required to sign at the time of employment and abide by the conditions of throughout employment;
- Record retention and disposal procedures that assure confidentiality is maintained;
- Physical access controls and encryption of electronic data; and
- Protocol for handling Confidential Business Information (CBI).

Client information obtained or created during work activities is considered confidential and is protected from intentional release to any person or entity other than the client or the client's authorized representative information provided to PAS, except when the laboratory is required by law to release confidential information to another party, such as a regulatory agency or for litigation purposes. In which case, the laboratory will notify the client of the release of information and the information provided.

The terms of client confidentiality are included in PAS Standard Terms and Conditions (T&C). With the acceptance of PAS Terms and Conditions and/or the implicit contract for analytical services that occurs when the client sends samples to the laboratory for testing, the client authorizes PAS to release confidential information when required.

See policy COR-POL-0004 Ethics Policy for more information.

# 4.1.5.5 Communication

Communication is defined as the imparting or exchanging of news and information. Effective (good) communication occurs when the person(s) you are exchanging information with actively gets the point and understands it.

# 4.1.5.5.1 Workplace Communication

Good communication in the workplace is necessary to assure work is done correctly, efficiently, and in accordance with client expectations.

Instructions for how to carry out work activities are communicated to personnel via written policy, standard operating procedures, and standard work instructions.

Information about laboratory performance (positive and negative) and ideas for improvement are communicated using various communication channels such as face to face meetings, video conferencing, conference calls, email, memoranda, written reports, and posters.

# 4.1.5.5.2 External Communication

Communication with external parties such as customers, vendors, business partners, and regulatory agencies takes place every day.



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Laboratory management ensure personnel learn to communicate in professional and respectful ways in order to build strong relationships, and learn to communicate effectively to avoid misunderstanding.

# 4.2 Quality Management System

# 4.2.1 Quality Management System Objectives

The objectives of the laboratory's quality management system are to provide clients with consistent, exemplary professional service, and objective work product that is of known and documented quality that meets their requirements for data usability and regulatory compliance.

Objective work product is analytical services, data, test results, and information that is not influenced by personal feeling or opinions. The quality of being objective is also known as 'impartiality'.

# 4.2.1.1 Impartiality

The laboratory achieves and maintains impartiality by implementing and adhering to the policies and processes of the quality management system, which are based on industry accepted standards and methodologies.

The laboratory's procedures for handling nonconforming work (See 4.9), corrective and preventive actions (See 4.11) and management review (See 4.15) are the primary mechanisms used to identify risk to impartiality and to prompt actions necessary to eliminate or reduce the threat when risk to impartiality is suspected or confirmed.

# 4.2.1.2 Risk and Opportunity Assessment

Risks are variables that make achieving the goals and objectives of the quality management system uncertain. An opportunity is something that has potential positive consequences for the laboratory.

Laboratory personnel manage risks and opportunities on a daily basis by carrying out the processes that make up the quality management system. Some of the ways in which the quality management system is designed to identify, minimize, or eliminate risk on a daily basis include but are not limited to:

- Capability and capacity reviews of each analytical service request to assure the laboratory can meet the customer's requirements;
- Maintenance of accreditation and certification for test methods in multiple states and programs to cover a broad range of jurisdiction for regulatory compliance;
- SOPs and other controlled instructional documents are provided to personnel to eliminate variability in process. These documents include actions to counter risk factors inherent in the process and are reviewed on a regular basis for on-going suitability and relevancy;
- Participation in proficiency testing programs and auditing activities to verify ongoing competency and comparability in performance;



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- Provision of on-the-job training and established protocol for quality control (QC) corrective action for nonconforming events;
- An established program for ethics, and data integrity;
- Tiered data review process;
- Culture of continuous improvement;
- Monitoring activities to assess daily and long term performance; and
- Annual critical review of the effectiveness of the quality management system.

PAS also promotes a continuous improvement culture based on the principles of lean manufacturing. These principles include 3P (Process, Productivity, Performance) and Kaizen. 3P is a platform used by Pace to share best practices and standardization across the network to achieve operational excellence. Kaizen is a team based process used to implement tools and philosophies of lean to reduce waste and achieve flow with the purpose of improving both external and internal customer satisfaction. PAS's lean programs and activities help to mitigate risk because they generate a collective understanding of vulnerabilities and utilize group-effort to develop and implement solutions at all levels.

Risk and opportunities may also be formally identified using specific risk and opportunity assessment methods such as SWOT Analysis (Strength, Weakness, Opportunity, Threats) and 3-Stage Impact/Probability Grids.

#### 4.2.1.3 Communication of the Quality Management System

This manual is the primary mechanism used by laboratory management to communicate the quality management system to laboratory personnel.

To assure personnel understand and implement the quality program outlined in the manual:

- All laboratory personnel are required to sign a Read and Acknowledgement Statement to confirm the employee has: 1) been informed of the manual by laboratory management, 2) has access to the manual, 3) has read the manual 4) understands the content of the manual, and 5) agrees to abide by the requirements, policies and procedures therein.
- Personnel are informed that the manual provides the "what" of the quality management system. The "how to" implementation of the quality management system is provided in policy, SOPs, standard work instructions, and other controlled instructional documents.

# 4.2.2 Quality Policy Statement

The quality policy of the laboratory is to provide customers with data of known and documented quality fit for their intended purpose. The laboratory achieves this policy by implementing the quality management system defined in this manual, by following industry accepted protocol for analytical testing and quality assurance and quality control (QA/QC) activities, by conformance with published and industry accepted



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testing methodologies, and by compliance with international and national standards for the competency and/or accreditation of testing laboratories.

Intrinsic to this policy statement is each of the following principles:

- The laboratory will provide customers with reliable, consistent, and professional service. This is accomplished by making sure the laboratory has the resources necessary to maintain capability and capacity; that staff are trained and competent to perform the tasks they are assigned; that client-facing staff are trained and prepared to find solutions to problems and to assist customers with their needs for analytical services. Customer feedback, both positive and negative, is shared with personnel and used to identify opportunities for improvement.
- The laboratory maintains a quality program that complies with applicable, state, federal, industry standards for analytical testing and competency.

ISO/IEC 17025 and the TNI (The NELAC Institute) Standard is used by PAS to establish the minimum requirements of the PAS quality program.

ISO/IEC 17025 is a competency standard that outlines the general requirements for the management system for calibration and testing laboratories. It is the primary quality system standard from which other quality system standards, such as the TNI Standard, are based. The TNI Standard are consensus standards that provides management and technical requirements for laboratories performing environmental analysis.

- Laboratory management provides training to personnel so that all personnel are familiar with the quality management system outlined in this manual and that they understand that implementation of the quality management system is achieved by adherence to the organization's policies and procedures.
- Laboratory management continuously evaluates and improves the effectiveness
  of the quality management system by responding to customer feedback, and other
  measures of performance, such as but not limited to: the results of
  internal/external audits, proficiency testing, metrics, trend reports, and annual
  and periodic management reviews.

# 4.2.2.1 Ethics Policy / Data Integrity Program

PAS has established a comprehensive ethics and data integrity program that is communicated to all PAS employees in order that they understand what is expected of them. The program is designed to promote a mindset of ethical behavior and professional conduct that is applied to all work activities.

The key elements of the PAS Ethics / Data Integrity Program include:

- Ethics Policy (COR-POL-0004);
- Ethics Compliance Officer;
- Standardized data integrity training course taken by all new employees on hire and a yearly refresher data integrity training course for all existing employees;



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- Policy Acknowledgement Statements that all PAS personnel, including contract and temporary, are required to sign at the time of employment and again during annual refresher training to document the employee's commitment and obligation to abide by the company's standards for ethics, data integrity and confidentiality;
- SOPs that provide instructions for how to carry out a test method or process to assure tasks are done correctly and consistently by each employee;
- On the Job Training;
- Data integrity monitoring activities which include, but are not limited to, secondary and tertiary data review, internal technical and system audits, raw data audits, data mining scans, and proficiency testing; and
- Confidential reporting process for alleged ethics and data integrity issues.

All laboratory managers are expected to provide a work environment where personnel feel safe and can report unethical or improper behavior in complete confidence without fear of retaliation. Retaliation against any employee that reports a concern is not tolerated.

PAS has engaged Lighthouse Services, Inc. to provide personnel with an anonymous reporting process available to them 24 hours a day/7 days per week. The alert line may be used by any employee to report possible violations of the company's ethics and data integrity program. When using the reporting process, the employee does need to specify the location of concern and when reporting by email, also include the company name. Messages are collected, documented, reviewed, and will be followed up on by the Ethics Compliance Officer to resolve the matter. Investigations concerning data integrity are kept confidential.

English Speaking US & Canada	(844) 940-0003	
Spanish Speaking North America	(800) 216-1288	
Internet	www/lighthouse-services.com/pacelabs	
Email	reports@lighthouse-services.com	

# Lighthouse Compliance Alert Lines:

# 4.2.3 Management Commitment: Quality Management System

Evidence of management's commitment for the development, maintenance, and on-going improvement of the quality management system is provided by the application of their signature of approval to this manual. Their signature confirms they understand their responsibility to implement the quality management system outlined in this manual, to communicate the quality program to personnel, and to uphold requirements of the program during work activities.

# 4.2.4 Management Commitment: Customer Service

Management communicates the importance of meeting customer and regulatory requirements to personnel by training personnel on the quality management system outlined in this manual,



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implementing the quality management system outlined in this manual, and upholding these requirements for all work activities.

# 4.2.5 Supporting Procedures

Documents that support this manual and quality management system are referenced throughout this manual. The structure of the document management system is outlined in SOP ENV-SOP-CORQ-0015 *Document Management and Control* and summarized in the following subsections.

### 4.2.5.1 Quality Management System Document Structure

Documents associated with the quality management system are classified into document types that identify the purpose of the document and establish how the document is managed and controlled.

Document types are ranked to establish which documents takes precedence when there is an actual or perceived conflict between documents and to establish the hierarchal relationships between documents. The ranking system also provides information to document writers and reviewers to assure downline documents are in agreement with documents of higher rank. Project specific documents are not ranked because client specific requirements are not incorporated into general use documents in order to maintain client confidentiality.

# PAS Quality Management System Documents: Internal

Document Type	Purpose
Quality Manual	Outlines the laboratory's quality management system and structure and how it works for a system including policy, goals, objectives and detailed explanation of the system and the requirements for implementation of system. Includes roles and responsibilities, relationships, procedures, systems and other information necessary to meet the objectives of the system described.
Policy	Provide requirements and rules for a PAS process and is used to set course of actions and to guide and influence decisions. Policy describes the "what", not the "how".
Standard Operating Procedure	Provide written and consistent set of instructions or steps for execution of a routine process, method, or set of tasks performed by PAS. Includes both fundamental and operational elements for implementation of the systems described in PAS manual(s). Assures that activities are performed properly in accordance with applicable requirements. Designed to ensure consistency, protect EHS of employees and environment, prevent failure in the process and ensure compliance with company and regulatory requirements. SOPs describes the "how" based on policy.
Standard Work Instruction	Provide step by step visual and/or written instruction to carry out a specific task to improve competency, minimize variability, reduce work injury and strain, or to boost efficiency and quality of work (performance). SWI are associated with an SOP unless the task described is unrelated to generation of or contribution to environmental data or analytical results.
Template	Pre-formatted document that serves as a starting point for a new document.
Guide	Provide assistance to carry out a task. Most often used for software applications.
Form	Used for a variety of purposes such as to provide a standardized format to record observations, to provide information to supplement an SOP.



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# PAS Quality Management System Documents: External

Certificate	Lists parameters, methods, and matrices for which the laboratory is certified/accredited to perform within the jurisdiction of the issuing regulatory agency or accreditation body.
Reference Document	Provide information, protocol, instructions, and/or requirements. Issued by the specifier. Examples include quality system standards such as ISO/IEC, TNI, DoD and published referenced methods such as Standard Methods, ASTM, SW846, EPA, and federal and state regulatory bodies.
Project Document	Provides requirements necessary to meet individual client expectations for intended use of data. Examples include: project quality assurance plans (QAPP), client-program technical specifications, contracts, and other agreements.

#### **Document Hierarchy**

Rank	Document
1	Reference Documents
2	Corporate Manual
3	Corporate Policy
4	Corporate SOP
5	Corporate SWI, Templates & Forms
6	Laboratory Manual
7	Laboratory SOP
8	Laboratory SWI, Templates, & Forms
NA	Project Documents ¹

#### 4.2.6 Roles and Responsibilities

The roles and responsibilities of technical management and of the quality manager are provided in section 4.1.5.1.2.

#### 4.2.7 Change Management

When significant changes to the quality management system are planned, these changes are managed by corporate quality personnel to assure that the integrity of the quality management system is maintained.

# 4.3 Document Control

#### 4.3.1 General

The laboratory's procedures for document control are provided in SOP ENV-SOP-CORQ-0015 *Document Management and Control.* 

The documents that support the quality management system include internally generated documents such as manuals, policies, standard operating procedures, standard work instructions, forms, guides, and templates and external source documents such as but not limited to, regulations, standards, reference methods, manuals, and project-specific documents.

The laboratory uses electronic document management software (eDMS) to carry out the procedures of the SOP. eDMS automates the process for unique document identification, version control, approval, access, and archival.



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# 4.3.2 Document Approval and Issue

Documents that are part of the quality management system are reviewed by qualified personnel and approved by laboratory management prior by to release for general use.

Local QA maintains a master list of controlled documents used at the laboratory. The master list includes the document control number, document title, and current revision status and is made available to personnel for their reference.

Only the approved versions of documents are available to personnel for use. The eDMS system does not allow user access to draft versions of documents except to personnel assigned to work on the draft. eDMS also restricts access to archived documents except to authorized users, such as local QA, in order to prevent the use of obsolete documents.

See SOP ENV-SOP-CORQ-0015 Document Management and Control for more information.

### 4.3.3 Document Review and Change

Unless a more frequent review is required by regulatory, certification or accreditation program, the laboratory formally reviews documents at least every two years to ensure the document remains current, appropriate, and relevant.

Documents are also informally reviewed every time the document is used. Personnel are expected to refer to and follow instructions in controlled documents when they carry out their work activities. Consequently, any concerns or problems with the document should be caught and brought to the attention of laboratory management on an on-going basis.

Documents are revised whenever necessary to ensure the document remains usable and correct. Older document versions and documents no longer needed are made obsolete and archived for historical purposes.

The laboratory does not allow hand-edits to documents. If an interim change is needed pending re-issue of the document, the interim change is communicated to those that use the document using a formal communication channel, such as SOP Change in Progress form, email, or memorandum.

The document review, revision, and archival process is managed by local QA at the location from which the document was released using the procedures established in SOP ENV-SOP-CORQ-0015 *Document Management and Control.* 

# 4.4 Analytical Service Request, Tender, and Contract Review

The laboratory's management and/or client service personnel perform thorough reviews of requests and contracts for analytical services to verify the laboratory has the capability, capacity, and resources necessary to successfully meet the customer's needs. These review procedures are described in laboratory SOP ENV-SOP-PIT*TS-0037 *Review of Analytical Requests*.

The procedures in this SOP(s) are established to ensure that:

 The laboratory understands the purpose of data collection in order to ensure the test methods requested are appropriate for the intended use of the data and capable of meeting the client's data quality objectives;



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- The laboratory and any subcontractor has the capability, capacity, and resources to meet the project requirements and expectations within the requested time frame for delivery of work product;
- Any concerns that arise from review are discussed and resolved with the client; and
- The results of review and any correspondence with the client related to this process and/or any changes made to the contract are recorded and retained for historical purposes.

Capability review confirms that the in-network laboratories and any potential subcontractors hold required certification/accreditation for the test method, matrix, and analyte and verifies the laboratory can achieve the client's target compound list and data quality objectives (DQOs) for analytical sensitivity and reporting limits, QA/QC protocol, and hardcopy test report and electronic data deliverable (EDD) formats.

Capacity review verifies that the in-network laboratories and any potential subcontractors are able to handle the sample load and deliver work production within the delivery time-frame requested.

Resource review verifies that the laboratory and any potential subcontractors have adequate qualified personnel with the skills and competency to perform the test methods and services requested and sufficient and proper equipment and instrumentation needed to perform the services requested.

# 4.5 Subcontracting and In-Network Work Transfer

The terms 'subcontract' and "subcontracting" refers to work sent to a business external to PAS Analytical Services, LLC (PAS) and the term 'subcontractor' refers to these external businesses, which are also called vendors.

Work transferred within the PAS network is referred to as interregional work orders (IRWO) and network laboratories are referred to as IRWO or network laboratory.

The network of PAS laboratories offers comprehensive analytical capability and capacity to ensure PAS can meet a diverse range of client needs for any type of project. If the laboratory receives a request for analytical services and it cannot fulfill the project specifications, the laboratory's client services team will work with the client to place the work within the PAS network. When it is not possible to place the work within network, the laboratory will, with client approval, subcontract the work to a subcontractor that has the capabilities to meet the project specifications and can meet the same commitment agreed on between the laboratory and the client. Some client programs require client consent even for IRWO work transfer, and when this applies, the client services team obtains consent as required. The laboratory retains the record of client notification and their consent in the project record for historical purposes.

Whenever work is transferred to a subcontractor or an IRWO laboratory, the laboratory responsible for management of the project verifies each of these qualifications:

- The subcontractor or IRWO laboratory has the proper accreditation/certifications required for the project and these are current; and
- The use of the subcontractor or IRWO laboratory is approved by the client and/or regulatory agency, when approval is required. Record of approval is retained in the project record.

When possible, the laboratory selects subcontractors that maintain a quality management system similar to PAS and that complies with ISO/IEC 17025 and the TNI Standard(s).



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PAS also evaluates and pre-qualifies subcontractors as part of company's procurement program. The complete list of approved vendors is maintained by the corporate procurement department and is made available to all PAS locations. Pre-qualification of a subcontractor does not replace the requirement for the placing laboratory to verify the capability, capacity, and resources of any selected subcontractor on a project-specific basis to confirm the subcontractor can meet the client's needs.

For both subcontracting and in-network work transfer, the project specifications are always communicated to the subcontractor or the IRWO laboratory by the project manager so that the laboratory performing the work is aware of and understands these requirements.

The procedures for subcontracting are outlined in laboratory SOP ENV-SOP-PITTS-0025 *Subcontracting.* 

# 4.6 Purchasing Services and Supplies

Vendors that provide services and supplies to the laboratory are prequalified by corporate procurement personnel to verify the vendor's capability to meet the needs of PAS. These needs include but are not limited to: competitive pricing, capacity to fill purchase orders, quality of product, customer service, and business reputation and stability. The records of vendor evaluation and the list of approved vendors is maintained by the corporate procurement department.

The laboratory may purchase goods and services from any supplier on the approved vendor list.

The specifications (type, class, grade, tolerance, purity, etc.) of supplies, equipment, reagents, standard reference materials and other consumables used in the testing process are specified in SOPs. The SOP specifications are based on the governing requirements of the approved reference methods and any additional program driven regulatory specification, such as drinking water compliance. All requisitions for materials and consumables are approved by the department supervisor to confirm the purchase conforms with specified requirements. After approval the requisition is handled by the laboratory's designated purchasing agent. On receipt, the product is inspected and verified before use, when applicable.

The laboratory's procedure for the purchase of services and supplies is specified in laboratory SOP ENV-SOP-PITTS-0013 *Purchasing of Lab Supplies*.

# 4.7 Customer Service

Project details and management is handled by the laboratory's customer service team. Each customer is assigned a Project Manager (PM) that is responsible for review of contract requirements and handling laboratory to customer communication about the project status.

# 4.7.1 Commitment to Meet Customer Expectations

The laboratory cooperates and works closely with our customers to ensure their needs are met and to establish their confidence in the laboratory's capability to meet their needs for analytical services and expectations for service.

Each customer's project is handled by a project manager (PM) that is the customer's primary point of contact. The PM gathers information from the customer to ensure the details of their request are understood. After samples are received, the PM monitors the progress of the project and alerts the customer of any delays or excursions that may adversely impact data usability. Laboratory supervisors are expected to keep the PM informed of project status and any delays or major issues, so that the PM can keep the client informed.



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PAS also has a team of subject matter experts (SME) available to provide customers with advice and guidance and any other assistance needed. SME are selected by top management based on their knowledge, experience, and qualifications.

The laboratory encourages customers to visit the laboratory to learn more about the laboratory's capabilities, observe performance and to meet laboratory personnel.

PAS customers expect confidentiality. Laboratory personnel will not divulge or release information to a third party without proper authorization unless the information is required for litigation purposes. See Section 4.1.5.3 of this manual and policy COR-POL-0004 *Ethics Policy* for more information on the laboratory's policy for client confidentiality.

# 4.7.2 Customer Feedback

The laboratory actively seeks positive and negative feedback from customers through surveys and direct communication. Information from the client about their experience working with the laboratory and their satisfaction with work product is used to enhance processes and practices and to improve decision making. Customer feedback is communicated to laboratory management and corporate personnel in monthly reports and analyzed yearly during management review (See 4.15) to identify risk and opportunity. Corrective, preventive, or continuous improvement actions are taken based on nature of and/or feedback trends.

Also see sections 4.9, 4.10, 4.11, 4.12, 4.14, and 4.15 for more information about how customer feedback is managed by the laboratory and used to enhance the quality management system.

# 4.8 Complaints

Complaints provide opportunities to improve processes and build stronger working relationships with our clients.

The laboratory's complaint resolution process includes three steps. First, handle and resolve the complaint to mutual satisfaction. Second, perform corrective action to prevent recurrence (See 4.11). Third, record and track the complaint and use these records for risk and opportunity assessment and preventive action (See 4.12)

#### 4.9 Nonconforming Work

#### 4.9.1 Definition of Nonconforming Work

Nonconforming work is work that does not conform to customer requirements, standard specifications, laboratory policies and procedures, or that does not meet acceptance criteria.

The discovery of non-conforming work comes come from various sources which include, but are not limited to:

- results of quality control samples and instrument calibrations;
- quality checks on consumables and materials;
- general observations of laboratory personnel;
- data review;
- proficiency testing;
- internal and external audits;



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- complaints and feedback;
- management review and reports; and
- regulatory and certification and accreditation actions.

The way in which the laboratory handles nonconforming work depends on the significance and impact (risk) of the issue. Some issues may simply require correction, others may require investigation, corrective action (See 4.11) and/or data recall (See 4.16). When the laboratory releases data and test results associated with nonconforming QC and acceptance criteria test results are qualified or non-conformances are noted in the final analytical report to apprise the data user of the situation. (See 5.10)

Nonconforming work also includes unauthorized departure from laboratory policies, procedures and test methods. Authorized departures are explained in the following subsections. Situations that do not conform to these conditions are considered unauthorized departure(s).

# 4.9.1.1 Authorized Departure from SOP

An authorized departure from a test method SOP is one that has been reviewed and approved by the Department Manager, Technical Manager, Acting Technical Manager for TNI, Quality Manager, or the General Manager. Review is conducted to confirm the departure does not conflict with regulatory compliance requirements for which the data will be used or does not adversely affect data integrity. The departure may originate from client request or may be necessary to overcome a problem.

An authorized departure from administrative or process-oriented SOP is typically necessary to correct an error in the SOP. These departure requests are reviewed and pre-approved by the local QA Manager. Documentation of SOP departures and approval decisions are retained by the laboratory as evidence that the departure was authorized. When necessary, approved departures from test method SOPs are noted in the final test report to advise the data user of any ramification to data quality.

# 4.9.1.2 Authorized Departure from Test Methods (Method Modifications)

When test results are associated to a published reference test method, the laboratory's test method SOP must be consistent with the test method. If the test method is mandated for use by a specific regulatory program such as drinking water or wastewater or a certification or accreditation program, such as TNI/NELAC, the SOP must also comply with or include these requirements. If the procedures in the SOP are modified from the test method, these modifications must be clearly identified in the SOP. The conditions under which the laboratory may establish an SOP that is modified from these reference documents, and what is considered a modification are specified in ENV-SOP-CORQ-0011 *Method Validation and Instrument Verification*.

Modifications that do not meet the requirements of this SOP (ENV-SOP-CORQ-0011) are unauthorized. Client requests to deviate from the test method are handled as client requests to depart from the test method SOP since it is the SOP that the laboratory follows when performing work.



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# 4.9.1.3 Stop Work Authority

Stop Work Authority provides laboratory personnel with the responsibility and obligation to stop work when there is a perceived unsafe condition or behavior that may result in an unwanted event.

All laboratory and corporate personnel have the authority to stop work when needed to preserve data integrity or safety of workers.

Once a stop work order has been initiated and the reason for doing so is confirmed valid; laboratory management is responsible for immediate correction and corrective action (see section 4.10) before resumption of work.

# 4.10 Continuous Improvement

The laboratory's quality management system is designed to achieve continuous improvement through the implementation of the quality policy and objectives outlined in this manual. Information about the laboratory's activities and performance is gained from many sources such as customer feedback, audits, QC, trend analysis, business analytics, management reports, proficiency testing, and management systems review. This information is subsequently used during the laboratory's corrective action (see section 4.11) and preventive action (see section 4.12) processes and to establish goals and objectives during annual review of the management system (see section 4.15).

PAS also promotes a continuous improvement culture based on the principles of lean manufacturing. These principles include 3P (Process, Productivity, Performance) and Kaizen. 3P is a platform used by Pace to share best practices and standardization across the network to achieve operational excellence. Kaizen is a team based process used to implement tools and philosophies of lean to reduce waste and achieve flow with the purpose of improving both external and internal customer satisfaction.

