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MINNESOTA PETROLEUM TANK RELEASE
COMPENSATION BOARD

Application for Reimbursement

PART I APPLICATION PROCESS

(Check One) **Check appropiate Phase and complete the information requested for the Phase checked (See Application Guide).**

[ ] **Phase 1.** MPCA approval of Soil Corrective Action Plan (SCAP)
a) Date of SCAP approval _____ (Attach Copy)
b) Date SCAP was submitted to MPCA _____

[ ] **Phase 2.** Submission of Soil Treatment Letter to MPCA
Date of Soil Treatment Letter _____ (Attach Copy)

[ ] **Phase 3.** MPCA approval of Comprehensive Corrective Action Plan (CCAP)
a) Date of CCAP approval _____ (Attach Copy)
b) Date CCAP was submitted to MPCA _____

[ ] **Phase 4.** Submission of CCAP Installation Letter to MPCA
Date of CCAP Installation Letter _____ (Attach Copy)

[X] **Ongoing Expenses**
Closure Letter from MPCA (Attach Copy)

PART II APPLICANT INFORMATION

Please be advised that the information used to support this application is subject to audit by the MPCA and MDOC.

1. "Responsible Person" [X] "Volunteer" [ ] or "Non-Responsible Person" [ ] (check one) (see application guide)
Name: Conoco Inc. Attn: Mr. Jeff Smail

2. Mailing Address: P.O. Box 2197
Houston, TX 77252-2197 Phone: (713) 293-3568

3. Site ID: Leak # 00000858

4. The applicant is a: [X] Corporation [ ] Partnership [ ] Individual [ ] Other _____

5. Applicant was the owner or operator of the tank from 1955 to 03/08/1983

6. "Volunteer" Applicant owned property from N/A to N/A

7. Has applicant executed any Petrofund assignment agreements? yes___ noX___
Name of assignee _____ (attach copy of agreement)

PART III TANK FACILITY

1. Name of "Tank Facility" **(see application guide)** where the petroleum release occurred:

Former Conoco Store (Presently Rapid Oil Change)

2. Tank Facility address: 1126 South Robert Street

West St. Paul, MN

3. Contact Person at Tank Facility: Mr. Jeff Smail

Phone: (713) 293-3568

4. To the best of your knowledge, list all other persons besides the applicant who were owners or operators of the tank during or after the petroleum release:

Ashland Oil Company purchased the site in 1983.

5. Did any of the persons listed in question 4 incur corrective action costs related to this petroleum release? yes___ no_X_ If yes, list name and address if known:

6. Date when petroleum release was detected: _____

What test was performed to initially establish that a release occurred? Test Borings via Property

7. Date when petroleum release was reported to the MPCA: 10/20/1988

8. a. Which tanks were the source of the release at this tank facility? **(see application guide)**

The source of the release is unknown.

b. What was the cause of the release?

The cause of the release is unknown.

9. Was this tank(s) used only to store heating oil for consumptive use on the premises where stored? (check one) yes _____ no**X**_____

PART IV TANK INFORMATI AND COMPLIANCE

(Note: If you do not know if tanks are registered and/or prior tank removal notice was given, enter "unk" (unknown) for these items. Please do not contact the MPCA for this information.)

Underground Storage Tanks. Complete the following information to reflect the status of your underground storage tanks at the time the release was discovered. Refer to the attachment "Do Underground Storage Tanks and Piping Requirements Apply to Your Petroleum Tank?" and "What Do You Have To Do?/When Do You Have to Act?" to determine the applicability of registration, leak detection, corrosion protection, and spill/overfill protection.

(Please attach additional sheets if more than five tanks are involved.)

Tank	Petroleum Product	Capacity	Type of Tank	Date Installed	Registered Yes/No/Unk	Date Removed
1	Unleaded	10,000	Steel	1973	UNK	03/08/1983
2	Regular	5,000	Steel	1955	UNK	03/08/1983
3	Premium	5,000	Steel	1955	UNK	03/08/1983
4						
5						

	Tanks			Piping		
Tank	Leak Detection	Corrosion Protection	Spill/Overfill Protection	Type of Piping	Leak Detection	Corrosion Protection y/n
1	NONE	NO	NO	Steel	NONE	NO
2	NONE	NO	NO	Steel	NONE	NO
3	NONE	NO	NO	Steel	NONE	NO
4						
5						

Tank	Tank Tightness Test Dates	Piping Tightness Test Dates
1	N/A	N/A
2	N/A	N/A
3	N/A	N/A
4		
5		

* Was 10-day prior tank removal notice given to MPCA (YES/NO/UNK) UNK

* Which office was notified:

St. Paul	UNK
Duluth	
Brainerd	
Detroit Lakes	
Marshall	
Rochester	

* If the tank(s) involved in the release were **removed** after July 9, 1990, complete the following:

Removal Contractor: N/A

MPCA Contractor (NOT Supervisor) Certification Number: N/A

* If the tank(s) involved in the release were **installed** after July 9, 1990, complete the following:

Installation Contractor: N/A

MPCA Contractor (NOT Supervisor) Certification Number: N/A

B. **Aboveground Storage Tanks.** Complete the following information to reflect the status of the aboveground tanks involved in the release at the time the release was discovered.

