



Illinois Environmental Protection Agency

Bureau of Land • 1021 North Grand Avenue East • P.O. Box 19276 • Springfield • Illinois • 62794-9276

RCRA FACILITY GROUNDWATER, LEACHATE AND GAS REPORTING FORM

This form must be used as a cover sheet for the notices and reports, identified below as required by: (1) a facility's RCRA interim status closure plan; (2) the RCRA interim status regulations; or (3) a facility's RCRA permit. All reports must be submitted to the Illinois EPA's Bureau of Land Permit Section. This form is for use by Hazardous Waste facilities only. Reporting for Solid Waste facilities should be submitted on a separate form. All reports submitted to the Illinois EPA's Bureau of Land Permit Section must contain an original, plus a minimum of two copies.

Note: This form is not to be used with permit or closure plan modification requests. The facility's approved permit or closure plan will state whether the document you are submitting is required as a report or a modification request.

Facility Name: Equilon Enterprises LLC d/b/a Shell Oil Products US

Facility Address: 900 South Central Avenue; Roxana, IL 62084

Site ID #: 1191150002 Fed ID #: ILD080012305

Check the appropriate heading. Only one heading may be checked for each corresponding submittal. Check the appropriate sub-heading, where applicable. Attach the original and all copies behind this form.

☐ LPC-160 Forms

Groundwater

☐ Quarterly - Enter: 1, 2, 3, or 4

☐ Semi-Annual

☐ Annual

☐ Biennial

Leachate

☐ Quarterly - Enter: 1, 2, 3, or 4

☐ Semi-Annual

☐ Annual

☐ Biennial

☐ Groundwater Data (without LPC-160 Forms)

☐ Quarterly - Enter: 1, 2, 3, or 4 ☐ Annual ☐ Semi-Annual ☐ Biennial

☐ Well Construction Information

☐ Well Construction Forms, Boring Logs and/or Abandonment Forms

☐ Well Survey Data (e.g., Stick-up Elevation Data)

☐ Notice of Statistically Significant Evidence of Groundwater Contamination
(35 Ill. Adm. Code 724.198)

☐ Notice of Exceedence of Groundwater Concentration Limit (35 Ill. Adm. Code 724.199(h))

☐ Notice of Alternate Source or Error in Sampling Analysis or Evaluation of Groundwater
(35 Ill. Adm. Code 724.199(i))

☐ Gas Monitoring Reports

☒ Other (identify)

Water Well Sealing Forms for five abandoned groundwater monitoring wells.



AECOM 314 429 0100 tel
1001 Highlands Plaza Drive West 314 429 0462 fax
Suite 300
St. Louis, MO 63110-1337
www.aecom.com

April 20, 2015

Stephen F. Nightingale, P.E.
Manager, Permit Section
Bureau of Land
Illinois Environmental Protection Agency
1021 North Grand Avenue
Springfield, Illinois 62794

**Subject: Groundwater Monitoring Well Abandonment
Equilon Enterprises LLC d/b/a Shell Oil Products US
Roxana, Illinois
1191150002 – Madison County
ILD 080 012 305
Log No. B-43R-M-17 & M-19**

Dear Mr. Nightingale:

AECOM (formerly URS Corporation), on behalf of Shell Oil Products US (SOPUS), is submitting the enclosed Water Well Sealing Forms as required by the referenced RCRA Hazardous Waste Management Post-Closure Permit (Permit). One groundwater monitoring well was abandoned on January 12, 2015 and four groundwater monitoring wells were abandoned on March 17, 2015. All monitoring well abandonments were performed after their replacement monitoring wells were installed and monitoring data had been obtained and verified, in accordance with Condition IV.D.4. of the Permit. The enclosed Water Well Sealing Forms are being submitted in accordance with Condition IV.D.6. of the Permit.

If you have any questions concerning this report, please contact Kevin Dyer, SOPUS Senior Principal Program Manager at (618) 288-7237 or kevin.dyer@shell.com; or Bob Billman at (314) 743-4108 or bob.billman@aecom.com.