# 4.11 Corrective Action

Corrective action is process used to eliminate the cause of a detected nonconformity. It is not the same as a correction. A correction is an action taken to fix an immediate problem. The goal of the corrective action process is to find the underlying cause(s) of the problem and to put in place fixes to prevent the problem from happening again. The corrective action process, referred to as CAPA by PAS, is one of the most effective tools used by the laboratory to prevent nonconforming work, identify risk and opportunity, and improve service to our customers.

The laboratory has two general processes for corrective action:

The process used for actions taken in response to day to day quality control (QC) and acceptance criteria exceptions (nonconformance) that occur during the day to day testing process are called corrections. These events do not usually include formal methods for cause analysis; instead the reason for the failure is investigated through troubleshooting or other measures. Required actions for correction of routine nonconformance is specified in laboratory SOPs. When corrective action is not taken, cannot be taken, or is not successful, test results associated with the nonconforming work are qualified in the final test report. Documentation of the nonconformance and corrective action taken is documented in the analytical record.

A formal 7 step corrective action process is used when there is a problem or departure from the quality management system, technical activities, or when the extent of a single problem has significant



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impact on data, regulatory compliance or customer needs. These problems are identified through various activities such as but not limited to: quality control trends, internal and external audits, management review, customer feedback, and general observation.

The laboratory's 7 Step CAPA Process includes:

- 1) Define the Problem
- 2) Define the Scope of the Problem
- 3) Contain the Problem
- 4) Root Cause Analysis
- 5) Plan Corrective Action
- 6) Implement Corrective Action
- 7) Follow Up / Effectiveness Check

The formal CAPA process may be initiated by any employee. Once the process is initiated it is overseen and coordinated by laboratory management. The CAPA process is documented using an electronic or paper-based system. The CAPA record includes tracking information, dates, individuals involved, those responsible for action plan implementation and follow-up, and timelines and due dates.

For more information about the laboratory's procedure for corrective action, see laboratory SOP ENV-SOP-PITTS-0004 *Corrective Action*. Additional explanation about certain aspects of the laboratory's corrective action process are outlined in the next three subsections.

#### 4.11.1 Root Cause Analysis

Root cause analysis (RCA) is the process of investigation used by the laboratory to identify the underlying cause(s) of the problem. Once causal factors are identified, ways to mitigate the causal factors are reviewed and corrective action(s) most likely to eliminate the problem are selected.

The laboratory uses different methods to conduct this analysis. The most common approach is 5-Why, but fishbone diagrams, or even brainstorming may be appropriate depending on the situation. The method used is documented in the CAPA record.

#### 4.11.2 Effectiveness Review

Monitoring corrective actions for effectiveness is shared by laboratory supervisors and quality assurance personnel. Effectiveness means the actions taken were sustainable and appropriate. Sustainable means the change is still in place. Appropriate means the action(s) taken prevented recurrence of the problem since the time corrective action was taken.

The time-frame in which effectiveness review takes place depends on the event and is recorded in the CAPA record with any addition actions that need to be taken.

Corrective action trends are also monitored by laboratory management and used to identify opportunities for preventive action or to gain lessons learned when actions taken were not adequate to solve the problem. See Section 4.12 (Preventive Action) and 4.15 (Management Review) for more information.

#### 4.11.3 Additional Audits

When non-conformances or other problems cast doubt on compliance with the laboratory's policies, procedures, or compliance to regulatory requirements; laboratory management



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schedules a special audit of the area of activity in accordance with Section 4.14.1 as soon as possible. These special audits are used to determine the scope of the problem and to provide information for the CAPA process. Additional full-scale audits are done when a serious issue or risk to the laboratory's business is identified.

## 4.12 **Preventive Action**

Preventive action is an action taken to eliminate the cause of a potential nonconformity and to achieve improvement. Preventive action is a forward thinking process designed to prevent problems opposed to reacting to them (corrective action).

Some examples of preventative action include, but are not limited to:

- Scheduled instrument maintenance (Preventative maintenance)
- Addition of Staff and Equipment
- Professional Development Activities
- Implementation of New Technology

The laboratory looks for opportunities for preventive action from a variety of sources including but not limited to: employee idea's, customer feedback, business partners input, trend analysis, business analytics, management reviews, proficiency testing results, lean management events, and risk-benefit analysis.

The process for preventive actions follows the same 7 step process for corrective action except "problem" is replaced with "opportunity", "cause analysis" is replaced with "benefit analysis", and "corrective action" is replaced with "preventive action".

Laboratory management evaluates the success of preventive actions taken in any given year during annual management review. See Section 4.15 for more information.

#### 4.12.1 Change Management

Preventive actions may sometimes result in significant changes to processes and procedures used by the laboratory. Laboratory management evaluates the risks and benefits of change and includes in its implementation of change process, actions to minimize or eliminate any risk. The types of changes for which risk are considered and managed include: infrastructure change, change in analytical service offerings, certification or accreditation status, instrumentation, LIMS changes, and changes in key personnel.

For more information about the laboratory's procedures for preventive action see laboratory SOP ENV-SOP-PITTS-0038 *Management of Change*.

## 4.13 Control of Records

A record is a piece of evidence about the past, especially an account of an act or occurrence kept in writing or some other permanent form. Laboratory records document laboratory activities and provide evidence of conformity to the requirements established in the quality management system. These records may be hardcopy or electronic on any form of media.



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## 4.13.1 General Requirements

### 4.13.1.1 Procedure

The laboratory's procedures for control of records is provided in laboratory SOP for Data and Records Archival.

The procedures in the SOP are established to assure quality and technical records are identified, retained, indexed, and filed to allow for retrieval during the entire retention time frame. During storage, records are kept secure and protected from deterioration. At the end of the retention time, the records are disposed of properly in order to maintain client confidentiality and to protect the interests of the company.

In general, laboratory records fall into three categories: quality, technical, and administrative.

Record Type	Includes Records of:
Quality	Documents: Document Types listed in SOP ENV-SOP-CORQ-016
	Audits: Internal and External
	Certificates and Scopes of Accreditation
	Corrective & Preventive Action
	Management Review
	Data Investigations
	Method Validation
	Instrument Verification
	Training Records
Technical	Raw Data
	Logbooks
	Certificates of Traceability
	Analytical Record
	Test Reports & Project Information
	Technical Training Records & Demonstration of Capability
Administrative	Personnel Records
	Finance/Business

Examples of each are provided in the following table:

## 4.13.1.2 Record Legibility and Storage

Records are designed to be legible and to clearly identify the information recorded. Manual entries are made in indelible ink; automated entries are in a typeface and of sufficient resolution to be read. The records identify laboratory personnel that performed the activity or entered the information.

Records are archived and stored in a way that they are retrieved. Access to archived records is controlled and managed.

For records stored electronically, the capability to restore or retrieve the electronic record is maintained for the entire retention period. Hardcopy record are filed and stored in a suitable environment to protect from damage, deterioration, or loss. Hardcopy records may be scanned to PDF for retention. Scanned records must be checked against the hardcopy to verify the scan is complete and legible.

Records are kept for a minimum of 10 years unless otherwise specified by the client or regulatory program.



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The date from which retention time is calculated depends on the record. In general, the retention time of technical records of original observation and measurement is calculated from the date the record is created. If the technical record is kept in a chronological logbook, the date of retention may be calculated from the date the logbook is archived. The retention time of test reports and project records, which are considered technical records, is calculated from the date the test report was issued. The retention time of quality records is usually calculated from the date the record is archived.

Refer to the laboratory's record management SOP for more information.

### 4.13.1.3 Security

The laboratory is a secure facility and access to records is restricted to laboratory personnel.

## 4.13.1.4 Electronic Records

The data systems used to store electronic records is backed up in accordance with laboratory SOP ENV-SOP-PITTS-0033 *Horizon LIMS*. Access to archived records stored electronically is maintained by personnel responsible for management of the electronic system.

### 4.13.2 Technical Records

In addition to the requirements identified in subsections 4.13.1.1 through 4.13.1.4, the requirements in the following subsections also apply to technical records.

#### 4.13.2.1 Description

Technical records are the accumulation of data and information generated from the analytical process. These records may include forms, worksheets, workbooks, checklists, notes, raw data, calibration records, final test reports, and project record. The accumulated record essentially needs to provide sufficient detail to historically reconstruct the process and identify the personnel that performed the tasks associated with a test result.

## 4.13.2.2 Real Time Recordkeeping

Personnel are instructed and expected to always record observations, data, and calculations at the time they are made. Laboratory managers are responsible to assure that data entries, whether made electronically or on hardcopy, are identifiable to the task.

## 4.13.2.3 Error Correction

Errors in records must never erased, deleted or made illegible. Use of correction fluid, such as white-out is prohibited. In hardcopy records, the error is corrected by a single-strike through the original entry and the new entry recorded alongside or footnoted to allow for readability. Corrections are initialed and dated by the person making the correction. If the correction is not self-explanatory, a reason for the correction is recorded.



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For electronic records, equivalent measures of error correction or traceability of changes made is kept. For example, audit trails provide records of change.

Maintenance of proper practices for error correction is monitored through the tiered data review process described in Section 5.9.3. Laboratory records are reviewed throughout the data review process. Individuals performing these reviews flag errors that are not properly corrected and bring these to the attention of the department manager or supervisor of the work area in which the record was generated so that the problem may be addressed and corrected with the individual(s) that did not make the correction properly.

## 4.14 Audits

The laboratory performs internal systems and technical audits to assess compliance to this manual and to other laboratory procedures, such as policy, SOP and SWI. Since the processed in this manual are based on the relevant quality system standards and regulatory and accreditation/certification program requirements the laboratory provides services for, the internal audits also assess on-going compliance to these programs.

The laboratory is also audited by external parties such as regulatory agencies, customers, consultants and non-government assessment bodies (NGAB).

Information from internal and external audits is used by laboratory management to address compliance concerns and opportunities where improvement will increase the reliability of data.

Deficiencies, observations and recommendations from audits are managed by local QA using the laboratory's formal CAPA process. See Section 4.11 for more information.

#### 4.14.1 Internal Audit

The laboratory's internal audit program is managed by local QA in accordance with a predetermined audit schedule established at the beginning of each calendar year. The schedule is prepared to assure that all areas of the laboratory are reviewed over the course of the year. Conformance to the schedule is reported to both laboratory management and corporate quality personnel in a monthly QA report prepared by the quality manager.

Although the QA Manager creates the audit schedule, it is the shared responsibility of local QA and laboratory managers to assure the schedule is maintained. Laboratory supervisors cooperate with QA to provide the auditors with complete access to the work area, personnel, and records needed.

Internal audits are performed by personnel approved by the quality manager. In general, personnel may not audit their own activities unless it can be demonstrated that an effective and objective audit will be carried out. The auditor must be trained, qualified, and familiar enough with the objectives, principles, and procedures of laboratory operations to be able to perform a thorough and effective evaluation.

The laboratory's internal audit program includes:

System Audits & Method Audits: The purpose of these audits is to determine if daily
practice is consistent with laboratory's SOPs and if SOPs are compliant with adjunct
policy and procedures. Auditing techniques includes analyst interviews and observation
and records review. These audits are performed per the pre-determined schedule.



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- Raw Data / Final Test Report Audits: The purpose of these audits is to review raw data and/or a final test reports to verify the final product is consistent with customer/project requirements and supported as compliant to SOPs, reference methods, with test results that are properly qualified when necessary, accurate, and of known and documented quality. The reviews should also identify opportunities for improvement and best practices.
- Special Audits: Special audits are those performed ad hoc to follow up on specific a specific issue such as a client complaint, negative feedback, concerns of data integrity or ethics, or a problem identified through other audits. Special audits may be scheduled or unscheduled. Unscheduled internal audits are conducted whenever doubts are cast on the laboratory's compliance with regulatory requirements or its own policies and procedures. These unscheduled internal audits may be conducted at any time and may be performed without an announcement to laboratory personnel.

When observations and findings from any audit (internal or external) cast doubt on the validity of the laboratory's testing results, the laboratory takes immediate action to initiate investigate the problem and take corrective action. (Also see 4.11 and 4.16)

The laboratory's internal audit program and auditing procedures are further described in laboratory SOP ENV-SOP-PITTS-0006 Internal Audits.

## 4.14.1.1 Corporate Compliance Audit

The laboratory may also be audited by corporate quality personnel to assess the laboratory's compliance to the company's quality management program and to evaluate the effectiveness of implementation of the policies and procedures that make up the quality management system. The purpose of the compliance audit is to identify risks and opportunities and to assist laboratory management achieve the goals and objectives of the company's quality program.

## 4.15 Management Review

The laboratory's management team formally reviews the management system on an annual basis to assess for on-going suitability and effectiveness and to establish goals, objectives, and action plans for the upcoming year.

At a minimum, following topics are reviewed and discussed:

- The on-going suitability of policies and procedures including HSE (Health, Safety and Environment) and waste management;
- Reports from managerial and supervisory personnel including topics discussed at regular management meetings held throughout the year;
- The outcome of recent internal audits;
- Corrective and preventive actions;
- Assessments by external bodies;
- The results of interlaboratory comparisons or proficiency tests;



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- Changes in the volume and type of the work;
- Customer and personnel feedback, including complaints;
- Effectiveness of improvements / preventive actions made since last review;
- Internal and external issues of relevance and risk identification;
- A review of the status of actions from prior management reviews; and
- Other relevant factors, such as quality control activities, resources, and staff training.

The discussion and results of this review are documented in a formal report prepared by laboratory management. This report includes a determination of the effectiveness of the management system and its processes; goals and objectives for improvements in the coming year with timelines and responsibilities, any other need for change. See laboratory SOP ENV-SOP-CORQ-0005 for more information.

Goals and action items from annual management systems review are shared with employees to highlight focus areas for improvement in addition to areas in which the laboratory has excelled.

# 4.16 Data Integrity

The laboratory's procedures for data integrity reviews are described in SOP ENV-SOP-CORQ-0010 *Data* Recall.

Customers whose data are affected by these events are notified in a timely manner, usually within 30 days of discovery. Some accreditation programs also require notification to the accreditation body (AB) within a certain time-frame from date of discovery when the underlying cause of the issue impacts accreditation. The laboratory follows any program or project specific client notification requirements for notification, when applicable.

# 5.0 TECHNICAL REQUIREMENTS

## 5.1 General

Many factors contribute to the correctness and reliability of the technical work performed by the laboratory. These factors are fall under these general categories:

- Human Performance
- Facility and Environmental Conditions
- Test Method Performance and Validation
- Measurement Traceability
- Handling of Samples

The impact of each of these factors varies based on the type of work performed. To minimize negative effects from each these factors, the laboratory takes into account the contribution from each of these categories when developing test method and process (administrative) SOPs, evaluating personnel qualifications and competence, and in the selection of equipment and supplies used.



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# 5.2 Personnel

## 5.2.1 Personnel Qualifications

The laboratory's program for personnel management is structured to ensure personnel are selected, qualified, and competent to perform the roles and responsibilities of their position based on education, experience, and training.

Qualifications, duties, responsibilities, and authorities of each position are specified in job descriptions maintained by corporate HR (See Section 5.2.4). These job descriptions provide the general basis for the selection of personnel for hire and are used by the laboratory to communicate to personnel the duties, responsibilities, and authorities of their position.

The term "personnel" refers to individuals employed by the laboratory directly as full-time, part-time, or temporary, and individuals employed by the laboratory by contract, such as through an employment agency. The term "personnel" is used interchangeably with the term "employee" throughout this manual. For purposes of this manual, these terms are equivalent.

The personnel management program is structured to establish and maintain records for each of the following:

- Selection of personnel;
- Training of personnel;
- Supervision of personnel;
- Authorization of personnel; and
- Monitoring Competence of personnel.

## 5.2.1.1 Competence

Competence is the ability to apply a skill or series of skills to complete a task or series of tasks correctly within defined expectations.

Competence for technical personnel authorized by PAS to provide opinion and interpretation of data to customers also includes the demonstrated ability to:

- Apply knowledge, experience, and skills needed to safely and properly use equipment, instrumentation, and materials required to carry out testing and other work activities in accordance with manufacturer specifications and laboratory SOPs;
- Understand and apply knowledge of general regulatory requirements necessary to achieve regulatory compliance in work product; and
- Understand the significance of departures and deviations from procedure that may occur during the analytical testing process and the capability and initiative to troubleshoot and correct the problem, document the situation and decision making process, and to properly qualify the data and analytical results.

The laboratory's requirements for the competence of personnel (education, qualification, work experience, technical skills, and responsibilities) are specified in job descriptions created by management and kept by human resources (HR). The job description provides the basis for the selection of personnel for each position.



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An employee is considered competent when he/she has completed required training.

The policies and standard operating procedures (SOPs) for the following topics are established by management as minimum required training for all personnel:

- Ethics and Data Integrity
- Quality Manual
- Safety Manual
- Quality Management System
- Technical Process and Procedure relevant to their job tasks
- Successful Demonstration of Capability (DOC) Analytical Personnel Only

Personnel are initially authorized competent to independently carry out their assigned duties when required training is complete and documented.

Records of training and qualification provide the record of competence for the individual. Qualification records may include but are not limited to diploma, transcripts, and curriculum vitae (CV).

The on-going competence of each employee is monitored by laboratory management through on-the-job performance. Analytical employees are also required to successfully complete another demonstration capability for each test method performed on an annual basis.

# 5.2.2 Training

Training requirements are outlined in policies COR-POL-0023 Mandatory Training Policy. COR-POL-0004 Ethics Policy, and laboratory SOP ENV-SOP-PITTS-0014 Employee Orientation and Training. Additional training requirements may also be specified in other documents, such as manuals

## 5.2.2.1 Training Program and Goals

The laboratory's training program includes 4 elements:

- Identification of Training Needs
- Training Plan Development and Execution
- Documentation and Tracking
- Evaluation of Training Effectiveness

Laboratory management establishes goals and training needs for individual employees based on their role, education, experience, and on-the-job performance.

Training needs for all employees are based on business performance measures that include but are not limited to:

- Quality Control Trends
- Process Error / Rework Trends



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- Proficiency Testing Results
- Internal & External Audit Performance
- Management Review Goals

Training is delivered using various methods that incorporate techniques that appeal to the main learning styles: visual, aural, linguistic, and kinesthetic. Techniques include, on-the-job, instructor-led, self-study, eLearning, and blended.

The employee's direct supervisor is responsible for oversight of the employee's training plan and for providing adequate time to the employee to complete training assignments. Both the supervisor and employee are responsible to make sure the employee's training status and training records are current and complete.

The laboratory's QA department monitors the training status of personnel and provides the status to the General Manager (GM or AGM) at least monthly or more frequently, if necessary. The status report is used by laboratory management to identify overdue training assignments, the reasons for the gaps, and to make arrangements for completion.

The following subsections highlight specific training requirements:

## 5.2.2.1.1 New Hire Training

New hire training requirements apply to new personnel and to existing employee's starting in a new position or different work area.

Required new hire training includes each of the following:

- Ethics and Data Integrity (See 5.2.2.1.3)
- Quality Manual / Quality Management System (See 5.2.2.1.4)
- Safety Manual and any training requirements specified in the manual.
- Policies & SOPs relevant to their job tasks
- Technical personnel that test samples must also successfully complete an initial demonstration of capability (IDOC) for the test methods performed before independently testing customer samples. (See 5.2.2.1.5). Independent testing means handling of client samples without direct supervision of the work activity by the supervisor or a qualified trainer.

All required training must be current and complete before the employee is authorized to work independently. Until then, the employee's direct supervisor is responsible for review and acceptance of the employee's work product.

## 5.2.2.1.2 On-Going Training

Personnel receive on-going training in each of the following topics:



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- Ethics and Data Integrity (See 5.2.2.1.3)
- Quality Manual / Quality Management System (See 5.2.2.1.4)
- Safety Training
- Changes to Policies & SOPs
- Specialized Training
- Technical employees that carry of testing must also successfully complete on-going demonstration of capability (ODOC) for all test methods performed on an annual basis. (See 5.2.2.1.5)

Personnel are expected to maintain their training status and records of training current and complete and to complete training assignments in a timely manner.

## 5.2.2.1.3 Ethics and Data Integrity Training

Data integrity training is provided to all new personnel and refresher data integrity training is provided to all employees on an annual basis. Personnel are required to acknowledge they understand that any infractions of the laboratory data integrity procedures will result in a detailed investigation that could lead to very serious consequences including immediate termination, debarment, or civil/criminal prosecution.

The initial data integrity training and the annual refresher training is documented with a signature attendance sheet or other form of documentation to provide evidence that the employee has participated in training on this topic and understand their obligations related to data integrity.

The following topics and activities are covered:

- Policy for honesty and full disclosure in all analytical reporting;
- Prohibited Practices;
- How and when to report data integrity issues;
- Record keeping. The training emphasizes the importance of proper written documentation on the part of the analyst with respect to those cases where analytical data may be useful, but are in one sense or another partially nonconforming;
- Training Program, including discussion regarding all data integrity procedures;
- Data integrity training documentation;
- In-depth procedures for data monitoring; and
- Specific examples of breaches of ethical behavior such as improper data manipulations, adjustments of instrument time



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clocks, and inappropriate changes in concentrations of standards.

All PAS personnel, including contract and temporary, are required to sign an "Attestation of Ethics and Confidentiality" at the time of employment and during annual refresher training. This document clearly identifies inappropriate and questionable behavior. Violations of this document result in serious consequences, including prosecution and termination, if necessary.

Also see SOP-ENV-COR-POL-0004 *Ethics Policy* for more information.

## 5.2.2.1.4 Management System Documents Training

PAS Manuals, policies, and SOPs are the primary documents used by regulatory bodies and PAS customers to verify the laboratory's capability, competency. and compliance with their requirements and expectations.

In addition to on-the-job training, employees must have a signed Read and Acknowledgement Statement on record for the laboratory quality manual, and the policies and SOPs relating to his/her job responsibilities. This statement when signed by the employee electronically or by wet signature, confirms that the employee has received, read, and understands the content of the document, that the employee agrees to follow the document when carrying out their work tasks; and the employee understands that unauthorized change to procedures in an SOP is not allowed except in accordance with the SOP departure policy (See 4.9.9.1) and SOP ENV-CORQ-0016 *Standard Operating Procedures and Standard Work Instructions* for more information.

# 5.2.2.1.5 Demonstration of Capability (DOC)

Technical employees must also complete an initial demonstration of capability (IDOC) prior to independent work on client samples analyzed by the test methods they perform. After successful IDOC, the employee must demonstrate continued proficiency (CDOC) for the test method on an annual basis. If more than a year has passed since the employee last performed the method; then capability must be re-established with an IDOC.

Demonstration of capability (IDOC and DOC) is based on the employee's capability to achieve acceptable precision and accuracy for each analyte reported by the laboratory for the test method using the laboratory's test method SOP.

Records of IDOC and ODOC are kept in the employee's training file.

For more information, see laboratory SOP ENV-SOP-PITTS-0014.



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## 5.2.2.2 Effectiveness of Training

The results of the performance measures used to identify training needs are the same measures used by the laboratory to measure effectiveness of the training program. Improvement in key performance measures suggest the training program is successful. (See 5.2.2.1)

Effectiveness of individual employee training is measured by their demonstrated ability to comprehend the training material and apply knowledge and skills gained to their job task. Measurements include but are not limited to:

- Testing of the employee's knowledge of the quality management system, policies, and technical and administrative procedures through various mechanisms, such as quizzes, observation, and interviews.
- Demonstrated ability to convey information correctly and factually in written and verbal communication to internal and external parties.
- Demonstrated ability to carry out tasks in accordance with SOPs and other work instructions.
- Demonstrated ability to make sound decisions based on guidance and information available.
- Demonstrated initiative to seek help or guidance when the employee is unsure of how to proceed.

## 5.2.3 Personnel Supervision

Every employee is assigned a direct supervisor, however named, who is responsible for their supervision. Supervision is the set of activities carried out by the supervisor to oversee the progress and productivity of the employees that report to them.

General supervisory responsibilities may include but are not limited to:

- Hiring Employees
- Training Employees
- Performance Management
- Development, oversight, and execution of personnel training plans
- Monitoring personnel work product to assure the work is carried out in accordance with this quality manual, policies, SOPs, and other documents that support the quality management system.

## 5.2.4 Job Descriptions

Job Descriptions that define the required education, qualifications, experience, skills, roles and responsibilities, and reporting relationships for each PAS position are established by top management and kept by corporate HR. PAS laboratories use these job descriptions as the source of positions and job titles for the laboratory. The job descriptions apply to employees who are directly employed by PAS, part-time, temporary, technical and administrative and by those that are under contract with PAS through other means.



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The job descriptions include the education, expertise, and experience required for the position and the responsibilities and duties, including any supervisory or managerial duties assigned to the position.

## 5.2.5 Authorization of Technical Personnel

Laboratory management authorizes technical personnel to perform the technical aspects of their position after it has been verified that the employee meets the qualifications for the position, has successfully completed required training, and the employee has demonstrated capability. After initial authorization, technical personnel are expected to maintain a current and complete training record, demonstrate on-going capability at least annually for each test method performed, and produce reliable results through accurate analysis of certified reference materials, proficiency testing samples, and/or routine quality control samples in order to remain authorized to continue to perform their duties.

Records to support authorization including, education, experience, training, and other evaluations are kept by the laboratory.

## 5.3 Accommodations and Facilities

## 5.3.1 Facilities

The laboratory is designed to support the correct performance of procedures and to not adversely affect measurement integrity or safety. Access to the laboratory is controlled by various measures, such as card access, locked doors, main entry. Visitors to the laboratory are required to sign-in and to be escorted by laboratory personnel during their visit. A visitor is any person that is not an employee of the laboratory.