In describing your secondary containment, specify:

* materials used to construct both the base and the walls, including type and thickness of materials (e.g., 6" compacted clay, 30 mil HDPE, reinforced concrete slap floor/concrete block walls, none)

* how material specifications are known (e.g., permeability tests/dates, installation specifications)

* is the volume of the secondary containment area adequate for the contents of the largest tank ___

TANKS	Contents	Capacity	Date	Registered	Description of Secondary Containment			
SAMPLE	unleaded	15,000	1/1/47	Y	Concrete	6" compact	Perm test	N
1	N/A							
2								
3								

Are there any special circumstances you would like the persons reviewing your application to be aware of?

Please explain: See Attached Documentation

PART IV ELIGIBLE COSTS

1. The Eligible Cost Worksheets attached are for INVESTIGATION costs, CLEAN-UP costs, and CONSULTANT costs. These worksheets must be completed listing each corrective action for which you are requesting reimbursement.

2. Invoices submitted with this application cover the period from 07/14/1994 to 08/08/1995

3. Are any of the costs listed in the Eligible Cost Worksheets in dispute? yes ___ no X
(see applicaton guide)

4. At this time, do you anticipate incurring any Ongoing corrective action costs relative to the petroleum release at this Tank Facility? yes X no ___

If yes, explain briefly what work will be done and an approximate cost of that work.

Costs for operation and maintenance will be incurred.

Approximate Cost: $33,000/year

5. a. Please state the total amount of contaminated soil which was excavated at this site (cubic yards or tons): None

b. What was the soil contamination concentration (total hydrocarbons) N/A ppm?

6. Has the applicant been eligible to recover cleanup costs arising from this petroleum release under any insurance policy at any time since June 4, 1987? yes ___ no X

If yes, provide the following:

Insurance Company	Policy #	Policy Limits	Deductible	Period Covered

7. Total of all eligible costs as listed in the Eligible Cost Worksheets: = $37,605.58

X 90%

= $33,845.02

Insurance Reimbursement (Subtract) - ($0.00)

Total Reimbursement Request (See application guide) = $33,845.02

PART V CONTRACTORS/ NSULTANTS

1 Complete the following for all contractors, subcontractors, consultants, engineering firms or others who performed corrective actions at this release site. (see application guide) **Failure to provide this information of ALL persons who performed corrective action may result in an action to recover any reimbursement which may be paid.** (Attach additional sheets if necessary.)

Name of individual or firm: Dahl & Associates, Inc. PR#: 1009

Mailing address: 4390 McMenemy Street, St. Paul, MN 55127

Contact person: Jennifer Ryan Phone: (612) 490-3782

Name of individual or firm: Twin City Testing Corporation PR#: 1023

Mailing address: 662 Cromwell Avenue, St. Paul, MN 55114

Contact person: _____ Phone: _____

Name of individual or firm: Pace, Inc.

Mailing address: 1710 Douglas Drive North, Mpls, MN 55422

Contact person: _____ Phone: _____

Name of individual or firm: Interpoll Laboratories, Inc. PR#: 1239

Mailing address: 4500 Ball Road, N.E., Circle Pines, MN 55014-1819

Contact person: _____ Phone: _____

Name of individual or firm: Legend

Mailing address: 775 Vandalia Street, St. Paul, MN 55114

Contact person: _____ Phone: _____

2. Describe below any relationship, financial or otherwise, between the applicant and any contractor who performed work at this site:

No relationship exists, financial or otherwise.

PART V CONTRACTORS/CONSULTANTS

1 Complete the following for all contractors, subcontractors, consultants, engineering firms or others who performed corrective actions at this release site. (see application guide) **Failure to provide this information of ALL persons who performed corrective action may result in an action to recover any reimbursement which may be paid.** (Attach additional sheets if necessary.)

Name of individual or firm: Edelmann & Associates, Inc.