## 5.3.2 Environmental Conditions

The laboratory is equipped with energy sources, lighting, heating, and ventilation necessary to facilitate proper performance of calibrations and tests. The laboratory ensures that housekeeping, electromagnetic interference, humidity, line voltage, temperature, sound and vibration levels are appropriately controlled to ensure the integrity of specific measurement results and to prevent adverse effects on accuracy or increases in the uncertainty of each measurement.

Environmental conditions are monitored, controlled, and recorded as required by the relevant specifications, methods, and procedures. Laboratory operations are stopped if it is discovered that the laboratory's environmental conditions jeopardize the analytical results.

## 5.3.3 Separation of Incompatible Activities

The layout and infrastructure of each work area including air handling systems, power supplies, and gas supplies of each laboratory work area is specifically designed for the type of analytical activity performed. Effective separation between incompatible work activities is maintained. For example, sample storage, preparation, and chemical handling for volatile organic analysis (VOA) is kept separate from semi-volatile organic (SVOA).

The laboratory separates samples known or suspected to contain high concentration of analytes from other samples to avoid the possibility for cross-contamination. If contamination is found, the source of contamination is investigated and resolved in accordance with laboratory SOPs.



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## 5.3.4 Laboratory Security

Security is maintained by controlled access to the building and by surveillance of work areas by authorized personnel. Access is controlled to each area depending on the required personnel, the sensitivity of the operations performed, and possible safety concerns. The main entrance is kept unlocked during normal business hours for visitors, and is continuously monitored by laboratory staff. All visitors must sign a visitor's log, and a staff member must accompany them during the duration of their stay.

## 5.3.5 Good Housekeeping

The laboratory ensures good housekeeping practices in work areas to maintain a standard of cleanliness necessary for analytical integrity and personnel health and safety. Minimally, these measures include regular cleaning of the work area. Where necessary, areas are periodically monitored to detect and resolve specific contamination and/or possible safety issues.

## 5.4 Test Methods

### 5.4.1 General Requirements

The laboratory uses test methods and procedures that are appropriate for the scope of analytical services the laboratory offers.

Instructions on the use and operation of equipment and sample handling, preparation, and analysis of samples are provided in SOPs. The instructions in SOPs may be supplemented with other documents including but not limited to, standard work instructions (SWI), manuals, guides, project documents and reference documents.

These documents are managed using the procedures described in SOP ENV-SOP-CORQ-0015 Document Management and Control and SOP ENV-SOP-CORQ-0016 Standard Operating Procedures and Standard Work Instructions.

Deviations to test method and SOPs are allowed under certain circumstances. See sections 4.9.1.1 and 4.9.1.2 for more information.

#### 5.4.2 Method Selection

The test methods and protocols used by the laboratory are selected to meet the needs of the customer, are appropriate for the item tested and intended use of the data, and to conform with regulatory requirements when regulatory requirements apply.

In general, the test methods offered are industry accepted methods published by international, regional, or national standards. The laboratory bases its procedure on the latest approved edition of a method unless it is not appropriate or possible to do so or unless regulatory requirements specify otherwise.

The laboratory confirms that it can perform the test method and achieve desired outcome before analyzing samples (see section 5.4.5). If there is a change in the published analytical method, then the confirmation is repeated.

When a customer does not specify the test method(s) to be used, the laboratory may suggest test methods that are appropriate for the intended use of the data and the type of samples to be tested. The laboratory will also inform customers when test methods requested are



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considered inappropriate for their purpose and/or out of date. This discourse takes place during review of analytical service requests (See Section 4.4).

## 5.4.3 Laboratory Developed Methods

A laboratory developed method is a method developed from scratch (no published source method), a procedure that modifies the chemistry from the source method, or a procedure that exceeds the scope and application of the source method.

Laboratory developed methods must be validated prior to use (see section 5.4.5) and the procedure documented in a test method SOP.

The requirements for non-standard methods (Section 5.4.4) also apply to laboratory developed methods.

## 5.4.4 Non-standard Methods

A non-standard method is a method that is not published or approved for use by conventional industry standards for the intended purpose of the data. Non-standard methods must be validated prior to use (see section 5.4.5) and the procedure developed and documented in a test method SOP.

At a minimum, the following information must be included in the procedure:

- Title / Identification of Method;
- Scope and Application;
- Description of the type of item to be analyzed;
- Parameters or quantities and ranges to be determined;
- Apparatus and equipment, including technical performance requirements;
- Reference standards and reference materials required;
- Environmental conditions required and any stabilization period needed
- Description of the procedure, including:
  - Affixing identification marks, handling, transporting, storing and preparing of items;
  - Checks to be made before the work is started;
  - Verifying equipment function and, where required, calibrating and/or adjusting the equipment before each use;
  - Method of recording the observations and results;
  - Any safety measures to be observed;
  - Criteria and/or requirements for approval/rejection;
  - Data to be recorded and method of analysis and presentation; and
  - Uncertainty or procedure for estimating uncertainty.

Use of a non-standard method for testing must be agreed upon with the customer. The agreement, which is retained by the laboratory in the project record, must include the



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specifications of the client's requirements, the purpose of testing, and their authorization for use of the non-standard method.

## 5.4.5 Method Validation

## 5.4.5.1 Validation Description

Validation is the process of conformation and the provision of objective evidence that the stated requirements for a specific method/procedure are fulfilled.

The laboratory's requirements and procedures for method validation are outlined in SOP ENV-SOP-CORQ-0011 *Method Validation and Instrument Verification*.

### 5.4.5.2 Validation Summary

All test methods offered by the laboratory are validated before use to confirm the procedure works and the data and results achieved meet the goals for the method. The extent of validation performed is based on technology and other factors as defined in the validation SOP (ENV-SOP-CORQ-0011).

The need to repeat validation is assessed by laboratory management when there are changes to the test method.

### 5.4.5.3 Validation of Customer Need

Laboratory management reviews the results of test method validation, which include accuracy, precision, sensitivity, selectivity, linearity, repeatability, reproducibility, robustness, and cross-sensitivity, against general customer needs to ensure the laboratory's procedure for the test method will meet those needs.

The review procedure is detailed in SOP ENV-SOP-CORQ-0011 Method Validation and Instrument Verification.

The following subsections highlight some of these concepts:

#### 5.4.5.3.1 Accuracy

Accuracy is the degree to which the result of a measurement, calculation, or specification conforms to the correct value or a standard. When the result recovers within a range from the known value (control limit); the result generated using the laboratory's test method SOP is considered accurate.

## 5.4.5.3.2 Precision

Precision refers to the closeness of two or more measurements to each other. It is generally measured by calculating the relative percent difference (RPD) or relative standard deviation (RSD) from results of separate analysis of the same sample. Precision provides information about repeatability, reproducibility, and robustness of the laboratory's procedure.



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# 5.4.5.3.3 Limits of Detection (LOD) (Chemistry)

The LOD is the minimum result which can be reliably discriminated from a blank with a predetermined confidence level. The LOD establishes the limit of method sensitivity and is also known as the detection limit (DL) or the method detection limit (MDL).

Values below the LOD cannot be reliably measured and are not reported by the laboratory unless otherwise specified by regulatory program or test method.

The LOD is established during method validation and after major changes to the analytical system or procedure that affect sensitivity are made.

The laboratory's procedure for LOD determination is detailed in laboratory SOP ENV-SOP-PITTS-0009. The SOP complies with 40 CFR 136 Appendix B or the current industry approved and accepted guidance for this process.

# 5.4.5.3.4 Limits of Quantitation (LOQ) and Reporting Limit (RL)

The LOQ is the minimum level, concentration, or quantity of a target analyte that can be reported with a specified degree of confidence. The LOQ is established at the same time as the LOD. The laboratory's procedure for determination and verification of the LOQ is detailed in laboratory SOP ENV-SOP-PITTS-0009.

The LLOQ is the value of the lowest calibration standard. The LOQ establishes the lower limit of quantitation.

The LOQ and LLOQ represent quantitative sensitivity of the test method.

- The LOQ must always be equal to or greater than the LLOQ and the LLOQ must always be greater than the LOD.
- Any reported value (detect or non-detect) less than the LLOQ is a qualitative value.

The RL is the value to which the presence of a target analyte is reported as detected or not-detected. The RL is project-defined based on project data quality objectives (DQO). In the absence of project specific requirements, the RL is usually set to the LOQ or the LLOQ. Depending on the relationship of the RL to the LLOQ or LOQ, both the RL value may be or quantitative.

For more information, refer to laboratory SOP ENV-SOP-PITTS-0009.



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## 5.4.5.3.5 Linearity

Linearity is a mathematical concept applied to calibration models that employ multiple points to establish a calibration range used for quantitative analysis. Linearity is measured differently based on the calibration model. In general, if linearity is demonstrated than the slope of the response of standards are sufficiently close to one another. The accuracy of the linear regression and non-linear curves is verified by checking percent error or relative standard error (RSE), which is the process of refitting calibration data back to the model to determine if the results are accurate. For linear curves that use average calibration or response factor, error is measured by relative standard difference (RSD).

Linearity also establishes the range of quantitation for the test method used which directly impacts the sensitivity of the test method and uncertainty in measurement results. As previously noted, the LLOQ establishes the lower limit of quantitation. Similarly, the upper range of linearity establishes the upper limit of quantitation. In general, results outside of this range are considered qualitative values. However, some inorganic methods allow for extension of the linear range above the upper limit of quantitation when accuracy at this value is verified.

Linearity can also be used to establish repeatability, reproducibility, and robustness of the laboratory's test method. When linearity is demonstrated using a specific calibration model during method validation, then use of this same calibration model to achieve linearity on a day to day basis confirms the laboratory's method is repeatable, reproducible, and robust.

# 5.4.5.3.6 Demonstration of Capability (DOC)

The DOC performed during method validation confirms that the test method acceptable precision and accuracy. The procedure used for DOC for method validation is the same as described in section 5.2.2.1.5 for demonstration of analyst capability.

## 5.4.6 Measurement Uncertainty

The laboratory provides an estimate of uncertainty in testing measurements when required or on client request. In general, the uncertainty of the test method is reflected in the control limits used to evaluate QC performance. (See 5.9.1.1.10). ISO/IEC supports this concept with language that reads when a well-recognized test method specifies limits to the values of the major source of uncertainty of measurement and specifies the form of presentation of calculated results, the laboratory has satisfied the requirements on analytical uncertainty by following the test method and reporting instructions.

When measurement uncertainty cannot be satisfied through control limits, the laboratory will provide a reasonable estimation of uncertainty. A reasonable estimation is based on knowledge of method performance and previous experience. When estimating the analytical



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uncertainty, all uncertainty components which are of importance in the given situation are taken into account.

## 5.4.7 Control of Data

The laboratory has policies and processes in place to assure that reported data is free from calculation and transcription errors, that quality control is reviewed and evaluated before data is reported, and to address manual calculation and integration.

## 5.4.7.1 Calculations, Data Transfer, Reduction and Review

Whenever possible, calculations, transfer of data, and data reduction are performed using validated software programs. (See 5.4.7.2)

If manual calculations are necessary, the results of these calculations are verified during the data review process outlined in section 5.9.3.

## 5.4.7.1.1 Manual Integration

The laboratory's policy and procedures for manual integration are provided in SOP ENV-SOP-CORQ-0006 *Manual Integration*.

This SOP includes the conditions under which manual integration is allowed and the requirements for documentation.

Required documentation of manual integration includes:

- complete audit trail to permit reconstruction of before and after results;
- identification of the analyst that performed the integration and the reason the integration was performed; and
- the individual(s) that reviewed the integration and verified the integration was done and documented in compliance with the SOP.

## 5.4.7.2 Use of Computers and Automated Acquisition

Whenever possible the laboratory uses software and automation for the acquisition, processing, recording, reporting, storage, and/or retrieval of data.

Software applications developed by PAS are validated by corporate IT for adequacy before release for general use. Commercial off the shelf software is considered sufficiently validated when the laboratory follows the manufacturer or vendor's manual for set-up and use. Records of validation are kept by the corporate information technology (IT) group or by the local laboratory, whichever group performed the validation.

The laboratory's process for the protection of data stored in electronic systems include:

 Individual user names and passwords for Laboratory Information Management Systems (LIMS) and auxiliary systems used to store or process data.



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- Employee Training in Computer Security Awareness
- Validation of spreadsheets used for calculations to verify formulas and logic yield correct results and protection of these cells to prevent unauthorized change.
- Operating system and file access safeguards
- Protection from Computer Viruses
- Regular system backup; and testing of retrieved data

The laboratory's process for software development and testing process includes:

- Verification the software application works as expected and is adequate for use and fulfills compliance requirements, such as the need to record date/time of data generation.
- Change control to assure requests for changes are reviewed and approved by management before the change is made.
- Communication channels to assure all staff are aware of changes made.
- Version Control and maintenance of historical records.

## 5.5 Equipment

## 5.5.1 Availability of Equipment

The laboratory is furnished with all equipment and instrumentation necessary to correctly perform the tests offered in compliance with the specifications of the test method and to achieve the accuracy and sensitivity required.

## 5.5.2 Calibration

Equipment and instrumentation is checked prior to use to verify it performs within tolerance for its intended application.

Laboratory management is made aware of the status of equipment and instrumentation and any needs for either on a daily basis. This information is obtained during laboratory walkthroughs (LDM) that are conducted as part of the laboratory's lean program.

## 5.5.2.1 Support Equipment

The laboratory confirms support equipment is in proper working order and meets the specifications for general laboratory use prior to placement in service and with intermediate checks thereafter. Equipment that does not meet specifications is removed from service until repaired or replaced. Records of repair and maintenance activities are maintained.

Procedures used to carry out and record these checks are outlined laboratory SOP ENV-SOP-PITTS-0008 *Support Equipment*.

#### 5.5.2.2 Analytical Instruments

Analytical instruments are checked prior to placement in service in accordance with SOP ENV-SOP-CORQ-0011 Method Validation and Instrument Verification. After the



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initial service date, the calibration of instruments and verification calibration is performed in accordance with local test method SOPs.

The calibration procedures in the test method SOPs comply with the requirements for acceptable calibration practices outlined in corporate document ENV-SOT-CORQ-0026 *Acceptable Calibration Practices*, the reference methods, and any applicable regulatory or program requirements.

## 5.5.3 Equipment Use and Operation

Equipment is operated and maintained by laboratory personnel that are trained on the test method SOP. Up-to-date instructions and procedures for the use and maintenance of analytical equipment are included in SOPs and/or supplemental documents such as standard work instructions (SWI) or instrument manuals which are made readily accessible in the work area to all laboratory personnel.

### 5.5.4 Equipment Identification

The laboratory uniquely identifies equipment by serial number or any other unique ID system, when practical. The identifier is included in the equipment list maintained by QA.

### 5.5.5 Equipment Lists and Records

### 5.5.5.1 Equipment List

The laboratory maintains a master list of equipment that includes information about the equipment including a description, manufacturer, serial number, date placed in service, condition when received, identity, and the current location in the laboratory. The date of purchase is tracked by the procurement record. The equipment list(s) for each location covered by this manual is provided in Appendix F.

## 5.5.5.2 Equipment Records

In addition to the equipment list, the laboratory maintains records of equipment that include:

- Verification that equipment conforms with specifications.
- Calibration records including dates, results, acceptance criteria, and next calibration dates.
- Maintenance plan and records
- Records of damage, malfunction, or repair

The laboratory follows an equipment maintenance program designed to optimize performance and to prevent instrument failure which is described in laboratory SOP ENV-SOP-PITTS-0005 *Equipment Maintenance* or individual test method SOPs.

The maintenance program includes routine maintenance activities which are performed as recommended by the manufacturer at the frequency recommended and non-routine maintenance, which is performed to resolve a specific problem such as degradation of peak resolution, shift in calibration relationship, loss of sensitivity, or repeat failure of instrument performance checks and quality control samples.



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Maintenance is performed by laboratory personnel or by outside service providers.

All maintenance activities performed by laboratory personnel are recorded by the individual(s) that performed the activity at the time the maintenance was performed in an instrument maintenance log.

The maintenance record minimally includes the date of maintenance, the initials of the person(s) performing maintenance, a description of the activity performed, why (when the maintenance is non-routine), and the return to analytical control. When maintenance is performed by an external vendor, the laboratory staples the service record into hardcopy maintenance logs or scans the record easy retrieval. The laboratory provides unrestricted access to instrument maintenance logs in order to promotes good instrument maintenance and recordkeeping practices.

If an instrument must be moved, the laboratory will use safe practices for handling and transport to minimize damage and contamination.

## 5.5.6 Out of Service Protocol

Equipment that has been subjected to overloading, mishandling, gives suspect results, has been shown to be defective, or is performing outside of specified limits is taken out of service and either removed from the work area or labeled to prevent accidental use until it has been repaired and verified to perform correctly.

When analytical equipment is taken out of service, the laboratory examines the potential effect it may have had on previous analytical results to identify any non-conforming work. (See section 4.9).

## 5.5.7 Calibration Status

The laboratory labels support equipment to indicate calibration status, whenever practicable or otherwise maintains the calibration status in a visible location in the work area. These procedures are described in laboratory SOP ENV-SOP-PITTS-0007.

The calibration status of analytical instruments is documented in the analytical record. Analysts verify on-going acceptability of calibration status prior to use and with instrument performance check standards. These procedures are described in test method SOPs.

#### 5.5.8 Returned Equipment Checks

When equipment or instrument is sent out of the laboratory for service, the laboratory ensures that the function and calibration status of the equipment is checked and shown to be satisfactory before the equipment is returned to service. These procedures are outlined in SOP ENV-SOP-CORQ-0011 *Method Validation and Instrument Verification*.

## 5.5.9 Intermediate Equipment Checks

The laboratory performs intermediate checks on equipment to verify the on-going calibration status. For example, most test method require some form of continuing calibration verification check and these procedures are included in the test method SOP. Periodic checks of support equipment are also performed; see appendix E for more information.



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## 5.5.10 Safeguarding Equipment Integrity

The laboratory safeguards equipment integrity using a variety of mechanisms that include but are not limited to:

- Adherence to manufacture's specification for instrument use so that settings do not exceed manufacturer's recommendation or stress the performance of the equipment.
- Established maintenance programs.
- Transparent maintenance records and unrestricted access to maintenance logs.
- Validation and approval of software before use.
- Audits to confirm instrument settings are consistent with SOPs.
- On-the-job training for safe and proper use of laboratory equipment.

## 5.6 Measurement Traceability

### 5.6.1 General

Measurement traceability refers to a property of a measurement result whereby the result can be related to a reference through an unbroken chain of calibration, each contributing to the measurement uncertainty. Traceability requires an established calibration hierarchy of equipment (instruments) used during testing including equipment used for subsidiary measurements. The laboratory assures this equipment is calibrated prior to being put into service and that the reference standard and materials used for calibration are traceable to the international standard of units (SI) or national measurement standard.

When strict traceability to SI units cannot be made, the laboratory establishes traceability with the use of reference standards and equipment obtained from competent supplier that provide calibration certificates and/or certificates of analysis (COA).

## 5.6.2 Equipment Correction Factors

When correction factors are used to adjust results the laboratory will assure that results in computer software are also updated. For example, if the direct instrument or reading output must be corrected based on preparation factor or concentration factors, laboratory management will assure the corrected result is also updated in the software, whenever possible.

## 5.6.3 Specific Requirements

## 5.6.3.1 Requirements for Calibration Laboratories

The laboratory does not offer calibration services to customers.

## 5.6.3.2 Requirements for Testing Laboratories

The laboratory has procedures in place to verify equipment is calibrated prior to being put into service. (See 5.5.2) and ensures the reference standard and materials used for calibration are traceable to the international standard of units (SI) or national measurement standard. When strict traceability to SI units cannot be made, the laboratory establishes traceability with the use of reference standards and equipment obtained from competent suppliers that provide calibration certificates and/or certificates of analysis (COA).



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#### 5.6.4 Reference Standards and Reference Materials

#### 5.6.4.1 Reference Standards

The laboratory uses reference standards of measurement to verify adequacy of working weights and thermometers. The working weight is the weight(s) used for daily balance calibration checks and the working thermometers are used for temperature measurements on a daily basis.

Intermediate checks of the working reference measurement standards are performed to verify adequacy between calibration from an external calibration laboratory. The measurements from working weights and thermometers are compared to measurement taken by the reference standard which is traceable to SI or a national standard. The reference weights and thermometers are used solely for verification purposes unless the laboratory can prove that daily use does not adversely affect performance of the reference standard.

The laboratory performs intermediate checks of the working weights at least annually.

Working thermometers (glass and digital) are checked against the reference thermometer prior to placement in service to establish a correction factor and then rechecked annually (glass) or quarterly (digital) thereafter.

The calibration of liquid in glass reference thermometers is verified every 5 years and the calibration of digital reference thermometers is verified annually by an ISO/IEC 17025 accredited calibration laboratory or service provider that provides traceability to a national standard.

The calibration of the reference weight(s) is verified every 5 years by an ISO/IEC 17025 accredited calibration laboratory.

If criteria for the intermediate checks or recertification is not acceptable, the impact on previously reported results is evaluated using the process for evaluation of nonconforming work (See 4.9)

See laboratory SOP ENV-SOP-PITTS-0007 for more information about this process.

#### 5.6.4.2 Reference Materials

The laboratory purchases chemical reference materials used (also known as stock standards) from vendors that are accredited to ISO 17034 or Guide 34. Purchased reference materials must be received with a Certificate of Analysis (COA) where available. If a reference material cannot be purchased with a COA, it must be verified by analysis and comparison to a certified reference material and/or there must be a demonstration of capability for characterization. COA are reviewed for adequacy and retained by the laboratory for future reference.

The laboratory procedure for traceability and use of these materials is provided in laboratory SOP ENV-SOP-PITTS-0010.

This SOP includes each of the following requirements:



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- Procedures for documentation of receipt and tracking. The record of entry includes name of the material, the lot number, receipt date, and expiration date.
- Storage conditions and requirements. Reference materials must be stored separately from samples, extracts, and digestates.
- Requirements to assure that preparations of intermediate or working solutions are recorded and assigned a unique identification number for tracking. Records of preparation include the lot number of the stock standard(s) used, the type and lot number of the solvent, the formulation, date, expiration date, and the preparer's initials. The lot number of the working standards is recorded in the analytical record to provide traceability to the standard preparation record. The preparation record provides traceability to the COA, which is traceable to SI or the national measurement standard.
- A requirement that the expiration dates of prepared standards may not exceed the expiration date of the parent standard. Standards, reference materials, and reagents are not used after their expiration dates unless their reliability is thoroughly documented and verified by the laboratory. If a standard exceeds its expiration date and is not re-certified, the laboratory removes the standard and/or clearly designates it as acceptable for qualitative/troubleshooting purposes only. All prepared standards, reference materials, and reagents are verified to meet the requirements of the test method through routine analyses of quality control samples.
- The second source materials used for verification of instrument calibration are obtained from a different manufacturer or different lot from the same manufacturer.
- Procedures to check reference materials for degradation and replacement of material if degradation or evaporation is suspected.
- Procedures for labeling. At a minimum the container must identify the material, the ID of the material and the expiration date. Original containers should also be labeled with date opened.

## 5.6.4.3 Intermediate Checks

Checks to confirm the calibration status of standards and materials are described in laboratory SOPs. These checks include use of second source standards and reference materials reserved only for the purpose of calibration checks.

## 5.6.4.4 Transport and Storage

The laboratory handles and transports reference standards and materials in a manner that protects the integrity of the materials. Reference standard and material integrity is protected by separation from incompatible materials and/or minimizing exposure to degrading environments or materials. Standards and reference materials are stored separately from samples, extracts, and digestates. All standards are stored according to the manufacturer's recommended conditions. Temperatures colder than the manufacturer's recommendation are acceptable if it does not compromise the integrity of the material (e.g. remains in liquid state and does not freeze solid). In the



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event a standard is made from more than a single source with different storage conditions, the standard will be stored according to the conditions specified in the analytical method.

See the applicable analytical SOPs for specific reference material storage and transport protocols.

## 5.7 Sampling

Sampling refers to the field collection of samples and to subsamples taken by the laboratory for analysis from the field collected sample.

Subsampling procedures are included in each test method SOP or a stand-alone SOP to assure the aliquot used for testing is representative of the field collected sample.

The requirements in the following subsections apply when field sampling is performed by the laboratory.

## 5.7.1 Sampling Plans and SOPs

When the laboratory performs field collection of samples, sampling is carried out in accordance with a written sample plan prepared by the customer or by the laboratory and by relevant sampling SOPs. These documents are made readily accessible at the sampling location. Sampling plans and SOPs are, whenever reasonable, based on appropriate governing methods and addresses the factors to be controlled to ensure the validity of the analytical results.

## 5.7.2 Customer Requested Deviations

When the customer requires deviations, additions, or exclusions from the documented laboratory sampling plan and/or procedure, the laboratory records the client's change request in detail with the sampling record, communicates the change to sampling personnel, and includes this information in the final test report.

## 5.7.3 Recordkeeping

The laboratory assures the sampling record includes the sampling procedure used, any deviations from the procedure, the date and time of sampling, the identification of the sampler, environmental conditions (if relevant), and the sampling location.

## 5.8 Sample Management & Handling

## 5.8.1 Procedures

The laboratory's procedures for sample management and handling are outlined in laboratory SOP ENV-SOP-PITTS-0027.

The procedures in these SOPs are established to maintain the safe handling and integrity of samples from transport, storage, to disposal and during all processing steps in-between; to maintain client confidentiality, and to protect the interests of PAS and its customers.

## 5.8.1.1 Chain of Custody

All samples received by the laboratory must be accompanied with a Chain of Custody (COC) record. The COC provides information about the samples collected and



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submitted for testing and documents the possession of samples from time of collection to receipt by the laboratory.