Mailing address: 1900 Annapolis Lane, Mpls, MN 55447-0129

Contact person: _____ Phone: _____

Name of individual or firm: _____

Mailing address: _____

Contact person: _____ Phone: _____

Name of individual or firm: _____

Mailing address: _____

Contact person: _____ Phone: _____

Name of individual or firm: _____

Mailing address: _____

Contact person: _____ Phone: _____

Name of individual or firm: _____

Mailing address: _____

Contact person: _____ Phone: _____

2. Describe below any relationship, financial or otherwise, between the applicant and any contractor who performed work at this site:

_____

_____

_____

PART VI CERTIFICATION (See application guide)

A. "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 person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete.

"I certify that if I have submitted invoices for costs that I have incurred but that remain unpaid, I will pay these invoices within 30 days or reciept of reimbursement from the board. I understand that if I fail to do so, the board may demand return of all or a portion of reimbursement paid to me and that if I fail to comply with the board's demand, that the board may recover the reimbursement, plus administrative and legal expenses in a civil action in district court. I understand that I may also be subject to a civil penalty."

Jeff Smail
Signature of Applicant

Witnessed by: Mark Silverstein
Name

Jeff Smail
Name (Please Print)

1/11/96
Date

1/11/96
Date

Every applicant must sign Part A. above. If applicant is a corporation or partnership, the following certification must also be made:

"I further certify that I am authorized to sign and submit this application on behalf of Conoco Inc."

Jeff Smail
Signature

Jeff Smail
Name (Please Print)

Project Manager
Title (See Application Guide, Part VI)

1/11/96
Date

Please send this application and accompanying documents to:

Petroleum Tank Release Compensation Board
Minnesota Department of Commerce
133 East Seventh Street
St. Paul, MN 55101
(612) 297-4017

PART IV ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP

* **Descriptions must be specific as to work performed.**
* **Invoices must be submitted for each cost listed below.**
* **Invoices must contain sufficient detail to verify costs and service entered below.**
* **Duplicate this form if additional worksheets are needed.**

A. SOIL BORINGS/MONITORING WELLS - ETC.

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
				TOTAL	0.00

B. LABORATORY TESTS AND ANALYSIS

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
BTEX/MTBE/TH	DAHL/Twin City Testing	14829	1.00	60.00	60.00
TSS	DAHL/Twin City Testing	14829	1.00	33.00	33.00
BTEX/MTBE/GRO	DAHL/Twin City Testing	15142	5.00	60.00	300.00
BTEX/MTBE/TH	DAHL/Twin City Testing	15142	1.00	120.00	120.00
TSS	DAHL/Twin City Testing	15142	1.00	33.00	33.00
BTEX/THC	DAHL/Twin City Testing	15142	1.00	90.00	90.00
BTEX/MTBE/TH	DAHL/Twin City Testing	15528	1.00	60.00	60.00
TSS	DAHL/Twin City testing	15528	1.00	33.00	33.00
				TOTAL	729.00

PART IV ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP

* **Descriptions must be specific as to work performed.**
* **Invoices must be submitted for each cost listed below.**
* **Invoices must contain sufficient detail to verify costs and service entered below.**
* **Duplicate this form if additional worksheets are needed.**

A. SOIL BORINGS/MONITORING WELLS - ETC.

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
				TOTAL	0.00

B. LABORATORY TESTS AND ANALYSIS

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
BTEX/MTBE/GRO	DAHL/Twin City Testing	15806	5.00	60.00	300.00
BTEX/THC	DAHL/Interpoll	15806	1.00	90.00	90.00
BTEX/MTBE/TPH	DAHL/Twin City Testing	16423	1.00	60.00	60.00
Chem O2	DAHL/Twin City Testing	16423	1.00	21.00	21.00
Tot Susp Sols	DAHL/Twin City Testing	16423	1.00	12.00	12.00
BTEX/MTBE/GRO	DAHL/Twin City Testing	17049	5.00	60.00	300.00
BTEX/MTBE/TPH	DAHL/Twin City Testing	17049	2.00	60.00	120.00
Chem O2 Demand	DAHL/Twin City Testing	17049	1.00	21.00	21.00
				TOTAL	924.00

PART IV ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP

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* Invoices must be submitted for each cost listed below.
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* Duplicate this form if additional worksheets are needed.

A. SOIL BORINGS/MONITORING WELLS - ETC.

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
				TOTAL	0.00

B. LABORATORY TESTS AND ANALYSIS

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
Tot Diss Sols	DAHL/Twin City Testing	17049	1.00	12.00	12.00
BTEX/THC	DAHL/Interpoll	17049	1.00	90.00	90.00
Chemical Oxygen Demand	DAHL/Pace	17332	1.00	24.00	24.00
Solids	DAHL/Pace	17332	1.00	15.00	15.00
Volatile Petroleum Compound	DAHL/Pace	17332	1.00	45.00	45.00
Chemical Oxygen Demand	DAHL/Pace	17332	1.00	15.00	15.00
Solids	DAHL/Pace	17332	1.00	10.00	10.00
Volatile Petroleum Compound	DAHL/Pace	17332	1.00	45.00	45.00
				TOTAL	256.00