The COC record must minimally include the following information:

- Client name, address, phone number
- Project Reference
- Client Sample Identification (Client ID)
- Date, Time, and Location of Sampling
- Samplers Name or Initials
- Matrix
- Type of container, and total number collected each sample
- Preservatives
- Analyses Requested
- Mode of collection
- Any special instructions
- The date and time and signature of each sample transfer from time of collection to receipt in the laboratory. When the COC is transported inside the cooler, independent couriers do not sign the COC. Shipping manifests and/or air bills are the records of possession during transport.

A complete and legible COC is required. If the laboratory observes that the COC is incomplete or illegible, the client is contacted for resolution. The COC must be filled out in indelible ink. Personnel correct errors by drawing a single line through the initial entry so the entry is not obscured, entering the correct information, and initialing, and dating the change.

#### 5.8.1.2 Legal Chain of Custody

Legal chain of custody is a chain of custody protocol used for evidentiary or legal purposes. The protocol is followed by the laboratory when requested by customer or where mandated by a regulatory program.

Legal chain of custody (COC) protocol establishes an intact, continuous record of the physical possession*, storage, and disposal of "samples" which includes, sample aliquots, and sample extracts/digestates/distillates.

Legal COC records account for all time periods associated with the samples, and identifies all individuals who physically handled individual samples. Legal COC begins at the point established by legal authority, which is usually at the time the sample containers are provided by the laboratory for sample collect or when sample collection begins.

*A sample is in someone's custody if:

It is in one's physical possession;



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- It is in one's view after being in one's physical possession;
- It has been in one's physical possession and then locked or sealed so that no one can tamper with it; and/or
- It is kept in a secure area, restricted to authorized personnel only.

Refer to laboratory SOP ENV-SOP-PITTS-0028 for more information.

### 5.8.2 Unique Identification

Each sample is assigned a unique identification number by the laboratory (Lab ID) after the sample has been checked and accepted by the laboratory in accordance with the laboratory's sample acceptance policy (See 5.8.3). The Lab ID is affixed to the sample container using a durable label.

The unique identification of samples also applies to subsamples, and prepared samples, such as extracts, digestates, etc.

The lab ID is linked to the field ID (client ID) in the laboratory's record. Both IDs are linked to the testing activities performed on the sample and the documentation records of the test.

Also see 5.8.4.

#### 5.8.3 Sample Receipt Checks and Sample Acceptance Policy

The laboratory checks the condition and integrity of samples on receipt and compares the labels on the sample containers to the COC record. Any problem or discrepancy is recorded. If the problem impacts the suitability of the sample for analysis or if the documentation is incomplete, the client is notified for resolution. Decisions and instructions from the client are maintained in the project record.

#### 5.8.3.1 Sample Receipt Checks

The following checks are performed:

- Verification that the COC is complete and legible.
- Verification that each sample's container label includes the client sample ID, the date and time of collection and the preservative in indelible ink.
- The container type and preservative is appropriate for each test requested.
- Adequate volume is received for each test requested.
- Visual inspection for damage or evidence of tampering.
- Visual inspection for presence of headspace in VOA vials. (VOA = volatile organic analysis).
- Thermal Preservation: For chemical testing methods for which thermal preservation is required, temperature on receipt is acceptable if the measurement is above freezing but <6°C. For samples that are hand-delivered to the laboratory immediately after sample collection, there must be evidence that the chilling process has begun, such as arrival on ice. The requirements for thermal preservation vary based on the scope of testing performed. For example, for</p>



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microbiology, temperature on receipt is acceptable if the measurement is <10°C. Refer to the laboratory's SOP for sample receipt for more information.

- Chemical Preservation
- Holding Time: Sample receiving personnel are trained to recognize tests with tests where the holding time is 48 hours or less and to expedite the log-in of these samples. Except for tests with immediate holding times (15 minutes from time of collection or less), when samples are received out of hold, the laboratory will notify the client and request instruction. If the decision is made to proceed with analysis, the final test report will include notation of this instruction.

## 5.8.3.2 Sample Acceptance Policy

The laboratory maintains a sample acceptance policy in accordance with regulatory guidelines to clearly establish the circumstances in which sample receipt is accepted or rejected. When receipt does not meet acceptance criteria for any one of these conditions, the laboratory must document the noncompliance, contact the customer, and either reject the samples or fully document any decisions to proceed with testing. In accordance with regulatory specifications, test results associated with receipt conditions that do not meet criteria are qualified in the final test report.

All samples received must meet each of the following:

- Be listed on a complete and legible COC.
- Be received in properly labeled sample containers.
- Be received in appropriate containers that identify preservative.
- The COC must include the date and time of collection for each sample.
- The COC must include the test requested for each sample.
- Be in appropriate sample containers with clear documentation of the preservatives used.
- Be received within holding time. Any samples received beyond the holding time will not be processed without prior customer approval.
- Have sufficient sample volume to proceed with the analytical testing. If insufficient sample volume is received, analysis will not proceed without customer approval.
- Be received within appropriate temperature ranges (not frozen but ≤6°C) unless program requirements or customer contractual obligations mandate otherwise. The cooler temperature is recorded directly on the COC. Samples that are delivered to the laboratory immediately after collection are considered acceptable if there is evidence that the chilling process has been started. For example, by the arrival of the samples on ice. If samples arrive that are not compliant with these temperature requirements, the customer will be notified. The analysis will NOT proceed unless otherwise directed by the customer. If less than 72 hours remain in the hold time for the analysis, the analysis may be started while the customer



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is contacted to avoid missing the hold time. Data associated with any deviations from the above sample acceptance policy requirements will be appropriately qualified.

## 5.8.4 Sample Control and Tracking

The samples are controlled and tracked using the Laboratory Information Management System (LIMS). The LIMS stores information about the samples and project. The process of entering information into the LIMS is called login and these procedures are described in laboratory SOP ENV-SOP-PITTS-0033. After log-in, a label is generated and affixed to each sample container. Information on this label, such as the lab ID, links the sample container to the information in LIMS.

At a minimum, the following information is entered during log-in:

- Client Name and Contact Information;
- The laboratory ID linked to the client ID;
- Date and time of sample collection;
- Date and time of sample receipt;
- Matrix;
- Tests Requested.

## 5.8.5 Sample Storage, Handling, and Disposal

The laboratory procedures for sample storage, handling and disposal are detailed in laboratory SOPs ENV-SOP-PITTS-0027 and ENV-SOP-PITTS-0023.

## 5.8.5.1 Sample Storage

The samples are stored according to method and regulatory requirements as per test method SOPs. Samples are stored away from all standards, reagents, or other potential sources of contamination and stored in a manner that prevents cross contamination. Volatile samples are stored separately from other samples. All sample fractions, extracts, leachates, and other sample preparation products are stored in the same manner as actual samples or as specified by the analytical method.

Refrigerated storage areas are maintained at  $\leq$ 6°C (but not frozen) and freezer storage areas are maintained at <-10°C (unless otherwise required per method or program). The temperature of each storage area is checked and documented at least once for each day of use. If the temperature falls outside the acceptable limits, then corrective actions are taken and appropriately documented.

The laboratory is operated under controlled access protocols to ensure sample and data integrity. Visitors must register at the front desk and be properly escorted at all times. Samples are taken to the appropriate storage location immediately after sample receipt and login procedures are completed. All sample storage areas have limited access. Samples are removed from storage areas by designated personnel and returned to the storage areas as soon as possible after the required sample quantity has been taken.



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## 5.8.5.2 Sample Retention and Disposal

The procedures used by the laboratory for sample retention and disposal are detailed in laboratory SOP ENV-SOP-PITTS-0023.

In general, unused sample volume and prepared samples such as extracts, digestates, distillates and leachates (samples) are retained by the laboratory for the period of time necessary to protect the interests of the laboratory and the customer.

Samples may be stored at ambient temperature when all analyses are complete, the hold time is expired, the report has been delivered, and/or when allowed by the customer or program. Samples requiring storage beyond the minimum sample retention time due to special requests or contractual obligations may be stored at ambient temperature unless the laboratory has sufficient capacity and their presence does not compromise the integrity of other samples.

After this period expires, non-hazardous samples are properly disposed of as non-hazardous waste. The preferred method for disposition of hazardous samples is to return the excess sample to the customer.

## 5.9 Assuring the Quality of Test Results

## 5.9.1 Quality Control (QC) Procedures

The laboratory monitors the validity and reliability of test results using quality control (QC) samples that are prepared and analyzed concurrently with field samples in the same manner as field samples. QC results are always associated to and reported with the field samples they were prepared and analyzed with from the same preparation or analytical batch. See the glossary for definition of preparation and analytical batch.

The results of QC performed during the testing process are used by the laboratory to assure the results of analysis are consistent, comparable, accurate, and/or precise within a specified limit. When the results are not within acceptance criteria or expectations for method performance, correction and corrective action(s) are taken. These actions may include retesting or reporting of data with qualification to alert the end user of the situation.

Other QC measures performed include the use of certified reference materials (see 5.6.2), participation in interlaboratory proficiency testing (see 5.9.1.1), verification that formulae used for reduction of data and calculation of results is accurate (see 5.9.3), on-going monitoring of environmental conditions that could impact test results (see 5.3.2), and evaluation and verification of method selectivity and sensitivity (see 5.4.5).

QC results are also used by the laboratory to monitor performance statistical trends over time and to establish acceptance criteria when no method or regulatory criteria exist. (see 5.9.1.4).

#### 5.9.1.1 Essential QC

Although the general principles of QC for the testing process apply to all testing, the QC protocol used for each test depends on the type of test performed.

QC protocol used by the laboratory to monitor the validity of the test are specified in test method SOPs. The SOP includes QC type, frequency, acceptance criteria, corrective actions, and procedures for reporting of nonconforming work.



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These requirements in the SOP conform to the reference method and any applicable regulations or certification and accreditation program requirement for which results of the test are used. When a project requires more stringent QC protocol than specified in the SOP, project specification is followed. When the project requires less stringent QC protocol, the project specification may be followed as an authorized departure from the SOP when the project specifications meet the requirements in the mandated method and any regulatory compliance requirements for which the data will be used.

The following are examples of essential QC for Chemistry:

## 5.9.1.1.1 Second Source Standard (ICV/QCS)

The second source standard is a standard obtained from a different vendor than the vendor of the standards used for calibration. It is a positive control used to verify the accuracy of a new calibration relative to the purity of the standards used for calibration. This check is referred to in test method and quality system standards as the initial calibration verification (ICV) or quality control sample (QCS). The second source standard is analyzed immediately after the calibration and before analysis of any samples. When the ICV is not within acceptance criteria, a problem with the purity or preparation of the standards may be indicated.

# 5.9.1.1.2 Continuing Calibration Verification (CCV)

CCV is to determine if the analytical response has significantly changed since initial calibration. If the response of the CCV is within criteria, the calibration is considered valid. If not, there is a problem that requires further investigation. Actions taken are technology and method specific.

## 5.9.1.1.3 Method Blank (MB) / Other Blanks

A method blank is a negative control used to assess for contamination during the prep/analysis process. The MB consists of a clean matrix, similar to the associated samples that is known to be free of analytes of interest. The MB is processed with and carried through all preparation and analytical steps as the associated samples.

In general, contamination is suspected when the target analyte is detected in the MB above the reporting limit. Some programs may require evaluation of the MB to ¹/₂ the reporting limit or the detection limit. When contamination is evident, the source is investigated and corrections are taken to reduce or eliminate it. Analytical results associated with MB that does not meet criteria are qualified in the final test report.

Other types of blanks that serve as negative controls in the process may include:



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- Trip Blanks (VOA)
- Storage Blanks
- Equipment Blanks
- Field Blanks
- Calibration Blanks
- Cleanup Blanks
- Instrument Blanks

## 5.9.1.1.4 Laboratory Control Sample (LCS)

The LCS is positive control used to measure the accuracy of process in a blank matrix. The LCS is spiked by the laboratory with a known amount of analyte. The spike is a standard solution that is pre-made or prepared from a certified reference standard. The LCS is processed with and carried through all preparation and analytical steps as the associated samples.

When the percent recovery (%R) of the LCS is within the established control limit, sufficient accuracy has been achieved. If not, the source of the problem is investigated and corrected and the procedure may be repeated. Analytical results associated with LCS that does not meet criteria are qualified in the final test report.

## 5.9.1.1.5 Matrix Spike (MS) and Matrix Spike Duplicate (MSD)

Matrix spikes measures the effect the sample matrix has on precision and accuracy of the determinative test method. The MS and MSD are replicates of a client sample that is spiked with known amount of target analyte.

Due to the heterogeneity of matrices even of the same general matrix type, matrix spike results mostly provide information on the effect of the matrix to the client whose sample was used and on samples of the same matrix from the same sampling site. Therefore, MS should be client-specific when the impact of matrix on accuracy and precision is a project data quality objective. When there is not a client-specified MS for any sample in the batch, the laboratory randomly selects a sample from the batch; the sample selected at random is called a "batch" matrix spike.

The MS/MSD results for percent recovery and relative percent difference are checked against control limits. Because the performance of matrix spikes is matrix-dependent, the result of the matrix spike is not used to determine the acceptability of the test.

# 5.9.1.1.6 Sample Duplicate (SD)

A sample duplicate is a second replicate of sample that is prepared and analyzed in the laboratory along another replicate. The SD is used to measure precision.



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The relative percent difference between replicates are evaluated against the method or laboratory derived criteria for relative percent difference (RPD), when this criterion is applicable. If RPD is not met, associated test results are reported with qualification.

## 5.9.1.1.7 Surrogates

Surrogates are compounds that mimic the chemistry of target analytes but are not expected to occur naturally in real world samples. Surrogates are added to each sample and matrix QC samples (MS, MSD, SD) at known concentration to measure the impact of the matrix on the accuracy of method performance. Surrogates are also added to the positive and negative control samples (MB, LCS) to evaluate performance in a clean matrix, and included in the calibration standards and calibration check standards.

The percent recovery of surrogates is evaluated against methodspecified limits or statistically derived in-house limits. Projectspecific limits and/or program-specific limits are used when required. Results with surrogate recovery out of limits in samples are reported with qualification. Samples with surrogate failures can also be re-extracted and/or re-analyzed to confirm that the out-ofcontrol value was caused by the matrix of the sample and not by some other systematic error.

# 5.9.1.1.8 Internal Standards

Internal Standards are compounds not expected to occur naturally in field samples. They are added to every standard and sample at a known concentration prior to analysis for the purpose of adjusting the response factor used in quantifying target analytes. The laboratory follows specific guidelines for the treatment of internal standard recoveries and further information can be found in the applicable laboratory SOP.

## 5.9.1.1.9 QC Acceptance Criteria and Control Limits

The QC acceptance criteria are specified in test method SOPs. The criteria in the SOP are based on the requirements in the published test method or regulatory program. When there are no established acceptance criteria, the laboratory develops acceptance criteria in accordance with recognized industry standards.

Some methods and programs require the laboratory to develop and use control limits for LCS, MS/MSD and surrogate evaluation. In laboratory developed limits are referred to as "in-house" control limits. In-house control limits represent  $\pm$  3 Standard Deviations (99% confidence level) from the average recovery of at least 20 data points generated using the same preparation and analytical procedure in a similar matrix.



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# 5.9.1.2 Proficiency Testing (PT)

The laboratory participates in interlaboratory proficiency testing (PT) studies to measure performance of the test method and to identify or solve analytical problems. PT samples measure laboratory performance through the analysis of unknown samples provided by an external source.

The PT samples are obtained from accredited proficiency testing providers (PTP) and handled as field samples which means they are included in the laboratory's normal analytical processes and do not receive extraordinary attention due to their nature.

The laboratory does not share PT samples with other laboratories, does not communicate with other laboratories regarding current PT sample results during the duration of the study, and does not attempt to obtain the assigned value of any PT sample from the PT provider.

The laboratory initiates an investigation and corrective action plan whenever PT results are deemed unacceptable by the PT provider.

The frequency of PT participation is based on the certification and accreditation requirements held by the laboratory.

## 5.9.2 QC Corrective Action

When the results of QC are not within acceptance criteria or expectations for method performance, correction and corrective action(s) are taken per the specifications in the test method SOP. These actions may include retesting or reporting of data with qualification to alert the end user of the situation.

## 5.9.3 Data Review

The laboratory uses a tiered system for data review. The tiered process provides sequential checks to verify data transfer is complete; manual calculations, if performed, are correct, manual integrations are appropriate and documented, calibration and QC requirements are met, appropriate corrective action was taken when required, test results are properly qualified, process and test method SOPs were followed, project specific requirements were met, when applicable, and the test report is complete.

The sequential process includes three tiers referred to as primary review, secondary review, and administrative/completeness review.

Detailed procedures for the data review process are described in laboratory SOP ENV-SOP-PITTS-0003. The general expectations for the tiered review process are described in the following sections:

## 5.9.3.1 Primary Review

Primary review is performed by the individual that performed the task. All laboratory personnel are responsible for review of their work product to assure it is complete, accurate, documented, and consistent with policy and SOPs.

Checks performed during primary review include but are not limited to:

Verification that data transfer and acquisition is complete



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- Manual calculations, if performed, are documented and accurate
- Manual integrations, if performed, are documented and comply with SOP ENV-SOP-CORQ-006 *Manual Integration*
- Calibration and QC criteria were met, and/or proper correction and corrective actions were taken, and data and test results associated with QC and criteria exceptions are properly qualified
- Work is consistent with SOPs and any other relevant instructional document such as SWI, program requirements, or project QAPP.

### 5.9.3.2 Secondary Review

Secondary review is performed by qualified peer or supervisor. Secondary review is essentially a repeat of the checks performed during primary review by another person. In addition to the checks of primary review, secondary review includes chromatography review to check the accuracy of quantitative analyte identification.

### 5.9.3.3 Completeness Review

Completeness review is an administrative review performed prior to release of the test report to the customer. Completeness review verifies that the final test report is complete and meets project specification. This review also assures that information necessary for the client's interpretation of results are explained in the case narrative or footnoted in the test report.

## 5.9.3.4 Data Audits

In addition to the 3 tier data review process, test reports may be audited by local QA to verify compliance with SOPs and to check for data integrity, technical accuracy, and regulatory compliance. These audits are not usually done prior to issuance of the test report to the customer. The reports chosen for the data audits are selected at random.

If any problems with the data or test results are found during the data audit, the impact of the nonconforming work is evaluated using the process described in Section 4.9.

Also see Section 4.14 for internal audits.

## 5.10 Reporting

#### 5.10.1 General Requirements

The laboratory reports results of testing in a way that assures the results are clear, and unambiguous. All data and results are reviewed prior to reporting to assure the results reported are accurate and complete.

Test results are summarized in test reports that include all information necessary for the customer's interpretation of the test results. Additional information necessary to clarify the data or disclose nonconformance, exceptions, or deviations that occurred during the analytical process are also reported to the customer in the test report.



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The specifications for test reports and electronic data deliverables (EDD) are established between the laboratory and the customer at the time the request for analytical services is initiated. The report specifications include the test report format, protocol for the reporting limit (RL), conventions for the reporting of results less than the limit of quantitation (LOQ), and specification for the use of project or program specific data qualifiers. Information about review of analytical service requests is provided in Section 4.4.

#### 5.10.2 Test Reports: Required Items

Test Reports are prepared by the laboratory at the end of the testing process. The format of the report depends on the level of reporting requested by the customer. The laboratory offers a variety of standardized test report formats and can also provide custom test report formats, when necessary.

The level of detail required in the test report depends on the customer's needs for data verification, validation, and usability assessments that occur after the laboratory releases the test report to the customer. The test report formats offered by the laboratory provide gradient levels of detail to meet the unique needs of each customer. The laboratory project manager helps the customer select the test report format that best meets their needs. When a specific report format or protocol is required for a regulatory or program compliance, the laboratory project manager must ensure the test report selected meets those requirements.

Every test report issued by the laboratory includes each of the following items:

- a) Title
- b) Name and phone number of a point of contact from the laboratory issuing the report.
- c) Name and address of the laboratory where testing was performed. When testing is done at multiple locations within network (IRWO), the report must clearly identify which network laboratory performed each test and must include the physical address of each laboratory.
- d) Unique identification of the test report and an identifier on each page of the report to link each page to the test report and clear identification of the end of the report.
- e) The name and address of the customer
- f) Identification of test methods used
- g) Cross reference between client sample identification number (Sample ID) and the laboratory's identification number for the sample (Lab ID) to provide unambiguous identification of samples.
- h) The date of receipt of samples, condition of samples on receipt, and identification of any instance where receipt of the samples did not meet sample acceptance criteria.
- i) Date and times of sample collection, receipt, preparation, and analysis.
- j) Test results and units of measurement, and qualification of results associated with QC criteria exceptions, and identification of reported results outside of the calibration range.
- k) Name, title, signature of the person(s) authorizing release of the test report and date of release.
- l) A statement that the results in the test report relate only to the items tested.



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m) Statement that the test report may not be reproduced except in full without written approval from the laboratory.

#### 5.10.3 Test Reports: Supplemental Items

#### 5.10.3.1 Supplemental Requirements

The following items are included in the test report when required or relevant:

- a) Explanation of departure from test method SOPs including, what the departure was and why it was necessary.
- b) Statistical methods used. (Required for Whole Effluent Toxicity)
- c) For solid samples, specification that results are reported on a dry weight or wet weight basis.
- d) Signed Affidavit, when required by client or regulatory agency.
- e) A statement of compliance / non-compliance with requirements or specifications (client, program, or standard) that includes identification of test results that did not meet acceptance criteria.
- f) When requested by the client, statement of estimated measurement uncertainty. In general, for environmental testing, estimated uncertainty of measurement is extrapolated from LCS control limits. Control limits incorporate the expected variation of the data derived from the laboratory's procedure. When the control limits are specified by the test method or regulatory program, the control limits represent the expected variation of the test method and/or matrices for which the test method was designed.
- g) Opinions and Interpretations.
- h) If a claim of accreditation/certification is included in the test report, identification of any test methods or analytes for which accreditation/certification is not held by the laboratory if the accrediting body offers accreditation/certification for the test method/analyte. The fields of accreditation/certification vary between agencies and it cannot be presumed that because accreditation/certification is not held that it is offered or required.
- i) Certification Information, including certificate number and issuing body.

#### 5.10.3.2 Test Reports: Sampling Information

The following items are included in the test report when samples are collected by the laboratory or when this information is necessary for the interpretation of test results:

- a) Date of Sampling.
- b) Unambiguous identification of material samples.
- c) Location of sampling including and diagrams, sketches, or photographs.
- d) Reference to the sampling plan and procedures used.
- e) Details of environmental conditions at time of sample that may impact test results.



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f) Any standard or other specification for the sampling method or procedure, and deviations, additions to or exclusions from the specification concerned.

### 5.10.4 Calibration Certificates

The laboratory does not perform calibration activities for its customers and calibration certificates are not offered or issued.

#### 5.10.5 Opinions and Interpretations

The laboratory provides objective data and information to its customers of sufficient detail for their interpretation and decision making. Objective data and information is based solely on fact and does not attempt to explain the meaning (interpret) or offer a view or judgement (opinion). Sometimes the customer may request the laboratory provide opinion or interpretation to assist them with their decisions about the data.

When opinions and interpretations are included in the test report, the laboratory will document the basis upon which the opinions and interpretations have been made and clearly identify this content as opinion or interpretation in the test report.

Examples of opinion and interpretation include but are not limited to:

- The laboratory's viewpoint on how a nonconformance impacts the quality of the data or usability of results.
- The laboratory's judgment of fulfillment of contractual requirements.
- Recommendations for how the customer should use the test results and information.
- Suggestions or guidance to the customer for improvement.

When opinions or interpretations are verbally discussed with the customer, the content of these conversations is summarized by the laboratory and kept in the project record.

#### 5.10.6 Subcontractor Reports

When analytical work has been subcontracted to an organization external to PAS, the test report from the subcontractor is included in its entirety as an amendment to the final test report.

Note: Test results for analytical work performed within the PAS network may be are merged into a single test report. The test report issued clearly identifies the location and address of each network location that performed testing and which tests they performed. (See 5.10.2)

#### 5.10.7 Electronic Transmission of Results

When test results and/or reports are submitted to the customer through electronic transmission, follow the procedures established in this manual for confidentiality and protection of data.

#### 5.10.8 Format of Test Reports

The test formats offered by the laboratory are designed to accommodate each type of analytical test method carried out by the laboratory and to minimize the possibility of misunderstanding or misuse of analytical results. The format of electronic data deliverables (EDD) follow the specifications for the EDD.



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#### 5.10.9 Amendments to Test Reports

Test reports that are revised or amended by the laboratory after date of release of the final test report to the customer are issued as a new test report that is clearly identified as an amendment or revision and that includes a reference to the originally issued final test report.

The customer is the organization doing business with PAS external to PAS.

Changes made to test results and data before the final test report is issued to the customer are not amendments or revisions, these are corrections to errors found during the laboratory's data verification and review process,

The laboratory's procedure for report amendments and revision are outlined in laboratory SOP ENV-SOP-PITTS-0033.

### 6.0 **REVISION HISTORY**

This Version: ENV-MAN-PITTS-0001 Rev 01

Section	Description of Change
All	This version is a complete rewrite of the document this version supersedes.

This document supersedes the following documents:

Document Number	Title	Version
ENV-MAN-PITTS-0001	Quality Manual	00



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### 7.0 APPENDICES

### 7.1 Appendix A: Certification / Accreditation Listing

The certifications / accreditation lists provided in this manual represent those that were held by the named location on the effective date of this manual. This information is subject to change without notice and must not be considered valid proof of certification or accreditation status. Current certificates are maintained by Local QA and a copy of the certificate is posted to PAS's eDMS Portal for access by all PAS employees. External parties should contact the laboratory for the most current information.

### 7.1.1 PAS-Pittsburgh

Authority	Certificate Number
Pennsylvania	02-00538
Connecticut	PH-0263
Virginia	8122
New Hampshire	299415
New Jersey	PA026
New York	11815
South Carolina	89009003
Texas	T104704453
West Virginia	395



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## 7.2 Appendix B: Capability Listing

The capabilities listed in this Appendix were held by the location referenced on the effective date of this manual. This information is subject to change without notice. External parties should contact the laboratory for the most current information.

Table Legend:

- DW = Drinking Water
- NPW = Non-Potable Water
- SCM = Solid and Chemical Materials
- Waste = Non-Aqueous Phase Liquid (NAPL), Oil
- Tissue = Biota and Tissue

### 7.2.1 PAS-Pittsburgh

Parameter	Method	Matrices							
		Air	DW	NPW	SCM	Waste	Tissue	Product	
Anions by IC	9056			x					
Cations by IC	Dionex Tech Note 10			x	x				
TOC	9060 and 5310C			x					
рН	SM4500 H+B			x					
Low Level Volatile Fatty Acids	AM23G			x	x				
VOC's in Vapor	AM4.02	x							
Organic Compunds in Vapor (Light hydrocarbons, Chlorinated volatiles, GRO,									
DRO)	AM4.02	х							
Hydrogen by Bubble Strip	SM9/AM20GAx	x							
Light Hydrocarbons by Bubble Strip	SM9/AM20GAx			x					
Methane, Ethane, Ethene, Propane, Propene, iso-Butane, n-Butane, Acetylene	PM01/AM20GAx			x					
Methane, Ethane, Ethene, Propane, Propene, iso-Butane, n-Butane	RSK175M			x					
Permanent Gases (Oxygen, Nitrogen, Carbon Dioxide, Carbon Monoxide)	PM01/AM20GAx			x					
Permanent Gases by Bubble Strip	PM01/AM20GAx	x							
Permanent Gases in Vapor	SM9/AM20GAx	x							
TIC	PM01/AM20GAx			x					
Whole Oil (C3-C36)	ASTM D3328							x	
Full Scan (C8-C40)	ASTM D5739 (GC/MS)			x	x			x	



Parameter	Method	Matrices							
		Air	DW	NPW	SCM	Waste	Tissue	Product	
Organic Lead and Lead									
Scavengers	GC-ECD							x	
PIANO (C3-C12)	GC/MS			х	х			х	
Carbon Specific Isotope									
Analysis (CSIA)	AM24			х					
Methane, Ethane, Ethene,									
Propane, iso-Butane, n-Butane	ASTM D8028			х					
Parent and Alkylated PAHs	8270 Modified			Х				х	
Oxygenated Blending Agents	EPA 1624 Modified							х	
Oxygenates on Product									
(GC/MS SIM)	1625 Modified							x	



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### 7.3 Appendix C: Glossary

This glossary provides common terms and definitions used in the laboratory. It is not intended to be a complete list of all terms and definitions used. The definitions have been compiled mostly from the TNI Standard and DoD QSM. Although this information has been reproduced with care, errors cannot be entirely excluded. Definitions for the same term also vary between sources. When the meaning of a term used in a laboratory document is different from this glossary or when the glossary does not include the term, the term and definition is included or defined in context in the laboratory document.

Term	Definition
3P Program	PAS-The continuous improvement program used by PAS that focuses on Process, Productivity, and Performance.
Acceptance Criteria	TNI- Specified limits placed on characteristics of an item, process, or service defined in requirement documents.
Accreditation	TNI- The process by which an agency or organization evaluates and recognizes a laboratory as meeting certain predetermined qualifications or standards, thereby accrediting the laboratory. DoD- Refers to accreditation in accordance with the DoD ELAP.
Accreditation Body (AB)	TNI- The organization having responsibility and accountability for environmental laboratory accreditation and which grants accreditation under this program. DoD- Entities recognized in accordance with the DoD-ELAP that are required to operate in accordance with ISO/IEC 17011, <i>Conformity assessment: General requirements for accreditation bodies accrediting conformity assessment bodies.</i> The AB must be a signatory, in good standing, to the International Laboratory Accreditation Cooperation (ILAC) mutual recognition arrangement (MRA) that verifies, by evaluation and peer assessment, that its signatory members are in full compliance with ISO/IEC 17011 and that its accredited laboratories comply with ISO/IEC 17025.
Accuracy	TNI- The degree of agreement between an observed value and an accepted reference value. Accuracy includes a combination of random error (precision) and systematic error (bias) components that are due to sampling and analytical operations; a data quality indicator.
Activity, Absolute	TNI- Rate of nuclear decay occurring in a body of material, equal to the number of nuclear disintegrations per unit time. NOTE: Activity (absolute) may be expressed in becquerels (Bq), curies (Ci), or disintegrations per minute (dpm), and multiples or submultiples of these units.
Activity, Areic	TNI- Quotient of the activity of a body of material and its associated area.
Activity, Massic	TNI- Quotient of the activity of a body of material and its mass; also called specific activity.
Activity, Volumic	TNI- Quotient of the activity of a body of material and its volume; also called activity concentration. NOTE: In this module [TNI Volume 1, Module 6], unless otherwise stated, references to activity shall include absolute activity, areic activity, massic activity, and volumic activity.
Activity Reference Date	TNI- The date (and time, as appropriate to the half-life of the radionuclide) to which a reported activity result is calculated. NOTE: The sample collection date is most frequently used as the Activity Reference Date for environmental measurements, but different programs may specify other points in time for correction of results for decay and ingrowth.
Aliquot	DoD- A discrete, measured, representative portion of a sample taken for analysis.
American Society for Testing and Materials (ASTM)	An international standards organization that develops and publishes voluntary consensus standards for a wide range of materials, products, systems and services.
Analysis	DoD- A combination of sample preparation and instrument determination.
Analysis Code (Acode)	All the set parameters of a test, such as Analytes, Method, Detection Limits and Price.
Analysis Sequence	A compilation of all samples, standards and quality control samples run during a specific amount of time on a particular instrument in the order they are analyzed.
Analyst	TNI- The designated individual who performs the "hands-on" analytical methods and associated techniques and who is the one responsible for applying required laboratory practices and other pertinent quality controls to meet the required level of quality.



Analyte	TNI- A substance, organism, physical parameter, property, or chemical constituent(s) for which an
	environmental sample is being analyzed.
	DoD- The specific chemicals or components for which a sample is analyzed; it may be a group of
	chemicals that belong to the same chemical family and are analyzed together.
Analytical Method	DoD- A formal process that identifies and quantifies the chemical components of interest (target
	analytes) in a sample.
Analytical Uncertainty	TNI- A subset of Measurement Uncertainty that includes all laboratory activities performed as part of the
	analysis.
Aliquot	DoD- A discrete, measured, representative portion of a sample taken for analysis.
Annual (or Annually)	Defined by PAS as every 12 months $\pm$ 30 days.
Assessment	TNI - The evaluation process used to measure or establish the performance, effectiveness, and
	conformance of an organization and/or its system to defined criteria (to the standards and requirements
	of laboratory accreditation).
	DoD- An all-inclusive term used to denote any of the following: audit, performance evaluation, peer
	review, inspection, or surveillance conducted on-site.
Atomic Absorption	Instrument used to measure concentration in metals samples.
Spectrometer	1
Atomization	A process in which a sample is converted to free atoms.
Audit	TNI- A systematic and independent examination of facilities, equipment, personnel, training, procedures,
Tittit	record-keeping, data validation, data management, and reporting aspects of a system to determine
	whether QA/QC and technical activities are being conducted as planned and whether these activities will
	effectively achieve quality objectives.
Batch	TNI- Environmental samples that are prepared and/or analyzed together with the same process and
Daten	personnel, using the same lot(s) of reagents. A <b>preparation batch</b> is composed of one to 20
	environmental samples of the same quality systems matrix, meeting the above-mentioned criteria and
	with a maximum time between the start of processing of the first and last sample in the batch to be 24
	hours or the time-frame specified by the regulatory program. An <b>analytical batch</b> is composed of
	prepared environmental samples (extracts, digestates or concentrates) which are analyzed together as a
	group. An analytical batch can include prepared samples originating from various quality system matrices
	and can exceed 20 samples.
Batch, Radiation	TNI- An RMB is composed of 1 to 20 environmental samples that are counted directly without
Measurements (RMB)	preliminary physical or chemical processing that affects the outcome of the test (e.g., non-destructive
	gamma spectrometry, alpha/beta counting of air filters, or swipes on gas proportional detectors). The
	samples in an RMB share similar physical and chemical parameter, and analytical configurations (e.g.,
	analytes, geometry, calibration, and background corrections). The maximum time between the start of
	processing of the first and last in an RMB is 14 calendar days.
Bias	TNI- The systematic or persistent distortion of a measurement process, which causes errors in one
	direction (i.e., the expected sample measurement is different from the sample's true value).
Blank	TNI and DoD- A sample that has not been exposed to the analyzed sample stream in order to monitor
	contamination during sampling, transport, storage or analysis. The blank is subjected to the usual
	analytical and measurement process to establish a zero baseline or background value and is sometimes
	used to adjust or correct routine analytical results (See Method Blank).
	DoD- Blank samples are negative control samples, which typically include field blank samples (e.g., trip
	blank, equipment (rinsate) blank, and temperature blank) and laboratory blank samples (e.g., method
	blank, reagent blank, instrument blank, calibration blank, and storage blank).
Blind Sample	A sub-sample for analysis with a composition known to the submitter. The analyst/laboratory may know
	the identity of the sample but not its composition. It is used to test the analyst's or laboratory's
	proficiency in the execution of the measurement process.
BNA (Base Neutral Acid	A list of semi-volatile compounds typically analyzed by mass spectrometry methods. Named for the way
compounds)	they can be extracted out of environmental samples in an acidic, basic or neutral environment.
BOD (Biochemical	Chemical procedure for determining how fast biological organisms use up oxygen in a body of water.
Oxygen Demand)	



Calibration	TNI- A set of operations that establish, under specified conditions, the relationship between values of quantities indicated by a measuring instrument or measuring system, or values represented by a material measure or a reference material, and the corresponding values realized by standards. 1) In calibration of support equipment, the values realized by standards are established through the use of reference
	standards that are traceable to the International System of Units (SI); 2) In calibration according to test
	methods, the values realized by standards are typically established through the use of Reference Materials
	that are either purchased by the laboratory with a certificate of analysis or purity, or prepared by the
	laboratory using support equipment that has been calibrated or verified to meet specifications.
Calibration Curve	TNI- The mathematical relationship between the known values, such as concentrations, of a series of calibration standards and their instrument response.
Calibration Method	A defined technical procedure for performing a calibration.
Calibration Range	DoD- The range of values (concentrations) between the lowest and highest calibration standards of a
	multi-level calibration curve. For metals analysis with a single-point calibration, the low-level calibration
	check standard and the high standard establish the linear calibration range, which lies within the linear dynamic range.
Calibration Standard	TNI- A substance or reference material used for calibration.
Certified Reference	TNI- Reference material accompanied by a certificate, having a value, measurement uncertainty, and
Material (CRM)	stated metrological traceability chain to a national metrology institute.
Chain of Custody	An unbroken trail of accountability that verifies the physical security of samples, data, and records.
Chain of Custody Form	TNI- Record that documents the possession of the samples from the time of collection to receipt in the
(COC)	laboratory. This record generally includes: the number and type of containers; the mode of collection, the
	collector, time of collection; preservation; and requested analyses.
Chemical Oxygen Demand (COD)	A test commonly used to indirectly measure the amount of organic compounds in water.
Client (referred to by	Any individual or organization for whom items or services are furnished or work performed in response
ISO as Customer)	to defined requirements and expectations.
Code of Federal	A codification of the general and permanent rules published in the Federal Register by agencies of the
Regulations (CFR)	federal government.
Comparability	An assessment of the confidence with which one data set can be compared to another. Comparable data are produced through the use of standardized procedures and techniques.
Completeness	The percent of valid data obtained from a measurement system compared to the amount of valid data
Completeness	expected under normal conditions. The equation for completeness is:
	% Completeness = (Valid Data Points/Expected Data Points)*100
Confirmation	TNI- Verification of the identity of a component through the use of an approach with a different
	scientific principle from the original method. These may include, but are not limited to: second-column
	confirmation; alternate wavelength; derivatization; mass spectral interpretation; alternative detectors; or
	additional cleanup procedures.
	DoD- Includes verification of the identity and quantity of the analyte being measured by another means (e.g., by another determinative method, technology, or column). Additional cleanup procedures alone are
	not considered confirmation techniques.
Conformance	An affirmative indication or judgment that a product or service has met the requirements of the relevant
	specifications, contract, or regulation; also the state of meeting the requirements.
Congener	A member of a class of related chemical compounds (e.g., PCBs, PCDDs).
Consensus Standard	DoD- A standard established by a group representing a cross-section of a particular industry or trade, or a
	part thereof.
Continuing Calibration	A blank sample used to monitor the cleanliness of an analytical system at a frequency determined by the
Blank (CCB)	analytical method.
Continuing Calibration	Compounds listed in mass spectrometry methods that are used to evaluate an instrument calibration from
Check Compounds (CCC)	the standpoint of the integrity of the system. High variability would suggest leaks or active sites on the instrument column.
Continuing Calibration	DoD- The verification of the initial calibration. Required prior to sample analysis and at periodic
Verification	intervals. Continuing calibration verification applies to both external and internal standard calibration
	techniques, as well as to linear and non-linear calibration models.
Continuing Calibration	Also referred to as a Calibration Verification Standard (CVS) in some methods, it is a standard used to
Verification (CCV)	verify the initial calibration of compounds in an analytical method. CCVs are analyzed at a frequency
Standard	determined by the analytical method.



Cartineer Entering	
Continuous Emission Monitor (CEM)	A flue gas analyzer designed for fixed use in checking for environmental pollutants.
Continuous	The delineation of tasks for a given laboratory department or committee to achieve the goals of that
Improvement Plan (CIP)	department.
Contract Laboratory	A national network of EPA personnel, commercial labs, and support contractors whose fundamental
Program (CLP)	mission is to provide data of known and documented quality.
Contract Required	Detection limit that is required for EPA Contract Laboratory Program (CLP) contracts.
Detection Limit (CRDL)	
Contract Required	Quantitation limit (reporting limit) that is required for EPA Contract Laboratory Program (CLP)
Quantitation Limit	contracts.
(CRQL)	
Control Chart	A graphic representation of a series of test results, together with limits within which results are expected when the system is in a state of statistical control (see definition for Control Limit)
Control Limit	A range within which specified measurement results must fall to verify that the analytical system is in
	control. Control limit exceedances may require corrective action or require investigation and flagging of
	non-conforming data.
Correction	DoD- Action taken to eliminate a detected non-conformity.
Corrective Action	DoD- The action taken to eliminate the causes of an existing non-conformity, defect, or other
	undesirable situation in order to prevent recurrence. A root cause analysis may not be necessary in all cases.
Corrective and	The primary management tools for bringing improvements to the quality system, to the management
Preventative Action	of the quality system's collective processes, and to the products or services delivered which are an
(CAPA)	output of established systems and processes.
Critical Value	TNI- Value to which a measurement result is compared to make a detection decision (also known as
	critical level or decision level). NOTE: The Critical Value is designed to give a specified low probability a
	of false detection in an analyte-free sample, which implies that a result that exceeds the Critical Value,
	gives high confidence $(1 - \alpha)$ that the radionuclide is actually present in the material analyzed. For
	radiometric methods, $\alpha$ is often set at 0.05.
Customer	DoD- Any individual or organization for which products or services are furnished or work performed in
	response to defined requirements and expectations.
Data Integrity	TNI- The condition that exists when data are sound, correct, and complete, and accurately reflect activities and requirements.
Data Quality Objective	Systematic strategic planning tool based on the scientific method that identifies and defines the type,
(DQO)	quality, and quantity of data needed to satisfy a specified use or end user.
Data Reduction	TNI- The process of transforming the number of data items by arithmetic or statistical calculation,
D. C	standard curves, and concentration factors, and collating them into a more usable form.
Definitive Data	DoD- Analytical data of known quantity and quality. The levels of data quality on precision and bias
D	meet the requirements for the decision to be made. Data that is suitable for final decision-making.
Demonstration of	TNI- A procedure to establish the ability of the analyst to generate analytical results of acceptable
Capability (DOC)	accuracy and precision.
	DoD- A procedure to establish the ability of the analyst to generate analytical results by a specific method
Department of Defense	that meet measurement quality objectives (e.g., for precision and bias). An executive branch department of the federal government of the United States charged with
(DoD)	coordinating and supervising all agencies and functions of the government concerned directly with
(DOD)	national security.
Detection Limit (DL)	DoD- The smallest analyte concentration that can be demonstrated to be different than zero or a blank
Detection Family	concentration with 99% confidence. At the DL, the false positive rate (Type 1 error) is 1%. A DL may
	be used as the lowest concentration for reliably reporting a detection of a specific analyte in a specific
	matrix with a specific method with 99% confidence.
Detection Limit (DL) for	TNI- Laboratories that analyze drinking-water samples for SDWA compliance monitoring must use
Safe Drinking Water Act	methods that provide sufficient detection capability to meet the detection limit requirements established
(SDWA) Compliance	in 40 CFR 141. The SDWA DL for radioactivity is defined in 40 CFR Part 141.25.c as the radionuclide
( , , ,	concentration, which can be counted with a precision of plus or minus 100% at the 95% confidence level
	(1.96 $\sigma$ where $\sigma$ is the standard deviation of the net counting rate of the sample).
Deuterated Monitoring	DoD- SIM specific surrogates as specified for GC/MS SIM analysis.
Compounds (DMCs)	A more of a more and that denote all the characteristic and the second state of the se
Diesel Range Organics	A range of compounds that denote all the characteristic compounds that make up diesel fuel (range can
(DRO)	be state or program specific).



Digestion	DoD- A process in which a sample is treated (usually in conjunction with heat and acid) to convert the target analytes in the sample to a more easily measured form.
Document Control	The act of ensuring that documents (and revisions thereto) are proposed, reviewed for accuracy,
Document Control	approved for release by authorized personnel, distributed properly and controlled to ensure use of the
	correct version at the location where the prescribed activity is performed.
Documents	DoD- Written components of the laboratory management system (e.g., policies, procedures, and
Documents	instructions).
Dry Weight	The weight after drying in an oven at a specified temperature.
Duplicate (also known as	The analyses or measurements of the variable of interest performed identically on two subsamples of the
Replicate or Laboratory	same sample. The results of duplicate analyses are used to evaluate analytical or measurement precision
Duplicate)	but not the precision of sampling, preservation or storage internal to the laboratory.
Electron Capture	Device used in GC methods to detect compounds that absorb electrons (e.g., PCB compounds).
Detector (ECD)	
Electronic Data	A summary of environmental data (usually in spreadsheet form) which clients request for ease of data
Deliverable (EDD)	review and comparison to historical results.
Eluent	A solvent used to carry the components of a mixture through a stationary phase.
Elute	To extract, specifically, to remove (absorbed material) from an absorbent by means of a solvent.
Elution	A process in which solutes are washed through a stationary phase by movement of a mobile phase.
Environmental Data	DoD- Any measurements or information that describe environmental processes, locations, or conditions
	ecological or health effects and consequences; or the performance of environmental technology.
Environmental	The process of measuring or collecting environmental data.
Monitoring	
Environmental	An agency of the federal government of the United States which was created for the purpose of
Protection Agency	protecting human health and the environment by writing and enforcing regulations based on laws passed
(EPA)	by Congress.
Environmental Sample	A representative sample of any material (aqueous, non-aqueous, or multimedia) collected from any source
	for which determination of composition or contamination is requested or required. Environmental
	samples can generally be classified as follows:
	<ul> <li>Non Potable Water (Includes surface water, ground water, effluents, water treatment chemicals, and TCLP leachates or other extracts)</li> </ul>
	• Drinking Water - Delivered (treated or untreated) water designated as potable water
	• Water/Wastewater - Raw source waters for public drinking water supplies, ground waters,
	municipal influents/ effluents, and industrial influents/effluents
	<ul> <li>Sludge - Municipal sludges and industrial sludges.</li> </ul>
	<ul> <li>Sold - Predominately inorganic matter ranging in classification from sands to clays.</li> </ul>
	<ul> <li>Waste - Aqueous and non-aqueous liquid wastes, chemical solids, and industrial liquid and solid wastes</li> </ul>
Equipment Blank	A sample of analyte-free media used to rinse common sampling equipment to check effectiveness of
Едириси Банк	decontamination procedures.
Extracted Internal	Isotopically labeled analogs of analytes of interest added to all standards, blanks and samples analyzed.
Standard Analyte	Added to samples and batch QC samples prior to the first step of sample extraction and to standards and
ounduire i muly to	instrument blanks prior to analysis. Used for isotope dilution methods.
Facility	A distinct location within the company that has unique certifications, personnel and waste disposal
5	identifications.
False Negative	DoD- A result that fails to identify (detect) an analyte or reporting an analyte to be present at or below a
0	level of interest when the analyte is actually above the level of interest.
False Positive	DoD- A result that erroneously identifies (detects) an analyte or reporting an analyte to be present above
	a level of interest when the analyte is actually present at or below the level of interest.
Field Blank	A blank sample prepared in the field by filling a clean container with reagent water and appropriate
	preservative, if any, for the specific sampling activity being undertaken.
Field Measurement	Determination of physical, biological, or radiological properties, or chemical constituents that are
	measured on-site, close in time and sPAS to the matrices being sampled/measured, following accepted
	test methods. This testing is performed in the field outside of a fixed-laboratory or outside of an enclosed
	structure that meets the requirements of a mobile laboratory.
Field of Accreditation	TNI- Those matrix, technology/method, and analyte combinations for which the accreditation body
	offers accreditation.