PART IV ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP

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* **Duplicate this form if additional worksheets are needed.**

A. SOIL BORINGS/MONITORING WELLS - ETC.

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
				TOTAL	0.00

B. LABORATORY TESTS AND ANALYSIS

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
Chemical Oxygen Demand	DAHL/Pace	17681	1.00	15.00	15.00
Solids	DAHL/Pace	17681	1.00	10.00	10.00
Volatile Petroleum Compound	DAHL/Pace	17681	7.00	45.00	315.00
Chemical Oxygen	DAHL/Pace	17931	1.00	15.00	15.00
Solids	DAHL/Pace	17931	1.00	10.00	10.00
Volatile Petroleum Compound	DAHL/Pace	17931	1.00	45.00	45.00
Chemical Oxygen Demand	DAHL/Pace	18515	1.00	15.00	15.00
Solids	DAHL/Pace	18515	1.00	10.00	10.00
				TOTAL	435.00

PART IV ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP

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* **Duplicate this form if additional worksheets are needed.**

A. SOIL BORINGS/MONITORING WELLS - ETC.

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
				TOTAL	0.00

B. LABORATORY TESTS AND ANALYSIS

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
Volatile Petroleum Compound	DAHL/Pace	18515	1.00	45.00	45.00
Charcoal Tube	DAHL/Legend	18748	1.00	50.00	50.00
Chemical Oxygen Demand	DAHL/Pace	18748	1.00	15.00	15.00
Solids	DAHL/Pace	18747	1.00	10.00	10.00
Volatile Petroleum Compound	DAHL/Pace	18747	7.00	45.00	315.00
BTEX/MTBE/GRO	DAHL/Twin City Testing	16737	1.00	60.00	60.00
Chem O2 Demand	DAHL/Twin City Testing	16737	1.00	21.00	21.00
Tot Susp Sols	DAHL/Twin City Testing	16737	1.00	12.00	12.00
				TOTAL	528.00

PART IV ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP

* **Descriptions must be specific as to work performed.**
* **Invoices must be submitted for each cost listed below.**
* **Invoices must contain sufficient detail to verify costs and service entered below.**
* **Duplicate this form if additional worksheets are needed.**

E. WATER TREATMENT

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
System Van	DAHL & Associates, Inc.	14829	1.00	25.00	25.00
System Maintenance			.50	41.00	20.50
Mob/System Maintenance			2.50	55.00	137.50
System Maintenance		15142	1.25	41.00	51.25
System Maintenance		15528	6.00	41.00	246.00
Mob/System Maintenance			3.00	55.00	165.00
Load Equipment		15806	.75	41.00	30.75
System Maintenance/Mobilization			16.50	55.00	907.50
Electrical Expense			1.00	24.92	24.92
Mileage			54.00	.48	25.92
System Maintenance/Mobilization		16133	13.00	54.00	702.00
System Service Van			1.00	25.00	25.00
Mob/System Maintenance/Load Equip		16423	13.75	54.00	742.50
System Service Van			2.00	25.00	50.00
System Service Van		17049	1.00	25.00	25.00
Mob/System Maintenance			1.50	54.00	81.00
System Service Van		17681	4.00	25.00	100.00
System Maintenance/Mobilization			19.25	54.00	1,039.50
System Maintenance			1.50	41.00	61.50
Mileage		17931	128.00	.48	61.44
					0.00
				TOTAL	4,522.28

PART IV ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP

* **Descriptions must be specific as to work performed.**
* **Invoices must be submitted for each cost listed below.**
* **Invoices must contain sufficient detail to verify costs and service entered below.**
* **Duplicate this form if additional worksheets are needed.**

E. WATER TREATMENT

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
Mobilization/System Maintenance	DAHL & Associates, Inc.	17931	11.50	54.00	621.00
Pump Repair	DAHL/Edelmann & Associates		1.00	145.22	145.22
System Service Van	DAHL & Associates, Inc.	18230	1.00	25.00	25.00
Mobilization System Maintenance			3.00	54.00	162.00
Electrical Expense			1.00	182.10	182.10
Electrical Expense		18515	1.00	9.36	9.36
System Service Van		18748	1.00	25.00	25.00
Mobilization/System Maintenance			3.50	54.00	189.00
Monitoring Cables			1.00	276.05	276.05
Electrical Expense			1.00	503.80	503.80
Electrical Expense			1.00	147.02	147.02
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
				TOTAL	2,285.55