Field of Profision ar	TNI Matery technology/method analyte combinations for which the composition spile reservention
Field of Proficiency	TNI- Matrix, technology/method, analyte combinations for which the composition, spike concentration
Testing (FoPT)	ranges and acceptance criteria have been established by the PTPEC.
Finding	TNI- An assessment conclusion referenced to a laboratory accreditation standard and supported by
	objective evidence that identifies a deviation from a laboratory accreditation standard requirement.
	DoD- An assessment conclusion that identifies a condition having a significant effect on an item or
	activity. An assessment finding may be positive, negative, or neutral and is normally accompanied by
	specific examples of the observed condition. The finding must be linked to a specific requirement (e.g.,
	this standard, ISO requirements, analytical methods, contract specifications, or laboratory management
	systems requirements).
Flame Atomic	Instrumentation used to measure the concentration of metals in an environmental sample based on the
Absorption Spectrometer	fact that ground state metals absorb light at different wavelengths. Metals in a solution are converted to
(FAA)	the atomic state by use of a flame.
Flame Ionization	A type of gas detector used in GC analysis where samples are passed through a flame which ionizes the
Detector (FID)	sample so that various ions can be measured.
Gas Chromatography	Instrumentation which utilizes a mobile carrier gas to deliver an environmental sample across a stationary
(GC)	phase with the intent to separate compounds out and measure their retention times.
Gas Chromatograph/	In conjunction with a GC, this instrumentation utilizes a mass spectrometer which measures fragments of
Mass Spectrometry	compounds and determines their identity by their fragmentation patterns (mass spectra).
(GC/MS)	compounds and determines their identity by their magnetication patterns (mass spectra).
Gasoline Range Organics	A range of compounds that denote all the characteristic compounds that make up gasoline (range can be
(GRO)	state or program specific).
Graphite Furnace	Instrumentation used to measure the concentration of metals in an environmental sample based on the
Atomic Absorption	absorption of light at different wavelengths that are characteristic of different analytes.
Spectrometry (GFAA)	
High Pressure Liquid	Instrumentation used to separate, identify and quantitate compounds based on retention times which are
Chromatography	dependent on interactions between a mobile phase and a stationary phase.
(HPLC)	dependent on interactions between a mobile phase and a stationary phase.
Holding Time	TNI- The maximum time that can elapse between two specified activities.
Tioking Tine	40 CFR Part 136- The maximum time that samples may be held prior to preparation and/or analysis as
	defined by the method and still be considered valid or not compromised.
	For sample prep purposes, hold times are calculated using the time of the start of the preparation
	procedure. DoD- The maximum time that may elapse from the time of sampling to the time of preparation or
TT :	analysis, or from preparation to analysis, as appropriate.
Homogeneity	The degree to which a property or substance is uniformly distributed throughout a sample.
Homologue	One in a series of organic compounds in which each successive member has one more chemical group in
	its molecule than the next preceding member. For instance, methanol, ethanol, propanol, butanol, etc.,
	form a homologous series.
Improper Actions	DoD- Intentional or unintentional deviations from contract-specified or method-specified analytical
	practices that have not been authorized by the customer (e.g., DoD or DOE).
Incremental Sampling	Soil preparation for large volume (1 kg or greater) samples.
Method (ISM)	
In-Depth Data	TNI- When used in the context of data integrity activities, a review and evaluation of documentation
Monitoring	related to all aspects of the data generation process that includes items such as preparation, equipment,
	software, calculations, and quality controls. Such monitoring shall determine if the laboratory uses
	appropriate data handling, data use and data reduction activities to support the laboratory's data integrity
	policies and procedures.
Inductively Coupled	Analytical technique used for the detection of trace metals which uses plasma to produce excited atoms
Plasma Atomic Emission	that emit radiation of characteristic wavelengths.
Spectrometry (ICP-AES)	-
Inductively Coupled	An ICP that is used in conjunction with a mass spectrometer so that the instrument is not only capable of
Plasma- Mass	detecting trace amounts of metals and non-metals but is also capable of monitoring isotopic speciation
Spectrometry (ICP/MS)	for the ions of choice.
Infrared Spectrometer	An instrument that uses infrared light to identify compounds of interest.
(IR)	
<u></u>	1



Initial Calibration (ICAL)	The process of analyzing standards, prepared at specified concentrations, to define the quantitative response relationship of the instrument to the analytes of interest. Initial calibration is performed whenever the results of a calibration verification standard do not conform to the requirements of the method in use or at a frequency specified in the method.
Initial Calibration Blank (ICB)	A blank sample used to monitor the cleanliness of an analytical system at a frequency determined by the analytical method. This blank is specifically run in conjunction with the Initial Calibration Verification (ICV) where applicable.
Initial Calibration Verification (ICV)	DoD- Verifies the initial calibration with a standard obtained or prepared from a source independent of the source of the initial calibration standards to avoid potential bias of the initial calibration.
Injection Internal Standard Analyte	Isotopically labeled analogs of analytes of interest (or similar in physiochemical properties to the target analytes but with a distinct response) to be quantitated. Added to all blanks, standards, samples and batch QC after extraction and prior to analysis.
Instrument Blank	A clean sample (e.g., distilled water) processed through the instrumental steps of the measurement process; used to determine instrument contamination.
Instrument Detection Limits (IDLs)	Limits determined by analyzing a series of reagent blank analyses to obtain a calculated concentration. IDLs are determined by calculating the average of the standard deviations of three runs on three non-consecutive days from the analysis of a reagent blank solution with seven consecutive measurements per day.
Interference, spectral	Occurs when particulate matter from the atomization scatters incident radiation from the source or when the absorption or emission from an interfering species either overlaps or is so close to the analyte wavelength that resolution becomes impossible.
Interference, chemical	Results from the various chemical processes that occur during atomization and later the absorption characteristics of the analyte.
Internal Standard	TNI and DoD- A known amount of standard added to a test portion of a sample as a reference for evaluating and controlling the precision and bias of the applied analytical method.
International Organization for Standardization (ISO)	An international standard-setting body composed of representatives from various national standards organizations.
Intermediate Standard Solution	Reference solutions prepared by dilution of the stock solutions with an appropriate solvent.
International System of Units (SI)	The coherent system of units adopted and recommended by the General Conference on Weights and Measures.
Ion Chromatography (IC)	Instrumentation or process that allows the separation of ions and molecules based on the charge properties of the molecules.
Isomer	One of two or more compounds, radicals, or ions that contain the same number of atoms of the same element but differ in structural arrangement and properties. For example, hexane (C6H14) could be n-hexane, 2-methylpentane, 3-methylpentane, 2,3-dimethylbutane, 2,2-dimethylbutane.
Laboratory	A body that calibrates and/or tests.
Laboratory Control Sample (LCS)	TNI- (also known as laboratory fortified blank (LFB), spiked blank, or QC check sample): A sample matrix, free from the analytes of interest, spiked with verified known amounts of analytes or a material containing known and verified amounts of analytes and taken through all sample preparation and analytical steps of the procedure unless otherwise noted in a reference method. It is generally used to establish intra-laboratory or analyst-specific precision and bias or to evaluate the performance of all or a portion of the measurement system.
Laboratory Duplicate	Aliquots of a sample taken from the same container under laboratory conditions and processed and analyzed independently.
Laboratory Information Management System (LIMS)	DoD- The entirety of an electronic data system (including hardware and software) that collects, analyzes, stores, and archives electronic records and documents.
Learning Management System (LMS)	A web-based database used by the laboratories to track and document training activities. The system is administered by the corporate training department and each laboratory's learn centers are maintained by a local administrator.
Legal Chain-of-Custody Protocols	TNI- Procedures employed to record the possession of samples from the time of sampling through the retention time specified by the client or program. These procedures are performed at the special request of the client and include the use of a Chain-of-Custody (COC) Form that documents the collection, transport, and receipt of compliance samples by the laboratory. In addition, these protocols document all handling of the samples within the laboratory.



Limit(s) of Detection	TNI- The minimum result, which can be reliably discriminated from a blank with predetermined
(LOD)	confidence level.
	DoD- The smallest concentration of a substance that must be present in a sample in order to be detected
	at the DL with 99% confidence. At the LOD, the false negative rate (Type II error) is 1%. A LOD may
	be used as the lowest concentration for reliably reporting a non-detect of a specific analyte in a specific
	matrix with a specific method at 99% confidence.
Limit(s) of Quantitation	TNI- The minimum levels, concentrations, or quantities of a target variable (e.g., target analyte) that can
(LOQ)	be reported with a specified degree of confidence.
	DoD- The smallest concentration that produces a quantitative result with known and recorded precision
	and bias. For DoD/DOE projects, the LOQ shall be set at or above the concentration of the lowest
	initial calibration standard and within the calibration range.
Linear Dynamic Range	DoD- Concentration range where the instrument provides a linear response.
Liquid chromatography/	Instrumentation that combines the physical separation techniques of liquid chromatography with the
tandem mass	mass analysis capabilities of mass spectrometry.
spectrometry	mass analysis capabilities of mass spectrometry.
(LC/MS/MS)	
Lot	TNI- A definite amount of material produced during a single manufacturing cycle, and intended to have
	uniform character and quality.
Management	Those individuals directly responsible and accountable for planning, implementing, and assessing work.
Management System	System to establish policy and objectives and to achieve those objectives.
Manager (however	The individual designated as being responsible for the overall operation, all personnel, and the physical
named)	plant of the environmental laboratory. A supervisor may report to the manager. In some cases, the
,	supervisor and the manager may be the same individual.
Matrix	TNI- The substrate of a test sample.
Matrix Duplicate	TNI- A replicate matrix prepared in the laboratory and analyzed to obtain a measure of precision.
Matrix Spike (MS)	TNI- A sample prepared, taken through all sample preparation and analytical steps of the procedure
(spiked sample or	unless otherwise noted in a referenced method, by adding a known amount of target analyte to a specified
fortified sample)	amount of sample for which an independent test result of target analyte concentration is available. Matrix
	spikes are used, for example, to determine the effect of the matrix on a method's recovery efficiency.
Matrix Spike Duplicate	TNI- A replicate matrix spike prepared in the laboratory and analyzed to obtain a measure of the
(MSD) (spiked sample or	precision of the recovery for each analyte.
fortified sample	
duplicate)	
Measurement	DoD- Criteria that may be general (such as completion of all tests) or specific (such as QC method
Performance Criteria	acceptance limits) that are used by a project to judge whether a laboratory can perform a specified activity
(MPC)	to the defined criteria.
Measurement Quality	TNI- The analytical data requirements of the data quality objectives are project- or program-specific and
Objective (MQO)	can be quantitative or qualitative. MQOs are measurement performance criteria or objectives of the
00,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,000,0000	analytical process. Examples of quantitative MQOs include statements of required analyte detectability
	and the uncertainty of the analytical protocol at a specified radionuclide activity, such as the action level.
	Examples of qualitative MQOs include statements of the required specificity of the analytical protocol,
M	e.g., the ability to analyze for the radionuclide of interest given the presence of interferences.
Measurement System	TNI- A method, as implemented at a particular laboratory, and which includes the equipment used to
	perform the test and the operator(s).
	DoD- A test method, as implemented at a particular laboratory, and which includes the equipment used
	to perform the sample preparation and test and the operator(s).
Measurement	DoD- An estimate of the error in a measurement often stated as a range of values that contain the true
Uncertainty	value within a certain confidence level. The uncertainty generally includes many components which may
	be evaluated from experimental standard deviations based on repeated observations or by standard
	deviations evaluated from assumed probability distributions based on experience or other information.
	For DoD/DOE, a laboratory's Analytical Uncertainty (such as use of LCS control limits) can be reported
	as the minimum uncertainty.
Method	TNI- A body of procedures and techniques for performing an activity (e.g., sampling, chemical analysis,
L'ICUIUU	quantification), systematically presented in the order in which they are to be executed.
Mothod Plant-	
Method Blank	TNI- A sample of a matrix similar to the batch of associated samples (when available) that is free from
	the analytes of interest and is processed simultaneously with and under the same conditions as samples
	through all steps of the analytical procedures, and in which no target analytes or interferences are present at concentrations that impact the analytical results for sample analyses.



Method Detection Limit	TNI- One way to establish a Detection Limit; defined as the minimum concentration of a substance that
(MDL)	can be measured and reported with 99% confidence that the analyte concentration is greater than zero
< , , , , , , , , , , , , , , , , , , ,	and is determined from analysis of a sample in a given matrix containing the analyte.
Method of Standard	A set of procedures adding one or more increments of a standard solution to sample aliquots of the same
Additions	size in order to overcome inherent matrix effects. The procedures encompass the extrapolation back to
	obtain the sample concentration.
Minimum Detectable	TNI- Estimate of the smallest true activity that ensures a specified high confidence, $1 - \beta$ , of detection
Activity (MDA)	above the Critical Value, and a low probability $\beta$ of false negatives below the Critical Value. For
	radiometric methods, $\beta$ is often set at 0.05. NOTE 1: The MDS is a measure of the detection capability
	of a measurement process and as such, it is an a priori concept. It may be used in the selection of
	methods to meet specified MQOs. Laboratories may also calculate a "sample specific" MDA, which
	indicates how well the measurement process is performing under varying real-world measurement
	conditions, when sample-specific characteristics (e.g., interferences) may affect the detection capability.
	However, the MDA must never be used instead of the Critical Value as a detection threshold. NOTE 2:
	For the purpose of this Standard, the terms MDA and minimum detectable concentration (MDC) are
	equivalent.
MintMiner	Program used by PAS to review large amounts of chromatographic data to monitor for errors or data
2012 2 1	integrity issues.
Mobile Laboratory	TNI- A portable enclosed structure with necessary and appropriate accommodation and environmental
	conditions for a laboratory, within which testing is performed by analysts. Examples include but are not
	limited to trailers, vans, and skid-mounted structures configured to house testing equipment and
National Environmental	personnel. See definition of The NELAC Institute (TNI).
Laboratory Accreditation	See definition of The INELAC Institute (TINI).
Conference (NELAC)	
National Institute of	National institute charged with the provision of training, consultation and information in the area of
Occupational Safety and	occupational safety and health.
Health (NIOSH)	
National Institute of	TNI- A federal agency of the US Department of Commerce's Technology Administration that is
Standards and	designed as the United States national metrology institute (or NMI).
Technology (NIST)	
National Pollutant	A permit program that controls water pollution by regulating point sources that discharge pollutants into
Discharge Elimination	U.S. waters.
System (NPDES)	
Negative Control	Measures taken to ensure that a test, its components, or the environment do not cause undesired effects,
	or produce incorrect test results.
Nitrogen Phosphorus	A detector used in GC analyses that utilizes thermal energy to ionize an analyte. With this detector,
Detector (NPD)	nitrogen and phosphorus can be selectively detected with a higher sensitivity than carbon.
Nonconformance	An indication or judgment that a product or service has not met the requirement of the relevant
	specifications, contract, or regulation; also the state of failing to meet the requirements.
Not Detected (ND)	The result reported for a compound when the detected amount of that compound is less than the
0	method reporting limit.
Operator Aid	DoD- A technical posting (such as poster, operating manual, or notepad) that assists workers in
	performing routine tasks. All operator aids must be controlled documents (i.e., a part of the laboratory
Performance Based	management system).
	An analytical system wherein the data quality needs, mandates or limitations of a program or project are specified and serve as criteria for selecting appropriate test methods to meet those needs in a cost-
Measurement System (PBMS)	effective manner.
Physical Parameter	TNI- A measurement of a physical characteristic or property of a sample as distinguished from the
i nysicai i arameter	concentrations of chemical and biological components.
Photo-ionization	An ion detector which uses high-energy photons, typically in the ultraviolet range, to break molecules into
Detector (PID)	positively charged ions.
Polychlorinated	A class of organic compounds that were used as coolants and insulating fluids for transformers and
Biphenyls (PCB)	capacitors. The production of these compounds was banned in the 1970's due to their high toxicity.
Positive Control	Measures taken to ensure that a test and/or its components are working properly and producing correct
	or expected results from positive test subjects.
Post-Digestion Spike	or expected results from positive test subjects. A sample prepared for metals analyses that has analytes spike added to determine if matrix effects may be



Power of Hydrogen (pH)	The measure of acidity or alkalinity of a solution.
Practical Quantitation	Another term for a method reporting limit. The lowest reportable concentration of a compound based
Limit (PQL)	on parameters set up in an analytical method and the laboratory's ability to reproduce those conditions.
Precision	TNI- The degree to which a set of observations or measurements of the same property, obtained under
	similar conditions, conform to themselves; a data quality indicator. Precision is usually expressed as
	standard deviation, variance or range, in either absolute or relative terms.
Preservation	TNI and DoD- Any conditions under which a sample must be kept in order to maintain chemical,
	physical, and/or biological integrity prior to analysis.
Primary Accreditation	TNI- The accreditation body responsible for assessing a laboratory's total quality system, on-site
Body (Primary AB)	assessment, and PT performance tracking for fields of accreditation.
Procedure	TNI- A specified way to carry out an activity or process. Procedures can be documented or not.
Proficiency Testing (PT)	TNI- A means to evaluate a laboratory's performance under controlled conditions relative to a given set
, , , , ,	of criteria, through analysis of unknown samples provided by an external source.
Proficiency Testing	TNI- The aggregate of providing rigorously controlled and standardized environmental samples to a
Program (PT Program)	laboratory for analysis, reporting of results, statistical evaluation of the results and the collective
8	demographics and results summary of all participating laboratories.
Proficiency Testing	TNI- A person or organization accredited by a TNI-approved Proficiency Testing Provider Accreditor to
Provider (PT Provider)	operate a TNI-compliant PT Program.
Proficiency Testing	TNI- An organization that is approved by TNI to accredit and monitor the performance of proficiency
Provider Accreditor	testing providers.
(PTPA)	testing providers.
Proficiency Testing	TNI- A statistically derived value that represents the lowest acceptable concentration for an analyte in a
Reporting Limit (PTRL)	PT sample, if the analyte is spiked into the PT sample. The PTRLs are specified in the TNI FoPT tables.
Proficiency Testing	TNI- A sample, the composition of which is unknown to the laboratory, and is provided to test whether
, .	
Sample (PT)	the laboratory can produce analytical results within the specified acceptance criteria.
Proficiency Testing (PT)	TNI- a) Scheduled PT Study: A single complete sequence of circulation and scoring of PT samples to all
Study	participants in a PT program. The study must have the same pre-defined opening and closing dates for all
	participants; b) Supplemental PT Study: A PT sample that may be from a lot previously released by a PT
	Provider that meets the requirements for supplemental PT samples given in Volume 3 of this Standard
D C	[TNI] but that does not have a pre-determined opening date and closing date.
Proficiency Testing Study	TNI- a) Scheduled PT Study: The calendar date by which all participating laboratories must submit
Closing Date	analytical results for a PT sample to a PT Provider; b) Supplemental PT Study: The calendar date a
	laboratory submits the results for a PT sample to the PT Provider.
Proficiency Testing Study	TNI- a) Scheduled PT Study: The calendar date that a PT sample is first made available to all participants
Opening Date	of the study by a PT Provider; b) Supplemental PT Study: The calendar date the PT Provider ships the
	sample to a laboratory.
Protocol	TNI- A detailed written procedure for field and/or laboratory operation (e.g., sampling, analysis) that
	must be strictly followed.
Qualitative Analysis	DoD- Analysis designed to identify the components of a substance or mixture.
Quality Assurance (QA)	TNI- An integrated system of management activities involving planning, implementation, assessment,
	reporting and quality improvement to ensure that a process, item, or service is of the type and quality
	needed and expected by the client.
Quality Assurance	A document stating the management policies, objectives, principles, organizational structure and
Manual (QAM)	authority, responsibilities, accountability, and implementation of an agency, organization, or laboratory, to
	ensure the quality of its product and the utility of its product to its users.
Quality Assurance	A formal document describing the detailed quality control procedures by which the quality requirements
Project Plan (QAPP)	defined for the data and decisions pertaining to a specific project are to be achieved.
Quality Control (QC)	TNI- The overall system of technical activities that measures the attributes and performance of a process,
Quality Control (QC)	item, or service against defined standards to verify that they meet the stated requirements established by
	the customer; operational techniques and activities that are used to fulfill requirements for quality; also the
	system of activities and checks used to ensure that measurement systems are maintained within
	prescribed limits, providing protection against "out of control" conditions and ensuring that the results
	are of acceptable quality.
Quality Control Sample	TNI- A sample used to assess the performance of all or a portion of the measurement system. One of
(0.00)	any number of samples, such as Certified Reference Materials, a quality system matrix fortified by spiking,
(QCS)	
(QCS)	or actual samples fortified by spiking, intended to demonstrate that a measurement system or activity is in control.



Quality Manual	TNI- A document stating the management policies, objectives, principles, organizational structure and
	authority, responsibilities, accountability, and implementation of an agency, organization, or laboratory, to
	ensure the quality of its product and the utility of its product to its users.
Quality System	TNI and DoD- A structured and documented management system describing the policies, objectives,
2	principles, organizational authority, responsibilities, accountability, and implementation plan of an
	organization for ensuring quality in its work processes, products (items), and services. The quality system
	provides the framework for planning, implementing, and assessing work performed by the organization
	and for carrying out required quality assurance and quality control activities.
Quality System Matrix	TNI and DoD- These matrix definitions shall be used for purposes of batch and quality control
	requirements and may be different from a field of accreditation matrix:
	• Air and Emissions: Whole gas or vapor samples including those contained in flexible or rigid
	wall containers and the extracted concentrated analytes of interest from a gas or vapor that are
	collected with a sorbant tube, impinger solution, filter, or other device
	Aqueous: Any aqueous sample excluded from the definition of Drinking Water or
	Saline/Estuarine. Includes surface water, groundwater effluents, and TCLP or other
	extracts.
	• Biological Tissue: Any sample of a biological origin such as fish tissue, shellfish or plant
	material. Such samples shall be grouped according to origin.
	<ul> <li>Chemical Waste: A product or by-product of an industrial process that results in a matrix</li> </ul>
	not previously defined.
	• <b>Drinking Water</b> : Any aqueous sample that has been designated a potable or potentially
	potable water source.
	<ul> <li>Non-aqueous liquid: Any organic liquid with &lt;15% settleable solids</li> </ul>
	• Saline/Estuarine: Any aqueous sample from an ocean or estuary, or other salt water source
	such as the Great Salt Lake.
	• Solids: Includes soils, sediments, sludges, and other matrices with >15% settleable solids.
Quantitation Range	DoD- The range of values (concentrations) in a calibration curve between the LOQ and the highest
<8-	successively analyzed initial calibration standard used to relate instrument response to analyte
	concentration. The quantitation range (adjusted for initial sample volume/weight, concentration/dilution
	and final volume) lies within the calibration range.
Quantitative Analysis	DoD- Analysis designed to determine the amounts or proportions of the components of a substance.
Random Error	The EPA has established that there is a 5% probability that the results obtained for any one analyte will
Cardoni Enor	exceed the control limits established for the test due to random error. As the number of compounds
	-
	measured increases in a given sample, the probability for statistical error also increases.
Raw Data	TNI- The documentation generated during sampling and analysis. This documentation includes, but is
	not limited to, field notes, electronic data, magnetic tapes, untabulated sample results, QC sample results,
	print outs of chromatograms, instrument outputs, and handwritten records.
Reagent Blank (method	A sample consisting of reagent(s), without the target analyte or sample matrix, introduced into the
eagent blank)	analytical procedure at the appropriate point and carried through all subsequent steps to determine the
	contribution of the reagents and of the involved analytical steps.
Reagent Grade	Analytical reagent (AR) grade, ACS reagent grade, and reagent grade are synonymous terms for reagents
	that conform to the current specifications of the Committee on Analytical Reagents of the American
	Chemical Society.
Records	DoD- The output of implementing and following management system documents (e.g., test data in
	electronic or hand-written forms, files, and logbooks).
Reference Material	TNI- Material or substance one or more of whose property values are sufficiently homogenized and well
	established to be used for the calibration of an apparatus, the assessment of a measurement method, or
	for assigning values to materials.
Reference Method	TNI- A published method issued by an organization generally recognized as competent to do so. (When
withit mullou	
	the ISO language refers to a "standard method", that term is equivalent to "reference method"). When a
	laboratory is required to analyze by a specified method due to a regulatory requirement, the
	analyte/method combination is recognized as a reference method. If there is no regulatory requirement
	for the analyte/method combination, the analyte/method combination is recognized as a reference
	method if it can be analyzed by another reference method of the same matrix and technology.
Reference Standard	



Relative Percent Difference (RPD)	A measure of precision defined as the difference between two measurements divided by the average concentration of the two measurements.
Reporting Limit (RL)	The level at which method, permit, regulatory and customer-specific objectives are met. The reporting limit may never be lower than the Limit of Detection (i.e., statistically determined MDL). Reporting limits are corrected for sample amounts, including the dry weight of solids, unless otherwise specified. There must be a sufficient buffer between the Reporting Limit and the MDL. DoD- A customer-specified lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.
Reporting Limit Verification Standard (RLVS)	A standard analyzed at the reporting limit for an analysis to verify the laboratory's ability to report to that level.
Representativeness	A quality element related to the ability to collect a sample reflecting the characteristics of the part of the environment to be assessed. Sample representativeness is dependent on the sampling techniques specified in the project work plan.
Requirement	Denotes a mandatory specification; often designated by the term "shall".
Retention Time	The time between sample injection and the appearance of a solute peak at the detector.
Revocation	TNI- The total or partial withdrawal of a laboratory's accreditation by an accreditation body.
Sample	Portion of material collected for analysis, identified by a single, unique alphanumeric code. A sample may consist of portions in multiple containers, if a single sample is submitted for multiple or repetitive analysis.
Sample Condition Upon Receipt Form (SCURF)	Form used by sample receiving personnel to document the condition of sample containers upon receipt to the laboratory (used in conjunction with a COC).
Sample Delivery Group (SDG)	A unit within a single project that is used to identify a group of samples for delivery. An SDG is a group of 20 or fewer field samples within a project, received over a period of up to 14 calendar days. Data from all samples in an SDG are reported concurrently.
Sample Receipt Form (SRF)	Letter sent to the client upon login to show the tests requested and pricing.
Sample Tracking	Procedures employed to record the possession of the samples from the time of sampling until analysis, reporting and archiving. These procedures include the use of a chain-of-custody form that documents the collection, transport, and receipt of compliance samples to the laboratory. In addition, access to the laboratory is limited and controlled to protect the integrity of the samples.
Sampling	TNI- Activity related to obtaining a representative sample of the object of conformity assessment, according to a procedure.
Selected Ion Monitoring (SIM)	A mode of analysis in mass spectrometry where the detector is set to scan over a very small mass range, typically one mass unit. The narrower the range, the more sensitive the detector. DoD- Using GC/MS, characteristic ions specific to target compounds are detected and used to quantify in applications where the normal full scan mass spectrometry results in excessive noise.
Selectivity	TNI- The ability to analyze, distinguish, and determine a specific analyte or parameter from another component that may be a potential interferent or that may behave similarly to the target analyte or parameter within the measurement system.
Sensitivity	TNI- The capability of a method or instrument to discriminate between measurement responses representing different levels (e.g., concentrations) of a variable of interest.
Serial Dilution	The stepwise dilution of a substance in a solution.
Shall	Denotes a requirement that is mandatory whenever the criterion for conformance with the specification requires that there be no deviation. This does not prohibit the use of alternative approaches or methods for implementing the specification as long as the requirement is fulfilled.
Should	Denotes a guideline or recommendation whenever noncompliance with the specification is permissible.
Signal-to-Noise Ratio (S/N)	DoD- A measure of signal strength relative to background noise. The average strength of the noise of most measurements is constant and independent of the magnitude of the signal. Thus, as the quantity being measured (producing the signal) decreases in magnitude, S/N decreases and the effect of the noise on the relative error of a measurement increases.
Source Water	TNI- When sampled for drinking water compliance, untreated water from streams, rivers, lakes, or underground aquifers, which is used to supply private and public drinking water supplies.
Spike	A known mass of target analyte added to a blank sample or sub-sample; used to determine recovery efficiency or for other quality control purposes.
Standard (Document)	TNI- The document describing the elements of a laboratory accreditation that has been developed and established within the consensus principles of standard setting and meets the approval requirements of standard adoption organizations procedures and policies.



Standard (Chemical)	Standard samples are comprised of a known amount of standard reference material in the matrix
	undergoing analysis. A standard reference material is a certified reference material produced by US NIST
	and characterized for absolute content, independent of analytical test method.
Standard Blank (or	A calibration standard consisting of the same solvent/reagent matrix used to prepare the calibration
Reagent Blank)	standards without the analytes. It is used to construct the calibration curve by establishing instrument
	background.
Standard Method	A test method issued by an organization generally recognized as competent to do so.
Standard Operating	TNI- A written document that details the method for an operation, analysis, or action with thoroughly
Procedure (SOP)	prescribed techniques and steps. SOPs are officially approved as the methods for performing certain
	routine or repetitive tasks.
Standard Reference	A certified reference material produced by the US NIST or other equivalent organization and
Material (SRM)	characterized for absolute content, independent of analytical method.
Statement of	A document that lists information about a company, typically the qualifications of that company to
Qualifications (SOQ)	compete on a bid for services.
Stock Standard	A concentrated reference solution containing one or more analytes prepared in the laboratory using
	an assayed reference compound or purchased from a reputable commercial source.
Storage Blank	DoD- A sample of analyte-free media prepared by the laboratory and retained in the sample storage area
0	of the laboratory. A storage blank is used to record contamination attributable to sample storage at the
	laboratory.
Supervisor	The individual(s) designated as being responsible for a particular area or category of scientific analysis.
- F	This responsibility includes direct day-to-day supervision of technical employees, supply and instrument
	adequacy and upkeep, quality assurance/quality control duties and ascertaining that technical employees
	have the required balance of education, training and experience to perform the required analyses.
Surrogate	DoD- A substance with properties that mimic the analyte of interest. It is unlikely to be found in
0 122 0 8000	environmental samples and is added to them for quality control purposes.
Suspension	TNI- The temporary removal of a laboratory's accreditation for a defined period of time, which shall not
Suspension	exceed 6 months or the period of accreditation, whichever is longer, in order to allow the laboratory time
	to correct deficiencies or area of non-conformance with the Standard.
Systems Audit	An on-site inspection or assessment of a laboratory's quality system.
Target Analytes	DoD- Analytes or chemicals of primary concern identified by the customer on a project-specific basis.
Technical Director	Individual(s) who has overall responsibility for the technical operation of the environmental testing
reennea Director	laboratory.
Technology	TNI- A specific arrangement of analytical instruments, detection systems, and/or preparation techniques.
Test	A technical operation that consists of the determination of one or more characteristics or performance of
1030	a given product, material, equipment, organism, physical phenomenon, process or service according to a
	specified procedure. The result of a test is normally recorded in a document sometimes called a test
	report or a test certificate.
Test Method	DoD- A definitive procedure that determines one or more characteristics of a given substance or
rest method	product.
Test Methods for	EPA Waste's official compendium of analytical and sampling methods that have been evaluated and
Evaluating Solid Waste,	approved for use in complying with RCRA regulations.
	approved for use in compaying with Kerk regulations.
Physical/ Chemical (SW- 846)	
Test Source	TNI- A radioactive source that is tested, such as a sample, calibration standard, or performance check
Test Source	source. A Test Source may also be free of radioactivity, such as a Test Source counted to determine the
The NELAC Institute	subtraction background, or a short-term background check. A non-profit organization whose mission is to foster the generation of environmental data of known and
	documented quality through an open, inclusive, and transparent process that is responsive to the needs of
(TNI)	
	the community. Previously known as NELAC (National Environmental Laboratory Accreditation
Total Data-lara	Conference).
Total Petroleum	A term used to denote a large family of several hundred chemical compounds that originate from crude
Hydrocarbons (TPH)	oil. Compounds may include gasoline components, jet fuel, volatile organics, etc.
Toxicity Characteristic	A solid sample extraction method for chemical analysis employed as an analytical method to simulate
Leaching Procedure (TCLP)	leaching of compounds through a landfill.



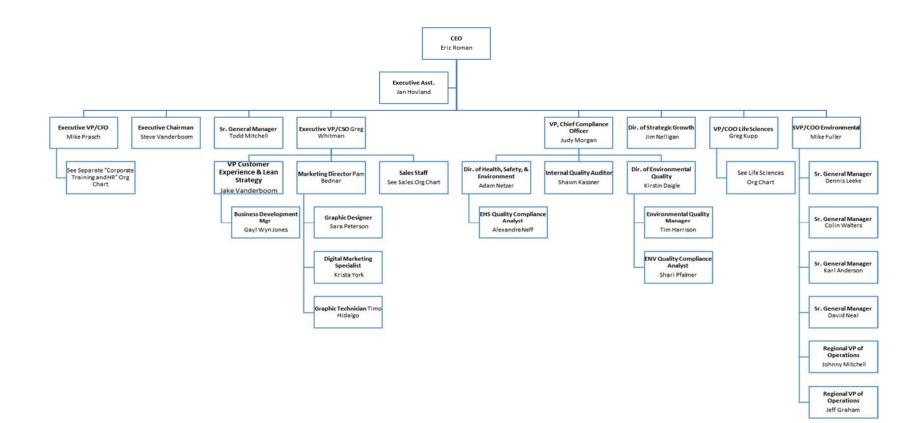
Traceability	TNI- The ability to trace the history, application, or location of an entity by means of recorded
	identifications. In a calibration sense, traceability relates measuring equipment to national or international
	standards, primary standards, basic physical conditions or properties, or reference materials. In a data
	collection sense, it relates calculations and data generated throughout the project back to the requirements
	for the quality of the project.
Training Document	A training resource that provides detailed instructions to execute a specific method or job function.
Trip Blank	This blank sample is used to detect sample contamination from the container and preservative during
The Dama	transport and storage of the sample. A cleaned sample container is filled with laboratory reagent water
	and the blank is stored, shipped, and analyzed with its associated samples.
Tuning	A check and/or adjustment of instrument performance for mass spectrometry as required by the
Tuning	method.
Ultraviolet	Instrument routinely used in quantitative determination of solutions of transition metal ions and highly
Spectrophotometer (UV)	conjugated organic compounds.
Uncertainty, Counting	TNI- The component of Measurement Uncertainty attributable to the random nature of radioactive
encertainty, sounding	decay and radiation counting (often estimated as the square root of observed counts (MARLAP). Older
	references sometimes refer to this parameter as Error, Counting Error or Count Error (c.f., Total
	Uncertainty).
Uncertainty, Expanded	TNI- The product of the Standard Uncertainty and a coverage factor, k, which is chosen to produce an
Oncertainty, Expanded	interval about the result that has a high probability of containing the value of the measurand (c.f.,
	Standard Uncertainty). NOTE: Radiochemical results are generally reported in association with the Total
	Uncertainty. Either if these estimates of uncertainty can be reported as the Standard Uncertainty (one-
IT ( )	sigma) or as an Expanded Uncertainty (k-sigma, where $k > 1$ ).
Uncertainty,	TNI- Parameter associated with the result of a measurement that characterizes the dispersion of the
Measurement	values that could reasonably be attributed to the measurand.
Uncertainty, Standard	TNI- An estimate of the Measurement Uncertainty expressed as a standard deviation (c.f., Expanded
	Uncertainty).
Uncertainty, Total	TNI- An estimate of the Measurement Uncertainty that accounts for contributions from all significant
	sources of uncertainty associated with the analytical preparation and measurement of a sample. Such
	estimates are also commonly referred to as Combined Standard Uncertainty or Total Propagated
	Uncertainty, and in some older references as the Total Propagated Error, among other similar items (c.f.,
	Counting Uncertainty).
Unethical actions	DoD- Deliberate falsification of analytical or quality control results where failed method or contractual
	requirements are made to appear acceptable.
United States	A department of the federal government that provides leadership on food, agriculture, natural resources,
Department of	rural development, nutrition and related issues based on public policy, the best available science, and
Agriculture (USDA)	effective management.
United States Geological	Program of the federal government that develops new methods and tools to supply timely, relevant, and
Survey (USGS)	useful information about the Earth and its processes.
Unregulated	EPA program to monitor unregulated contaminants in drinking water.
Contaminant Monitoring	
Rule (UCMR)	
Validation	DoD- The confirmation by examination and provision of objective evidence that the particular
	requirements for a specific intended use are fulfilled.
Verification	TNI- Confirmation by examination and objective evidence that specified requirements have been met. In
	connection with the management of measuring equipment, verification provides a means for checking
	that the deviations between values indicated by a measuring instrument and corresponding known values
	of a measured quantity are consistently smaller than the maximum allowable error defined in a standard,
	regulation or specification peculiar to the management of the measuring equipment.
Voluntary Action	A program of the Ohio EPA that gives individuals a way to investigate possible environmental
Program (VAP)	contamination, clean it up if necessary and receive a promise from the State of Ohio that no more
· · · · · · · · · · · · · · · · · · ·	cleanup is needed.
Whole Effluent Toxicity	The aggregate toxic effect to aquatic organisms from all pollutants contained in a facility's wastewater
(WET)	(effluent).
("11)	(endent).



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### 7.4 Appendix D: Organization Chart(s)

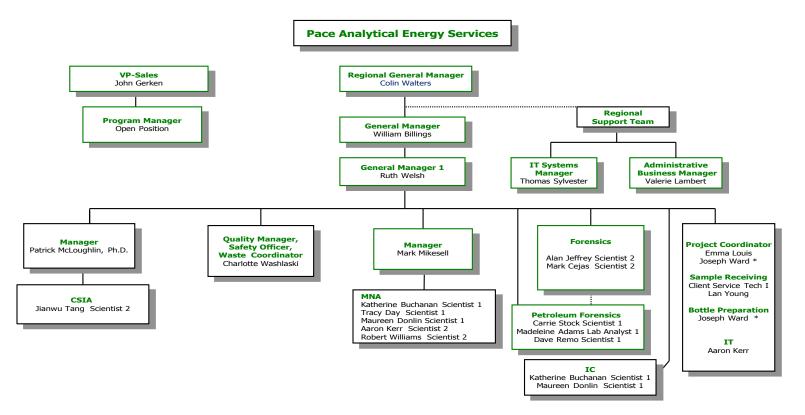
### 7.4.1 PAS - Corporate December 2019





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### 7.4.2 PAS-Pittsburgh



Last Revised – February 4, 2020 Last Reviewed – February 4, 2020 * holds safety responsibilities as well



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## 7.5 Appendix E: Equipment Listing

The equipment listed represents equipment were held by each location on the effective date of this manual. This information is subject to change without notice. External parties should contact the location for the most current information.

#### 7.5.1 PAS-Pittsburgh

#### Equipment List: PAS-Pittsburgh

Description			Service Date	Condition	Location	Internal ID	Manual Location	
EDON IC	Dionex	ISC 2000	8120223	03/04/2009	Working	213	7024	PDF on desktop
EDON	Dionex	AS-AP	14092562	10/23/2014	Working	213	NA	CD
Autosampler					Ŭ			
EDON IC	Dionex	ISC2100	14092120	10/23/2014	Working	213	7036	CD
EDON GC	Varian	3400	10272	Unknown	Not in	220	NA	CD
					service			
Dissolved Gases GC	ThermoFisher	Trace Ultra	620120045	04/01/2012	Working	213	7025	CD
Autosampler	ThermoFisher	TriPlus RSH	241284	04/01/2012	Working	213	7026	PDF on desktop
VOC GC	Agilent	6890 GC	US00042429	09/2018	Working	221	7048	CD on data
								station
VOC	Tekmar	7000/7050	91099014/91346016	1995	Working	221	NA	Rm 221
Autosampler								Bookshelf
VOC GC	Hewlett Packard	5890 SeriesII	3336A3505	Unknown	Working	220	NA	Rm 221 Bookshelf
VOC GC	Agilent	6890	NA	Unknown	Not in	Storage	7049	Rm221
					service			Bookshelf
Dissolved Gases GC	ThermoFisher	Trace Ultra	620120028	04/18/2012	Working	221	7019	Data station PDF
Dissolved Gases	ThermoFisher	TriPlus	237682	04/18/2012	Working	221	7020	Data station
Autosampler		Headspace						PDF
RISK GC	GOW MAC	Series 580	580-200	1995	Working	220	NA	With GC
Dissolved Gases	Proprietary	GC	N/A	12/2005	Working	220	NA	Rm 221
GC								Bookshelf
RISK	Tekmar	7000/7050	92220011/92220006	04/2018	Not in	220	7051	Rm 221
Autosampler					service			Bookshelf
VOC	Tekmar	7000/7050	95025019/95025018	07/2016	Working	220	NA	Rm 221
Autosampler								Bookshelf
GC (4)	Proprietary	NA	NA	12/1998	3 In Service	220/221	NA	Bookshelf
Analytical Balance	Ohaus	DV215CD	1128122704	Unknown	Working	213	NA	Room 213



Anion	Dionex	AS-40	97050241	01/16/2009	Working	213	NA	On-Line
Autosampler								
IC	Dionex	ICS3000DC	08120559	01/16/2009	Working	213	7023	On-Line
Cation	Dionex	AS-DV	160911290	10/17/2016	Working	213	NA	On-Line
Autosampler IC	Dionex	ICS3000DP	08120254	01/16/2000	Working	213	7023	On-Line
				01/16/2009	0			
TOC Analyzer	Aurora	1030	J025730751	02/01/2017	Working	213	7022	On Instrument
TOC Autosampler	Aurora	1088	E019788198	02/01/2017	Working	213	NA	On Instrument
CSIA Autosampler	Tekmar	AquaTek 70	US06151001	Unknown	Working	426-428	7014	J drive (CSIA/Manuals
CSIA Autosampler	Tekmar	AquaTek 70	US07003004	Unknown	Working	424	7029	J drive (CSIA/Manuals
CSIA Purge &Trap	Tekmar	Velocity XPT	6335001	Unknown	Working	424	NA	J drive (CSIA/Manuals
CSIA Pre Concentrator	Entech	7100A	1304	Unknown	Working	424	NA	J drive (CSIA/Manuals
CSIA GC	ThermoFisher	Trace Ultra	200510408	Unknown	Working	424	7030	J drive (CSIA/Manuals
CSIA Combustion Interface	ThermoFisher	Combustion III	111201-175	Unknown	Working	424	NA	Room 426 drawer under chlorine autosampler
Reactor	ThermoFisher	TC Reactor OD	1085260-349	Unknown	Working	424	NA	Unknown
Mass Spectrometer	ThermoFisher	Delta V plus Isotope Ratio	8018	Unknown	Workiing	424	NA	Room 426 drawer under chlorine autosampler
Concentrator	Tekmar	Velocity	US6047001	Unknown	Working	426-428	7015	J drive (CSIA/Manuals
Mass Spectrometer	ThermoFisher	Delta V plus Isotope Ratio	08607D	Unknown	Working	426-428	NA	Room 426 drawer under chlorine autosampler
Interface	Thermo	Conflo IV Interface	1222750-179	Unknown	Working	426-428	NA	Room 426 drawer under chlorine autosampler
Interface	Thermo	GC Isolink Interface	1229600-147	Unknown	Working	426-428	NA	Room 426 drawer under chlorine autosampler
Gas Chromatograph	Agilent	7890A	CN11311133	Unknown	Working	426-428	NA	Room 426 drawer under



								chlorine
								autosampler
Autosampler	Tekmar	Aquatek 100	US11305020	Unknown	Working	426-428	NA	J drive (CSIA/Manuals)
Autosampler	Tekmar	Stratum	US1130000	Unknown	Working	426-428	NA	Room 426 drawer under chlorine autosampler
Gas Chromatograph	Agilent	6890N	US10226064	Unknown	Working	424	7011	Room 426 drawer under chlorine autosampler
Gas Chromatograph	Agilent	5976N NSD	US63810430	Unknown	Working	424	NA	Room 426 drawer under chlorine autosampler
Autosampler	Agilent	G1888 Headspace Autosampler	IT40220036	Unknown	Working	426-428	NA	J drive (CSIA/Manuals)
Autosampler	Agilent	G4513A	CN12090144	Unknown	Working	426-428	NA	J drive (CSIA/Manuals)
Autosampler	Entech	7032AQ	1032	Unknown	Working	424	NA	J drive (CSIA/Manuals
Canister Cleaner	Entech	3100A	110	Unknown	Working	424	NA	J drive (CSIA/Manuals
Evacuation Chamber	Entech	B33ER-0118	B33ER-0118	Unknown	Working	424	7031	J drive (CSIA/Manuals
Gas Chromatograph	Agilent	7890A	CN12121090	Unknown	Working	426-428	7006	Room 426 drawer under chlorine autosampler
Mass Spectrometer	Agilent	5975C MSD	US12157802	Unknown	Working	426-428	NA	Room 426 drawer under chlorine autosampler
High Capacity Gas Purifier	Supelco	29541-U	1312955/1A-22	Unknown	Working	424	NA	J drive (CSIA/Manuals
Centrifuge	Eppendorf	5810R	581101849	Unknown	Not in Use	Cage	7002	J drive (CSIA/Manuals
GC/MS	Agilent	7890A/5975	CN12091092	Unknown	Working	126	7007	Online
GC/MS	Agilent	6890/5975	US00008852	Unknown	Working	126		Online
GC/MS	Agilent	6890/5975	US00006875	Unknown	Working	126		Online
Autosampler	Tekmar	AquaTek 100	US11348004	Unknown	Working	126	7012	Online
Purge and Trap	Tekmar	Stratum	US11327002	Unknown	Working	126	7013	Online



Gas	Agilent	6890N	US10347026	Unknown	Working	126	7018	Online
Chromatograph	-				_			
Gas	Agilent	6890	US00001417	Unknown	Working	126	7005	Online
Chromatograph								
Gas	Agilent	5890	Unknown	Unknown	Working	126	NA	Online
Chromatograph								
Concentrator	Zymark	TurboVap	04770	Unknown	Working	127	NA	Online
Concentrator	Zymark	TurboVap	04756	Unknown	Working	127	NA	Online
Evaporator	Zymark	TurboVap	04384	Unknown	Working	127	NA	Online
		LV						
Balance	Sargent-Welsh	SWT-603D	T0121781	Unknown	Working	126	NA	Online
Oven	Fisher	550-126	1.51107E+12	Unknown	Working	126	NA	Online
GC	Agilent	7890A	CN10741050	Unknown	Working	126	7057	Online
MS	Agilent	5975	US10494609	Unknown	Working	126	7057	Online
Autosampler	Agilent	7693	CN18040069	Unknown	Working	126	7057	Online
Autosampler	Agilent	7683	CN50932285	Unknown	Working	126	7018	Online
Autosampler	Agilent	7683	US14907665	Unknown	Working	126	NA	Online
Autosampler	Agilent	7683	Unknown	Unknown	Working	126	7005	Online
Autosampler	Agilent	Unknown	CN12090158	Unknown	Working	126	7007	Online



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Appendix G



# POST-CLOSURE CARE INSPECTION FORM CCR SURFACE IMPOUNDMENT CLOSURE BAILLY GENERATING STATION

ITEM		RESPONSE		REPAIR/ MAINTENANCE REQUIRED		NCE D	OBSERVATIONS/COMMENTS
				YES			
	PRIM	ARY S	SETTL	EMEN	<b>PON</b>	D NO.	1
Final Soil Backfill							
Pollinator habitat quality – e.g. stressed or missing?							
Vegetation other than pollinator habitat present?							
Erosion rills/gullies present?							
Settlement/subsidence present?							
Accumulated surface water present?							
Slope stability issues?							
Evidence of burrowing animals?							
Surface Water Management System							
Storm Water Collection Ditch							
Pollinator habitat quality – e.g. stressed or missing?							
Vegetation other than pollinator habitat present?							
Erosion issues?							
Sediment issues?							
Obstructions/blockages present?							
Evidence of burrowing animals?							
Culvert							
Culvert quality – e.g. present and/or crushed?							
Obstructions/blockages present?							
Access Roads							
Erosion issues?							
Surface quality – e.g. missing, broken, etc.?							
Groundwater Monitoring System							
Monitoring wells/piezometers in god condition?							
Protective casings present and in good condition?							
Protective casing locked?							
Concrete pads in good condition?							
Locks in good working condition?							
Monitoring well labels present and legible?							
Miscellaneous			1 1				
Pollinator habitat needs to be mowed?							
Site benchmarks and other survey control in good							
condition?							

ITEM	RESPONSE YES NO NA	REPAIR/ MAINTENANCE REQUIRED YES NO NA	OBSERVATIONS/COMMENTS						
PRIMARY SETTLEMENT POND NO.1									
COMMENTS									



# POST-CLOSURE CARE INSPECTION FORM CCR SURFACE IMPOUNDMENT CLOSURE BAILLY GENERATING STATION

ITEM		SPON		REQUIRED			OBSERVATIONS/COMMENTS
				YES			
	SECON	IDAR	SET	<b>FLEME</b>	NT PO		D. 1
Final Soil Backfill			1			1	
Pollinator habitat quality – e.g. stressed or missing?							
Vegetation other than pollinator habitat present?							
Erosion rills/gullies present?							
Settlement/subsidence present?							
Accumulated surface water present?							
Slope stability issues?							
Evidence of burrowing animals?							
Surface Water Management System							
Storm Water Collection Ditch							
Pollinator habitat quality – e.g. stressed or missing?							
Vegetation other than pollinator habitat present?							
Erosion issues?							
Sediment issues?							
Obstructions/blockages present?							
Evidence of burrowing animals?							
Culvert							
Culvert quality – e.g. present and/or crushed?							
Obstructions/blockages present?							
Access Roads							
Erosion issues?							
Surface quality – e.g. missing, broken, etc.?							
Groundwater Monitoring System							·
Monitoring wells in good condition?							
Protective casings present and in good condition?							
Protective casing locked?							
Concrete pads in good condition?							
Locks in good working condition?							
Monitoring well labels present and legible?							
Miscellaneous	1	<u>.</u>	1		L		
Pollinator habitat needs to be mowed?							
Site benchmarks and other survey control in good condition?							

ITEM	RESPONSE YES NO NA	REPAIR/ MAINTENANCE REQUIRED YES NO NA	OBSERVATIONS/COMMENTS
	SECONDARY SET	LEMENT POND NO	D. 1
COMMENTS			



# POST-CLOSURE CARE INSPECTION FORM CCR SURFACE IMPOUNDMENT CLOSURE BAILLY GENERATING STATION

ITEM	RESPONSE		REPAIR/ MAINTENANCE REQUIRED		NCE D	OBSERVATIONS/COMMENTS	
				YES			
	PRIM		SETTL	EMEN	Γ ΡΟΝ	D NO.	2
Final Soil Backfill							
Pollinator habitat quality – e.g. stressed or missing?							
Vegetation other than pollinator habitat present?							
Erosion rills/gullies present?							
Settlement/subsidence present?							
Accumulated surface water present?							
Slope stability issues?							
Evidence of burrowing animals?							
Surface Water Management System							
Storm Water Collection Ditch							
Pollinator habitat quality – e.g. stressed or missing?							
Vegetation other than pollinator habitat present?							
Erosion issues?							
Sediment issues?							
Obstructions/blockages present?							
Evidence of burrowing animals?							
Culvert							
Culvert quality – e.g. present and/or crushed?							
Obstructions/blockages present?							
Access Roads							
Erosion issues?							
Surface quality – e.g. missing, broken, etc.?							
Groundwater Monitoring System							
Monitoring wells in good condition?							
Protective casings present and in good condition?							
Protective casing locked?							
Concrete pads in good condition?							
Locks in good working condition?							
Monitoring well labels present and legible?							
Miscellaneous							·
Pollinator habitat needs to be mowed?							
Site benchmarks and other survey control in good							
condition?							

ITEM	RESPONSE YES NO NA	REPAIR/ MAINTENANCE REQUIRED YES NO NA	OBSERVATIONS/COMMENTS						
PRIMARY SETTLEMENT POND NO.2									
COMMENTS									



# POST-CLOSURE CARE INSPECTION FORM CCR SURFACE IMPOUNDMENT CLOSURE BAILLY GENERATING STATION

ITEM		RESPONSE MAINTENAN REQUIRE		NCE D	OBSERVATIONS/COMMENTS		
	YES			YES		NA	
		BO	ILER	SLAG F	POND		
Final Soil Backfill	1	1	1		T	1	
Pollinator habitat quality – e.g. stressed or missing?							
Vegetation other than pollinator habitat present?							
Erosion rills/gullies present?							
Settlement/subsidence present?							
Accumulated surface water present?							
Slope stability issues?							
Evidence of burrowing animals?							
Access Roads							
Storm Water Collection Ditch							
Pollinator habitat quality – e.g. stressed or missing?							
Vegetation other than pollinator habitat present?							
Erosion issues?							
Sediment issues?							
Obstructions/blockages present?							
Evidence of burrowing animals?							
Culvert							
Culvert quality – e.g. present and/or crushed?							
Obstructions/blockages present?							
Access Roads							
Erosion issues?							
Surface quality – e.g. missing, broken, etc.?							
Groundwater Monitoring System				P.	1		
Monitoring wells in good condition?							
Protective casings present and in good condition?							
Protective casing locked?							
Concrete pads in good condition?							
Locks in good working condition?							
Monitoring well labels present and legible?							
Miscellaneous			1	1	1		1
Pollinator habitat needs to be mowed?							
Site benchmarks and other survey control in good							
condition?							

ITEM	RESPONSE YES NO NA	REPAIR/ MAINTENANCE REQUIRED YES NO NA	OBSERVATIONS/COMMENTS
	BOILER	SLAG POND	
COMMENTS			

Appendix H

# SOLID WASTE CLOSURE PLAN for RWS I, II, & III, C/D SITE, and NON-MSWLF FACILITIES

# I. GENERAL INFORMATION

- A. Facility Name: Bailly Generating Station
- **B.** Facility Location: 246 Bailly Station Road

Chesterton, Indiana 46304

- C. Facility County: Porter
- **D. Facility Solid Waste Permit No.:** NA
- E. Total Fill Acreage (See Instructions): 16.5
- **II. CLOSURE ACTIVITIES** (Provide a description of the steps that will be used to partially close, if applicable, and finally close the facility. See instructions for items that should be included.)

For each of the four CCR surface impoundments, the steps required to implement closure include the following general construction activities:

- A. Mobilization, demolition, installation of erosion and sediment control.
- **B.** Removal of free and interstitial water from CCR material. Treatment of interstitial and contact water.
- C. Excavation, conditioning the CCR material, (if required), loading of CCR material.
- **D.** Transport of excavated materials (including CCR material and permitted components of the bottom liner system) to the NIPSCO Rollin M. Schahfer Generating Station (RMSGS) onsite landfill.
- **E.** Grade former surface impoundment embankment materials to establish the final design surface contours.
- F. Develop soil cover borrow area(s).Furnish, transport, place, grade, and compact the soil borrow material to aid in establishing the final design surface contours.Installing storm water management controls.
- **G.** Furnish, transport, place, and grade topsoil
- H. Seeding

The closure of the surface impoundments will be performed as a closure by removal including the previously listed construction activities.