PART IV ELIGIBLE COST WORKSHEET - INVESTIGATION AND CLEAN-UP

* **Descriptions must be specific as to work performed.**
* **Invoices must be submitted for each cost listed below.**
* **Invoices must contain sufficient detail to verify costs and service entered below.**
* **Duplicate this form if additional worksheets are needed.**

J. REPORT PREPARATION; DATA COLLECTION; OPERATION OVERSIGHT AND MAINTENANCE; SYSTEM MONITORING; CORRESPONDENCE; MILEAGE; POSTAGE; PER DIEM

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
Mileage	DAHL & Associates, Inc.	14829	42.00	.38	15.96
Water Level Indicator			1.00	15.00	15.00
Magnehelic Gauge Set			1.00	10.00	10.00
108 Flame Ionization Detector			1.00	115.00	115.00
PH Meter			1.00	16.00	16.00
1/3 Vacuum Pump			1.00	15.00	15.00
12 V Air Sampling Pump			1.00	40.00	40.00
Draeger Pump			1.00	10.00	10.00
Well Construction			.25	24.00	6.00
Administrative/Water Data			1.25	35.00	45.00
Water Sample/Data Collection			9.00	41.00	369.00
Data Collection			1.00	55.00	55.00
Work Plan/System Data			5.25	70.00	367.50
Monitoring Well Permit			1.00	324.00	324.00
Mileage		15142	60.00	.38	22.80
Magnehelic Gauge Set			1.00	10.00	10.00
Water Level Indicator			2.00	15.00	30.00
108 Flame Ionization Detector			1.00	115.00	115.00
Dissolved Oxygen Meter			1.00	20.00	20.00
Draeger Pump			1.00	10.00	10.00
				TOTAL	1,611.26

PART IV ELIGIBLE COST WORKSHEET - INVESTIGATION AND CLEAN-UP

* **Descriptions must be specific as to work performed.**
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* **Duplicate this form if additional worksheets are needed.**

J. REPORT PREPARATION; DATA COLLECTION; OPERATION OVERSIGHT AND MAINTENANCE; SYSTEM MONITORING; CORRESPONDENCE; MILEAGE; POSTAGE; PER DIEM

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
1/3 Hp Vacuum Pump	DAHL & Associates, Inc.	15142	1.00	15.00	15.00
Administrative			.25	35.00	8.75
Air Samples/Water Sample/Mob			10.25	41.00	420.25
Data Collection			1.00	55.00	55.00
Work Plan/Administrative/Report			14.25	70.00	997.50
Site Inspection/Annual Report			1.25	85.00	106.25
Disposable Check Valve Bailer			1.00	42.14	42.14
Mileage		15528	105.00	.38	39.90
Magnehelic Gauge Set			2.00	10.00	20.00
Water Level Indicator			2.00	15.00	30.00
108 Flame Ionization Detector			2.00	115.00	230.00
Dissolved Oxygen Meter			1.00	20.00	20.00
1/3 Hp Vacuum Pump			2.00	15.00	30.00
Draeger Pump			2.00	10.00	20.00
12 V Air Sampling Pump			1.00	40.00	40.00
Portable Compressor			1.00	24.00	24.00
1" Sandpiper Diaphragm			1.00	24.00	24.00
Water Data/Administrative			2.75	35.00	96.25
Field Services/Mob/Data Collection			13.75	41.00	563.75
Load Equipment			.50	50.00	25.00
				TOTAL	2,807.79

PART IV ELIGIBLE COST WORKSHEET - INVESTIGATION AND CLEAN-UP

* **Descriptions must be specific as to work performed.**
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* **Duplicate this form if additional worksheets are needed.**

J. REPORT PREPARATION; DATA COLLECTION; OPERATION OVERSIGHT AND MAINTENANCE; SYSTEM MONITORING; CORRESPONDENCE; MILEAGE; POSTAGE; PER DIEM

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
Mobilization/Data Collection	DAHL & Associates, Inc.	15528	2.50	55.00	137.50
Water Data/Work Plan			12.75	70.00	892.50
Sampling/Monitor			.50	85.00	42.50
Job Related Expense			1.00	4.16	4.16
Mileage		15806	38.00	.38	14.44
Water Data/Administrative			2.75	35.00	96.25
Air Samples/Water Sample			1.00	41.00	41.00
Data Collection/Field Services			8.50	55.00	467.50
Work Plan/Sampling/Monitor			20.50	70.00	1,435.00
Recovery System Data			.75	85.00	63.75
Disposable Check Valve Bailer			1.00	42.00	42.00
Reducing Brush Hex Head			1.00	16.19	16.19
Mileage		16133	36.00	.38	13.68
Magnhelic Gauge Set			1.00	10.00	10.00
Water Level Indicator			1.00	15.00	15.00
128 Flame Ionization Detector			1.00	115.00	115.00
Water Data/Discharge Report			3.50	35.00	122.50
Mob/Water Sample/Data Collection			3.75	41.00	153.75
Data Collection/Field Services			1.75	54.00	94.50
					0.00
				TOTAL	3,777.22

PART IV ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP

* **Descriptions must be specific as to work performed.**
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* **Duplicate this form if additional worksheets are needed.**

J. REPORT PREPARATION; DATA COLLECTION; OPERATION OVERSIGHT AND MAINTENANCE; SYSTEM MONITORING; CORRESPONDENCE; MILEAGE; POSTAGE; PER DIEM

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
Work Plan	DAHL & Associates, Inc.	16133	7.50	74.00	555.00
Water Data/Work Plan			1.25	86.00	107.50
Fire Equipment			1.00	84.69	84.69
Mileage		16423	16.00	.38	6.08
Magnehelic Gauge Set			1.00	10.00	10.00
Water Level Indicator			1.00	15.00	15.00
128 Flame Ionization Detector			1.00	115.00	115.00
1/3 Hp Vacuum Pump			1.00	15.00	15.00
Administrative/Soil Test Boring			4.25	30.00	127.50
Mob/Water Sample/Data Collection			8.50	41.00	348.50
Water Flow Direction			.75	42.00	31.50
Mob/Data Collection			2.75	54.00	148.50
Work Plan/Report/Water Data			14.75	74.00	1,091.50
Sampling/Monitor/Water Data			1.00	86.00	86.00
Couplings/Locks			1.00	10.62	10.62
Shaft Seal/O-Ring Viton			1.00	124.22	124.22
STD Ring Gasket			1.00	1.36	1.36
Registered Well Permit			1.00	324.00	324.00
					0.00
					0.00
				TOTAL	3,201.97

PART IV ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP

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J. REPORT PREPARATION; DATA COLLECTION; OPERATION OVERSIGHT AND MAINTENANCE; SYSTEM MONITORING; CORRESPONDENCE; MILEAGE; POSTAGE; PER DIEM

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
Mileage	DAHL & Associates, Inc.	16737	24.00	.38	9.12
Magnhelic Gauge Set			1.00	10.00	10.00
Water Level Indicator			1.00	15.00	15.00
108 Flame Ionization Detector			1.00	115.00	115.00
PH Meter			1.00	16.00	16.00
1/3 Hp Vacuum pump			1.00	15.00	15.00
12 V Air Sampling Pump			1.00	40.00	40.00
Draeger Pump			1.00	10.00	10.00
Report/Water Data			1.25	30.00	37.50
Mob/Data Collection/Water Sample			7.75	41.00	317.75
Water Flow Direction			.50	42.00	21.00
Data Collection/Sampling/Monitor			1.00	54.00	54.00
State Reg/Work Plan/Water Data			9.25	74.00	684.50
Sampling/Monitor/Water Data			2.75	86.00	236.50
Disposable Check Valve Bailer			1.00	63.20	63.20
High Pressure Seal/Pin			1.00	30.53	30.53
Monitoring Well Permit			1.00	324.00	324.00
Mileage		17049	35.00	.38	13.30
Magnehelic Gauge Set			1.00	10.00	10.00
					0.00
				TOTAL	2,022.40

PART IV ELIGIBLE COST WORKSHEET - INVESTIGATION AND CLEAN-UP

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J. REPORT PREPARATION; DATA COLLECTION; OPERATION OVERSIGHT AND MAINTENANCE; SYSTEM MONITORING; CORRESPONDENCE; MILEAGE; POSTAGE; PER DIEM

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
Product/Water Indicator	DAHL & Associates, Inc.	17049	1.00	30.00	30.00
Dissolved Oxygen Meter			1.00	20.00	20.00
1/3 Hp Vacuum Pump			1.00	15.00	15.00
Draeger Pump			1.00	10.00	10.00
Water Data/Discharge Report			3.50	30.00	105.00
Mob/Data Collection/Water Sample			8.50	41.00	348.50
Discharge Report			2.50	52.00	130.00
Sampling/Monitor/Data Collection			1.75	54.00	94.50
Work Plan/Sampling/Monitor			7.25	74.00	536.50
Water Data			1.50	86.00	129.00
Job Related Expense			2.00	-1.12	-2.24
Mileage		17332	30.00	.38	11.40
Magnehelic Gauge Set			1.00	10.00	10.00
Water Level Indicator			1.00	15.00	15.00
Combustible Gas/Oxy Meter			1.00	75.00	75.00
1/3 Hp Vacuum Pump			1.00	15.00	15.00
Draeger Pump & Tubes			1.00	10.00	10.00
Administrative/Quarterly Report			2.75	30.00	82.50
Work Plan/Data Collection			6.00	41.00	246.00
					0.00
				TOTAL	1,881.16