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After completion of the CCR material excavation, the perimeter embankment soil material will be graded and augmented with cover soil material, as required, to construct the final surface contours and grades shown on the drawings presented in Appendix A of the Closure Application. The contours and grades are designed to also include surface water controls and storm water management. A minimum of six inches of topsoil material will be placed on top of the cover soil material. This soil material/topsoil configuration following the removal of the CCR materials is being used in lieu of the typical final cover cap system used for an in-place closure method. As such, the closure costs provided will be for the soil material and topsoil configuration.

**III. LABOR, MATERIALS, & TESTING** (Provide a listing of items necessary to close the facility. For items that will vary depending upon the number of acres to be closed, the quantities should be indicated on a per acre basis.)

A. Item	B. Quantity	C. Units
Cover soil material	103,000	Cubic yards
Topsoil material	22,500	Cubic yards
Fill for ramp	10,000	Cubic yards
Silt fence	6,000	Linear feet
Construction fencing	4,000	Linear feet
Rock check dams	50	Each
Insituform 36-inch dia. pipe	550	Linear feet
Insituform manhole	20	Linear feet
Erosion control matting	37,500	Square yards
Seeding	21.5	Acres

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# IV. EXPECTED YEAR OF CLOSURE

A.	Expected Year of Closure (begin closure in 2021)	2024
B.	Total Time Required to Close Facility (See instructions)	3 years

C. Time Required for Intermediate Steps in Closure (Provide a description of intermediate closure activities and the time required. See instructions.)

Not Applicable. Total acreage of the surface impoundments is 16.5 acres and closure of the entire Bailly surface impoundments area will be completed sequentially.

0%

\$39

# V. COST PER ACRE FOR FINAL COVER & VEGETATION

Note: CCR material will be removed and soil material overlain by topsoil will be placed. Thus, no final cover system is being installed.

- A. <u>What Percent of Final Cover and topsoil is Available from Areas that are Controlled,</u> and Will be Controlled through Post-Closure by the Permittee?
  - 1. % of final cover (soil material to construct the final design grades) <u>0%</u>
  - 2. Describe location of sources The off-site soil material will be obtained by the

contractor performing the surface impoundments closure activities from a

borrow source(s) in strict accordance with the technical specifications and

approval of NIPSCO.

- 3. % of topsoil
- 4. Describe location of sources The off-site topsoil material will be obtained by the

contractor performing the surface impoundments closure activities from a

borrow source(s) in strict accordance with the technical specifications and

approval of NIPSCO.

B. Cost Per Acre for Acquisition, Placement, & Compaction of Two Feet of Final Cover

NOTE: The costs provided in Section B are for the acquisition, placement, and compaction of the volume of soil material required to create the final surface contours and grades shown on the drawings presented in Appendix A of the Closure Application. This is not a final cover system and the information is provided to fit this form as close as possible.

- 1. Acquisition
  - a. Quantity of clay (soil material) needed per acre (cy/acre)
    b. Excavation unit cost (\$/cy) (if obtained on-site)
    Included in c.
    - c. Purchase unit cost (\$/cy) (if obtained off-site)

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		d. Delivery unit cost (\$/cy) (if obtained off-site)	Included in c.
		e. Acquisition cost (\$/acre)	
		Line 1a*Line 1b* (or) Line 1a* (Line 1c + Line 1d)	\$243,438
	2.	Placement and Compaction	
		a. Placement/spreading unit cost	Included in 1.
		b. Compaction unit cost (\$/cy)	Included in 1.
		c. Placement and Compaction Cost (\$/acre) Line 1a* (Line 2a + Line 2b)	Included in 1.
	3.	Testing	
		a. Soil classification (if soil source is of variable quality)(\$/Acre)	Included in 1.
		b. Survey control for cover thickness and proper slopes (\$/acres	Included in 1.
		c. Density testing (\$/acre)	Included in 1.
		d. Testing Cost (\$/acre) Line 3a + Line 3b + Line 3c	Included in 1.
	4.	Clay Cover Cost (\$/acre) Line 1e+ Line 2c + Line 3d	Same as 1e.
C.	<u>Cost</u>	Per Acre for Acquisition & Placement of Topsoil	
	1.	Acquisition	
		a. Quantity of topsoil needed per acre (cy/acre)	806
		b. Excavation unit cost (\$/cy)	Included in 1c.
		c. Purchase unit cost (\$/cy)	\$45
		d. Delivery unit cost (\$/cy)	Included in 1c.

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		e.	Acquisition cost (\$/acre)	
			Line 1a*Line 1b* (or) Line 1a* (Line 1e + Line 1d)	\$36,270
	2.	Plac	cement	
		a.	Spreading unit cost (\$/cy)	Included in 1c.
		b.	Placement cost (\$/acre)	Included in 1c.
	3.	Тор	osoil Cost (\$/acre)	
			e 1e+ Line 2b	Same as 1e.
D.	Cost	t Per	Acre to Establish Vegetation	
	1.	Veg	getation	
		a.	Seeding unit cost (\$/acre)	\$6,500
		b.	Fertilization unit cost (\$/acre)	Included in 1a.
		c.	Mulching unit cost (\$/acre)	Included in 1a.
		d.	Vegetation Establishment Cost (\$/acre) Line 1a + Line 1b + Line 1c	\$6,500
E.	Cost	t Per	Acre to Certify Closure	
	1.	Reg	gistered Professional Engineer	
		a.	Initial review of closure plan (hrs)	40
		b.	Total number of inspections	8
		c.	Inspection time required (hrs/visit)	16
		d.	Total inspection time (hrs) Line 1b*Line 1c	128
		0	Prepare final documentation (hrs)	40
		e.	repare final documentation (ins)	40
		f.	Total engineer time (hrs) Line 1a + Line 1d + Line 1e	208
		g.	Engineer unit labor cost (\$/hr)	\$125
		h.	Professional engineer cost (\$) Line 1f*Line1g	\$26,000
		i.	Area of site permitted for filling (acres)	16.5

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	j. Closure Certification Cost (\$/acre) Line 1h/Line1i	\$1,576
<u>Oth</u>	er Costs Per Acre for Final Cover and Vegetation	
1.	Other Costs (\$/acre)	\$0
Tota	l of Items B through F (Must not be less than \$5,000)	\$287,784

### VI. **OTHER CLOSURE COSTS** (Give these on a total facility basis rather than per acre.)

Notification of Property Deed A. 2,500

#### Β. Other Costs

Cost for items such as drainage features, installation of gas vents, etc., should be delineated in this section.

	1.	<u>Activity</u>	Cost
		Mobilization, field surveying, demolition	\$1,576,611
		Site preparation, erosion control	\$1,435,760
		Dewatering, water treatment	\$5,470,650
		CCR Removal, excavate and load	\$3,867,150
		Hauling CCR to the onsite RMSGS landfill, site controls	\$5,349,850
		Blast furnace slag and geomembrane removal and disposal	\$3,460,543
		Site restoration	\$1,172,698
	2.	Total of Other Costs (\$)	\$22,333,762
C. 7	Fotal	(Add costs from Sections A. and B.)	\$22,335,762
VII. CLO	SUR	E COST ESTIMATE (Multiply Item I.E. by	

# Item V.G. and then add Item (VI.C.):

*A contingency greater than 10 percent is included in the costs.

### Page 9 of 10 Closure Form RWS I, II, & III, C/D SITE, non-MSWLF VIII. ADDITIONAL INFORMATION REQUIRED FOR FACILITIES PROVIDING FINANCIAL ASSURANCE ON AN INCREMENTAL BASIS

NO

- A. <u>Will Closure Financial Assurance be Provided on an Incremental Basis?</u> (If the answer to this question is no, skip to Item IX.)
- B. <u>Map of Areas of Waste Deposition</u> (Attach a copy of the facility's final contour map which shows the maximum areas of waste deposition on a yearly basis for the remaining life of the facility.) NOT APPLICABLE
- C. <u>Maximum Areas of Waste Deposition & Closure Costs</u> (Fill in the following table for each remaining year of the facility's life.)

Year	Max. Area of Waste Deposition (cumulative acres) (end of year)	Closure Cost w/o Partial Closure (\$)	Area Partially Closed (cumulative acres) (start of year)	Increm. Closure (\$)

# NOT APPLICABLE

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### IX. ENGINEER CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who managed the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge, 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. I further certify that I am authorized to submit this information.

Signature: MAQ	Date: 1 20 2021
Name: Richard A. Isaac	MARDA /S
Address: _ 8469 Kingsley Drive	2 REGISTER FOR
Reynoldsburg, Ohio 43068	No. 11700594     STATE OF
<b>Telephone No.:</b> (614) 440-9923	WDIANA CALINA
Professional Engineer Registration No.: Indiana 11700594	Manual Martin

# SOLID WASTE POST-CLOSURE PLAN for RWS I, II, & III, C/D SITE, and NON-MSWLF FACILITIES

# I. GENERAL INFORMATION

II.

А.	Facility Name: Bailly Generating Station							
B.	Facility Location:    246 Bailly Station Road							
	Chesterton, Indiana 46304							
C.	Facility County: Porter							
D.	Facility Solid Waste Permit No.: NA							
POS	T-CLOSURE CONTACT PERSON							
А.	Name: Jeff Neumeier							
B.	Address: 246 Bailly Station Road							
	Chesterton, Indiana 46304							
C.	Telephone No.:       (219) 787-7337 (Bailly Generating Station Office)							
	(219) 873-7337 (Michigan City Generating Station Office)							
	(219) 680-7098 (Mobile)							
D.	E-Mail Address: JNeumeier@nisource.com							

**III. GROUNDWATER MONITORING ACTIVITIES** (Provide a description of planned groundwater monitoring activities including the frequency of the activities. See instructions.)

The post-closure groundwater monitoring program includes 20 existing and one proposed groundwater wells that will monitor groundwater quality near the surface impoundments shown in the following table:

		Tara af Carlera	Screen	Screen Interval		
	Monitoring Well Locations	Top of Casing Elevation (ft-msl)	Top (ft-bgs)	Bottom (ft-bgs)	Well Diameter (inches)	
Deltarent	PC-GAMW-01	624.53	13	23	2	
Background	PC-GAMW-01B	623.76	27	32	2	
	PC-GAMW-02	624.20	13	23	2	
	PC-GAMW-03	624.35	13	23	2	
	PC-GAMW-04	624.12	13	23	2	
	PC-GAMW-06	626.97	17	27	2	
	PC-GAMW-07	629.04	19	29	2	
	PC-GAMW-08	624.35	15	25	2	
	PC-GAMW-08B	623.73	30	40	2	
	PC-GAMW-10	631.94	21	31	2	
	PC-GAMW-11	625.04	14	24	2	
Downgradient	PC-GAMW-11C	625.16	29	34	2	
	PC-GAMW-12R	TBD	15	25	2	
	PC-GAMW-13	625.34	13	23	2	
	PC-GAMW-14	624.32	13	23	2	
	PC-GAMW-16	629.92	20	30	2	
	PC-GAMW-17	623.96	14.5	24.5	2	
	PC-GAMW-17B	624.12	28.5	33.5	2	
	PC-GAMW-18	626.87	20	30	2	
	PC-MW-105	622.05	8	18	2	
	PC-MW-112	628.07	17	27	2	

Notes:

Locations surveyed in US State Plane Indiana West Zone NAD 1983, NAVD 1988 (ft)

ft-bgs = feet below ground surface

ft-msl = feet above mean sea level

TBD = to be determined

Post-closure monitoring frequency will be as follows:

NIPSCO LLC will begin post-closure monitoring during the first calendar quarter after completion of the impoundment closure construction activities and submittal of the Closure Certification Report by the certifying engineer. NIPSCO LLC will perform quarterly postclosure monitoring for a minimum of eight consecutive quarters (i.e., two years) to assess 1) changes in groundwater quality and 2) potential changes in groundwater flow direction, both related to conditions associated with closure activities (i.e., source removal, emplacement of a low permeability cover system, surface water [precipitation run-on] diversion). The two-year quarterly monitoring period is necessary to assist NIPSCO LLC with refining the Conceptual Site Model that will be used to assess whether additional groundwater monitoring or management activities are required, if any.

Following the initial two-year quarterly monitoring events, NIPSCO LLC will continue postclosure groundwater monitoring on a semi-annual basis for parameters appropriate to detect/assess changes in groundwater quality because of completed closure activities. NIPSCO LLC will maintain consistency with the ongoing semi-annual CCR Rule monitoring program, for which sampling is currently conducted primarily in April and October. The initial semi-annual event will be scheduled for the earlier of either April or October following the final two-year quarterly monitoring event. NIPSCO LLC will continue semi-annual groundwater monitoring for a minimum of 28 years (30-years total), or a shorter duration and/or frequency if changes in regulations allow. If groundwater concentrations do not meet the groundwater benchmarks, NIPSCO LLC will continue groundwater monitoring beyond the nominal 30 years.

Consistent with the CCR Rule monitoring requirements, the post-closure monitoring parameter list will include:

Field-based water quality parameters	pH, specific conductivity, temperature, turbidity, oxidation-reduction potential
40 CFR, Part 257 Appendix III Detection Monitoring Parameters	Boron, calcium, chloride, fluoride, sulfate, total dissolved solids, pH
40 CFR, Part 257 Appendix IV Assessment Monitoring Parameters	Antimony, arsenic, barium, beryllium, cadmium, chromium, cobalt, fluoride, lead, lithium, mercury, molybdenum, selenium, thallium, radium 226 and 228 (combined)

A detailed discussion of the groundwater monitoring program for the former surface impoundments is presented in Section 9.1 in the Closure Application.

**IV. MAINTENANCE ACTIVITIES** (Provide a description of planned maintenance activities and the frequency at which they will be performed. See instructions.)

Inspections will be performed biannually for the following items:

- Final cover area
- Surface water management system
- Groundwater monitoring program
- Site benchmarks and other survey control integrity.

The maintenance activities will depend on the issues observed during the biannual inspections throughout the post-closure care period. The post-closure care plan addresses how the identified issues will be handled in a general sense, with specific remedial efforts determined based on the severity of each identified issue. A schedule for addressing identified issues will be included in the inspection report, again, determined based on the severity of each identified issue.

The maintenance activity for each specific issue will be performed as soon as practical. Initiation of maintenance activities and length of time required to address each issue will vary depending on the issue severity. For example, replacing a missing or broken lock on a groundwater monitoring well protective casing can be performed in a much shorter timeframe than repairing erosion gullies/rills or settlement in the final cover area.

RWS I, II, & III, C/D SITE, non-MSWLF A detailed discussion of the post-closure inspection/maintenance activities for the former surface impoundments is presented in Section 9.2 and Section 9.3, respectively in the Closure Application.

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V. **POST-CLOSURE COST ESTIMATE** (See instructions. Note that these estimates are to be presented for the entire post-closure care period rather than on a year basis.)

# A. Cost for Semi-Annual Inspections and Reports

1. Inspection

2.

3.

a.	Number of inspections during post-closure period (semi-annual inspections for 30 years)	60
b.	Inspector time required (hrs/insp)	8
c.	Inspector unit cost (\$/hr)	\$95
d.	Inspection cost (\$) Line 1a*Line 1b*Line 1c	\$45,600
Rep	oort Preparation	
a.	Number of reports during post-closure period	60
b.	Cost per report (\$/hr)	\$1,200
c.	Report cost (\$) Line 2a*Line 2b	\$72,000
Ins	pection and Report Cost (\$)	\$117,600

# B. Cost for Maintenance of Final Cover and Vegetation

The cost for cover maintenance and vegetation shall be 10% of the cost per Acre calculated for final cover and vegetation in the closure plan.

1. Final Cover Maintenance

a.	10% of the cost for placement of final cover and Vegetation (as determined in Item V.G. of the Closure Plan)(\$/Acre)	\$28,620
b.	Total area of site permitted for filling (acres)	16.5
c.	Cover Maintenance Cost (\$) Line 1a*Line 1b	\$472,230

# C. Cost for Vegetation Control

Certain areas are required to be mowed per regulation. See instructions.

1. Mowing Mowing frequency (visits/30 years) 60 a. Area to be mowed (acres/visit) 16.5 b. \$150 c. Mowing unit cost (\$/acre) d. Vegetation Control Cost (\$) Line 1a*Line 1b*Line 1c \$148,500 D. **Cost for Maintenance of Access Control & Benchmarks** 1. Access Control Maintenance a. Access control maintenance frequency (visits/30 years) NA b. Amount of fence needing replacement (linear feet/visit) NA c. Fence unit cost (\$/linear foot) NA d. Fence Cost (\$) The access control to the Line 1a*Line 1b*Line 1c former surface impoundments is via the perimeter security fence around the entire BGS facility; therefore, no access control maintenance is required e. Other (\$) NA (Specify) None Access Control Maintenance Cost (\$) f. Line 1d + Line 1e NA 2. Benchmark Maintenance Cost (if any)(\$) \$5,000 3. Access Control & Benchmark Repair Cost (\$) Line 1f + Line 2\$5,000

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### Cost for Leachate Collection System Monitoring and Maintenance E.

1.	Leachate Collection System Inspection	
	a. Inspection frequency (insp/30 years)	NA
	b. Inspection time required (hrs/insp)	NA
	c. Inspection unit labor cost (\$/hr)	NA
	d. Inspection Cost (\$) Line 1a*Line 1b*Line 1c	NA
2.	Leachate Collection System Maintenance	
	a. Number of pumps replaced during post-closure (pumps/30 years)	NA
	b. Pump unit cost (\$/pump)	NA
	c. Other (\$)	NA
	d. Leachate System Maintenance (\$) (Line 2a*Line 2b) + Line 2c	NA
3.	Leachate Collection Monitoring and Maintenance Cost (\$)	1111
	Line 1d + Line 2d	NA
Cos	t for Methane Control System Monitoring and Maintena	ince
1.	Methane Control System Monitoring	
	a. Gas monitoring frequency (visits/30 years)	NA
	<ul> <li>a. Gas monitoring frequency (visits/30 years)</li> <li>b. Time required to monitor (hrs/visit)</li> </ul>	NA NA
	<ul><li>b. Time required to monitor (hrs/visit)</li><li>c. Contract lab technician unit</li></ul>	NA
2.	<ul> <li>b. Time required to monitor (hrs/visit)</li> <li>c. Contract lab technician unit labor cost (\$/hr)</li> <li>d. Gas Monitoring Cost (\$)</li> </ul>	NA NA

F.

Page 7 of 10 Post-Closure Form RWS I, II, & III, C/D SITE, non-MSWLF b. Monitoring wells needing maintenance per visit NA c. Maintenance time required (hrs/well) NA d. Unit labor cost (\$/hr) NA e. Monitoring and Well Maintenance Cost (\$) Line 2a*Line 2b*Line 2c*Line 2d NA 3. Gas Monitoring and Maintenance Cost (\$) Line 1d + Line 2e NA G. **Cost for Groundwater Monitoring System Maintenance** 1. Monitoring Well Maintenance 5 Maintenance frequency (visits/30 years) a. b. Number of monitoring wells needing maintenance per visit 1 Maintenance time required (hrs/well) 10 с. Unit labor cost (\$/hr) \$70 d. e. Monitoring Well Maintenance Cost (\$) Line 1a*Line 1b*Line 1c*Line 1d \$3,500 2. Monitoring Well and Parts Replacement Number of wells needing replacement a. during post-closure period 5 b. Existing monitoring well sealing unit cost (\$/well) \$1,500 c. New monitoring well construction unit cost (\$/well) \$3,800 d. Monitoring Well Replacement Cost (\$) Line 2a*(Line 2b + Line 1c) \$26,500 e. Number of pumps needing replacement during post-closure period 10 \$500 f. Pump unit cost (\$/pump) Pump Cost (\$) \$5,000 g.

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		Line 2e*Line 2f	
	3.	Groundwater Monitoring System Maintenance Cost (\$) Line 1e + Line 2d + Line 2g	\$35,000
H.	Cost	t for Groundwater Monitoring	
	1.	Groundwater Monitoring	
		a. Number of required monitoring wells	21
		<ul> <li>b. Monitoring frequency (semi-annual sampling for 30 years)</li> </ul>	60
		c. Sampling and analysis (\$/well)	\$970.77
		<ul> <li>d. Groundwater Monitoring Cost (\$)</li> <li>Line 1a*Line 1b*Line 1c</li> </ul>	\$1,223,170
I.	Cost	t for Leachate Hauling	
	1.	Leachate Pumping & Hauling	
		a. Leachate removal frequency (visits/30 years)	NA
		b. Quantity to be managed off-site (gallons/visit)	NA
		c. Truck capacity (gallons	NA
		d. Number of loads/visit	
		Line 1b/Line 1c (round up to the nearest integer)	NA
		e. Pumping and transportation unit cost( \$/load)	NA
		<ul><li>f. Leachate Hauling Cost (\$)</li><li>Line 1a*Line 1d*Line 1e</li></ul>	NA
J.	Cost	t for Leachate Disposal	
	1.	Leachate Treatment	
		a. Volume of leachate requiring Disposal (gallons	NA
		b. Disposal unit cost (\$/gal)	NA

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c. Leachate Disposal Cost (\$) Line 1a*Line 1b

#### K. **Other Costs**

Any costs not included in the above items should be included here. These might include drainage ditch, access road, and sedimentation pond maintenance, lift station power costs, etc.

#### 1. Activity

Maintenance of storm water control structures e.g., storm water pond, surface water diversions/ditches/channels, etc.: assume one repair to the storm water pond and surface water diversions/ditches/channels e.g., replace turf reinforcing mat, fix erosion rills/gullies, revegetation, fix/replace rock check dams, etc. during the first five years following completion of the closure activities and once every ten years for the remaining 25 years of the post-closure care period.

Cost

\$26,000

2. Total of Other Costs (\$) \$2,027,500 **Total Post-Closure Cost Estimate (\$)** L.

(Total of preceding categories)

*A contingency greater than 10 percent is included in the costs.

NA

\$26,000

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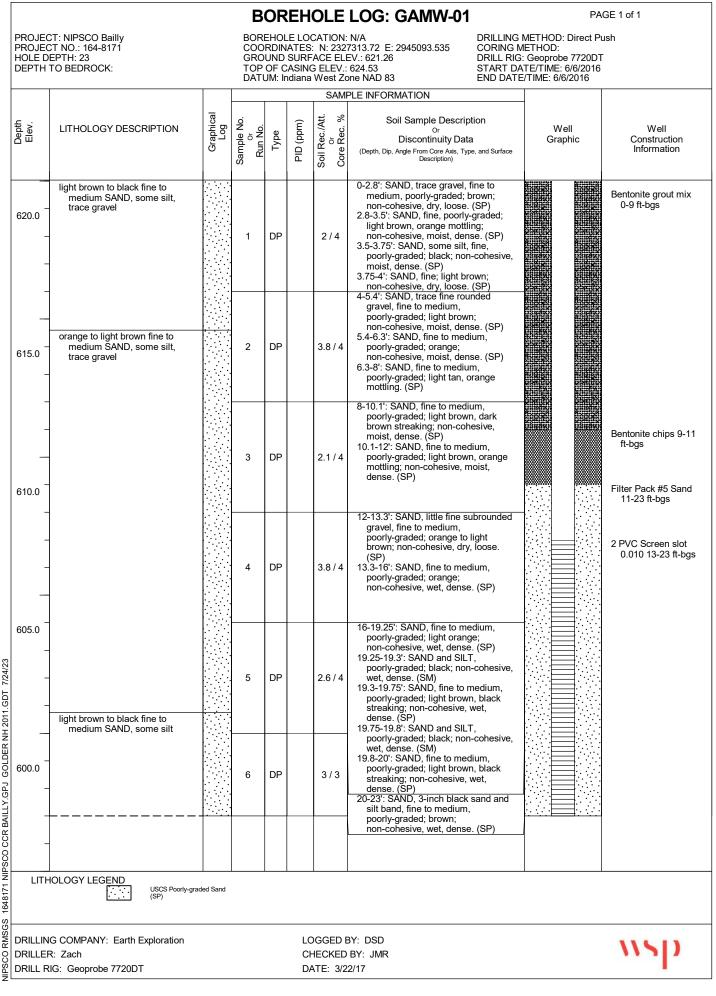
# VI. SIGNATORY CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons who managed the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge, 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. I further certify that I am authorized to submit this information.

Signature: MQD	Date: 1/20/2021
Name: Richard A. Isaac	Numminian and A state
Address: _8469 Kingsley Drive	REGISTER CO
Reynoldsburg, Ohio 43068	No. 11700594
<b>Telephone No.:</b> (614) 440-9923	PR STATE OF WDIANA
Professional Engineer Registration No.: _Indiana 11700594	STONAL ENGINEER

ATTACHMENT 2

Example Soil Boring Log (GAMW-01)



GOLDER NH 2011.GDT 1648171 NIPSCO CCR BAILLY.GPJ RMSGS VIPSCO



From:	HARMLESS, MARTY
То:	<u>McCormick, Debra J</u>
Subject:	SW Program ID 64-014 FW: NIPSCO LLC Bailly Generating Station Post-Closure Groundwater Monitoring Well Network Device Installation Plan Revision 1
Date:	Tuesday, July 2, 2024 2:45:09 PM
Attachments:	NIPSCO LLC Bailly Generating Station Post-Closure Groundwater Monitoring Well Network Device Installation Plan Revision 1.msg

Can you please enter into the VFC?