PART IV ELIGIBLE COST WORKSHEET - INVESTIGATION AND CLEAN-UP

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J. REPORT PREPARATION; DATA COLLECTION; OPERATION OVERSIGHT AND MAINTENANCE; SYSTEM MONITORING; CORRESPONDENCE; MILEAGE; POSTAGE; PER DIEM

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
Data Collection/Sampling/Monitor	DAHL & Associates, Inc.	17332	1.75	54.00	94.50
Report/Water Appropriation			8.50	62.00	527.00
Water Flow Direction			1.25	42.00	52.50
Work Plan/Report/Water Data			5.25	74.00	388.50
Water Data/Recovery System Data			2.50	86.00	215.00
Water Appropriations Permit			1.00	54.00	54.00
Mileage		17681	60.00	.38	22.80
Water Level Indicator			1.00	15.00	15.00
Dissolved Oxygen Meter			1.00	20.00	20.00
Portable Compressor			1.00	24.00	24.00
Hand Auger			2.00	20.00	40.00
1" Sandpiper Diaphragm			3.00	24.00	72.00
Portable Compressor			2.00	24.00	48.00
Water Data/Administrative			1.25	30.00	37.50
Ground Water Data			.25	35.00	8.75
Water Sample/Data Collection			8.25	41.00	338.25
Work Plan/Data Collection			12.50	54.00	675.00
Ground Water Data			.50	52.00	26.00
Work Plan/Annual Report			20.25	62.00	1,255.50
					0.00
				TOTAL	3,914.30

PART IV ELIGIBLE COST WORKSHEET - INVESTIGATION AND CLEAN-UP

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J. REPORT PREPARATION; DATA COLLECTION; OPERATION OVERSIGHT AND MAINTENANCE; SYSTEM MONITORING; CORRESPONDENCE; MILEAGE; POSTAGE; PER DIEM

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
Work Plan/Plan Drilling	DAHL & Associates, Inc.	17681	11.25	74.00	832.50
Remedial Perform Evaluation			2.50	86.00	215.00
Disposable Check Valve Bailer			1.00	36.35	36.35
Mileage		17931	28.00	.38	10.64
Magnehelic Gauge Set			1.00	10.00	10.00
Water Level Indicator			1.00	15.00	15.00
128 Flame ionization Detector			1.00	115.00	115.00
Dissolved Oxygen Meter			1.00	20.00	20.00
1/3 Hp Vacuum Pump			1.00	15.00	15.00
Fyrite 02 & Co2			1.00	20.00	20.00
Documentation/Discharge Report			1.00	30.00	30.00
Mob/Water Sample/Data Collection			5.00	41.00	205.00
Data Collection			1.00	54.00	54.00
Water Data/Recovery System			3.00	62.00	186.00
Work Plan/Sampling/Monitor			5.75	74.00	425.50
Documentation		18230	.25	30.00	7.50
Mobilization/Water Sample			5.75	41.00	235.75
Recovery System/Annual Report			22.00	62.00	1,364.00
Sampling/Monitor/Data Collection			1.25	54.00	67.50
					0.00
				TOTAL	3,864.74

PART IV ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP

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J. REPORT PREPARATION; DATA COLLECTION; OPERATION OVERSIGHT AND MAINTENANCE; SYSTEM MONITORING; CORRESPONDENCE; MILEAGE; POSTAGE; PER DIEM

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
Plan Drilling/Work Plan	DAHL & Associates, Inc.	18230	3.00	74.00	222.00
Recovery System Maintenance			1.50	86.00	129.00
Disposable Check Valve Bailer			1.00	24.78	24.78
Air Snifter Valves			1.00	15.18	15.18
Telephone Expense			1.00	61.92	61.92
Mileage			36.00	.38	13.68
Magnehelic Gauge Set			1.00	10.00	10.00
Water Level Indicator			1.00	15.00	15.00
128 Flame Ionization Detector			1.00	115.00	115.00
Dissolved Oxygen Meter			1.00	20.00	20.00
PH Meter			1.00	16.00	16.00
1/3 Hp Vacuum Pump			1.00	15.00	15.00
Mileage		18515	52.00	.38	19.76
12 V Air Sampling Pump			1.00	40.00	40.00
Magnehelic Gauge Set			1.00	10.00	10.00
Water Level Indicator			1.00	15.00	15.00
128 Flame Ionization Detector			1.00	115.00	115.00
Dissolved Oxygen Meter			1.00	20.00	20.00
1/3 Vacuum Pump			1.00	15.00	15.00
					0.00
				TOTAL	892.32

PART IV **ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP**

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J. REPORT PREPARATION; DATA COLLECTION; OPERATION OVERSIGHT AND MAINTENANCE; SYSTEM MONITORING; CORRESPONDENCE; MILEAGE; POSTAGE; PER DIEM

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
Fyrite O2 & Co2	DAHL & Associates, Inc.	18515	1.00	20.00	20.00
Administrative			2.25	30.00	67.50
Mob/Water Sample/Air Sample			9.00	41.00	369.00
Water Flow Direction/Draft Map			3.25	42.00	136.50
Sampling/Monitor/Data Collection			2.75	54.00	148.50
Annual Report/Mob/Data Collection			12.50	62.00	775.00
Annual Report			3.00	74.00	222.00
Annual report/Remedial Perform			2.25	86.00	193.50
Disposable Check Valve Bailer			1.00	41.34	41.34
Telephone Expense			1.00	61.92	61.92
Mileage		18748	30.00	.38	11.40
Magnehelic Gauge Set			1.00	10.00	10.00
Water Level Indicator			1.00	15.00	15.00
108 Flame Ionization Detector			1.00	115.00	115.00
1/3 Hp Vacuum Pump			1.00	15.00	15.00
Draeger Pump & Tubes			1.00	10.00	10.00
Documentation			1.25	30.00	37.50
Discharge Report			.25	35.00	8.75
Mob/Data Collection/Sampling			6.00	41.00	246.00
					0.00
				TOTAL	2,503.91

PART IV **ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP**

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J. REPORT PREPARATION; DATA COLLECTION; OPERATION OVERSIGHT AND MAINTENANCE; SYSTEM MONITORING; CORRESPONDENCE; MILEAGE; POSTAGE; PER DIEM

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
Water Flow Direction	DAHL & Associates, Inc.	18748	1.00	42.00	42.00
Field Services/Data Collection			1.75	54.00	94.50
Report/Recovery System Data			9.00	62.00	558.00
Sampling/Monitor/Discharge Report			6.25	74.00	462.50
Telephone Expense			1.00	61.92	61.92
					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
				TOTAL	1,218.92

PART IV ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP

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K. MARK-UP

Description	Firm Name	General Contractor Invoice #	Sub-Contractor Invoice #	Mark Up %	Sub-total
Sample Mark - Up	DAHL/Twin City Testing	14829	4413-94-5104	8%	7.44
Sample Mark - Up	DAHL/Twin City Testing	15142	4413-94-5496	8%	36.24
Sample Mark - Up	DAHL/Interpoll	15142	67366	8%	7.20
Sample Mark - Up	DAHL/Twin City Testing	15528	4413-94-5696	8%	7.44
Sample Mark - Up	DAHL/Twin City Testing	15806	4413-94-6184	8%	24.00
Sample Mark - Up	DAHL/Interpoll	15806	67990	8%	7.20
Sample Mark - Up	DAHL/Twin City Testing	16423	4411-95-1715	8%	7.44
Sample Mark - Up	DAHL/Twin City Testing	16737	4411-95-1874	8%	7.44
				TOTAL	104.40

L. OTHER CONSULTANT SERVICES (specify)

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
				TOTAL	0.00

PART IV ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP

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K. MARK-UP

Description	Firm Name	General Contractor Invoice #	Sub-Contractor Invoice #	Mark Up %	Sub-total
Sample Mark - Up	DAHL/Twin City Testing	17049	4411-95-2350	8%	36.24
Sample Mark - Up	DAHL/Interpoll	17049	68846	8%	7.20
Sample Mark - Up	DAHL/Pace	17332	10-018549	8%	6.72
Sample Mark - Up	DAHL/Pace	17332	10-018835	8%	5.60
Sample Mark - Up	DAHL/Pace	17681	10-019243	8%	27.20
Sample Mark - Up	DAHL/Pace	17931	10-019697	8%	5.60
Sample Mark - Up	DAHL/Pace	18515	10-020272	8%	5.60
Sample Mark - Up	DAHL/Legend	18748	008007	8%	4.00
Total				TOTAL	98.16

L. OTHER CONSULTANT SERVICES (specify)

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
				TOTAL	0.00

PART IV ELIGIBLE COSTS WORKSHEET - INVESTIGATION AND CLEAN-UP

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K. MARK-UP

Description	Firm Name	General Contractor Invoice #	Sub-Contractor Invoice #	Mark Up %	Sub-total
Sample Mark - Up	DAHL/Pace	18748	10-021040	8%	27.20
Total				**TOTAL**	27.20

L. OTHER CONSULTANT SERVICES (specify)

Description	Firm Name	Invoice # or date	Total Units	Unit Costs	Sub-total
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
				TOTAL	0.00