Sincerely,

Wendy Pennington
Project Engineer

Bob Billman
Senior Project Manager

Cc: Kevin Dyer, SOPUS
Eric Petersen, Phillips 66
Shannon Haney, Greensfelder, Hemker & Gale P.C.
Repositories (Roxana Village Hall, website, Roxana Public Library)

Enclosures: Water Well Sealing Forms (monitoring wells P-55, P-57, P-92C, P-93A, P-93C)

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 WEST JEFFERSON STREET
SPRINGFIELD, ILLINOIS 62761

RETURN ALL COPIES TO IDPH OR
LOCAL HEALTH DEPARTMENT

TYPE OR PRESS FIRMLY

This form shall be submitted to this Department or the local health department not more than 30 days after a water well, boring or monitoring well is sealed. Such wells are to be sealed not more than 30 days after they are abandoned in accordance with the sealing requirements in the Water Well Construction Code.

1. Ownership (Name of Controlling Party) EQUILON ENTERPRISES LLC DBA SHELL OIL PRODUCTS

2. Well Location: 900 SOUTH CENTRAL AVE ROXANA MADISON
Address - Lot Number City County

General Description: Township 5N (N)(S) Range 9W (E)(W) Section 35
SW Quarter of the SW Quarter of the NW Quarter

| |
|---------------------------|
| LAT: <u>38° 50' 47.8"</u> |
| LONG: <u>90° 4' 35.4"</u> |

3. Year Drilled APRIL 1989

4. Drilling Permit Number (and date, if known) (unknown)

5. Type of Well: Bored Drilled Other (Monitoring Well: P-55)

6. Total Depth 62' Diameter(inches) 2"

7. Formation clear of obstruction X Yes No

8. DETAILS OF PLUGGING

Filled with H.S. Bentonite Grout from 62' to 1 ft.
(cement or other materials)

Kind of plug Bentonite Chips from 1 to 0 ft.

Filled with from to ft.

Kind of plug from to ft.

Filled with from to ft.

Kind of plug from to ft.

9. CASING RECORD: Upper 2 feet of casing removed X Yes No

10. Date well was sealed: Month MAR. Day 17 Year 2015

11. Licensed water well driller or other person approved by the Department performing well sealing.

CHARLEY ROBERTS / ROBERTS ENV. DRILLING 092-006865
Name Complete License Number

1107 S. MULBERRY STREET MILLSTADT IL / 62260
Address City State/Zip

This State Agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act 85-6263. Disclosure of this information is mandatory. This form has been approved by the Forms Management Center.

P.O. #PRT3030244 5M 6/98

IL 482-4631

(REDI JOB# 152035 -AB)

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 WEST JEFFERSON STREET
SPRINGFIELD, ILLINOIS 62761

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1. Ownership (Name of Controlling Party) EQUILON ENTERPRISES LLC DBA SHELL OIL PRODUCTS

2. Well Location: 900 SOUTH CENTRAL AVE ROXANA MADISON
Address - Lot Number City County

General Description: Township 5N (N)(S) Range 9W (E)(W) Section 35
NW Quarter of the NW Quarter of the NW Quarter

LAT: 38° 50' 33.5"
LONG: 90° 4' 35.0"

3. Year Drilled APRIL 1989

4. Drilling Permit Number (and date, if known) (unknown)

5. Type of Well: Bored Drilled Other (Monitoring Well: P-57)

6. Total Depth 65' Diameter(inches) 2"

7. Formation clear of obstruction X Yes No

8. DETAILS OF PLUGGING

Filled with H.S. Bentonite Grout from 65' to 1 ft.
(cement or other materials)

Kind of plug Bentonite Chips from 1 to 0 ft.

Filled with from to ft.

Kind of plug from to ft.

Filled with from to ft.

Kind of plug from to ft.

9. CASING RECORD: Upper 2 feet of casing removed X Yes No

10. Date well was sealed: Month MAR. Day 17 Year 2015

11. Licensed water well driller or other person approved by the Department performing well sealing.

CHARLEY ROBERTS / ROBERTS ENV. DRILLING 092-006865
Name Complete License Number

1107 S. MULBERRY STREET MILLSTADT IL / 62260
Address City State/Zip

This State Agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act 85-4363. Disclosure of this information is mandatory. This form has been approved by the Forms Management Center.

(REDI JOB# 152035 -AB)

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 WEST JEFFERSON STREET
SPRINGFIELD, ILLINOIS 62761

RETURN ALL COPIES TO IDPH OR
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This form shall be submitted to this Department or the local health department not more than 30 days after a water well, boring or monitoring well is sealed. Such wells are to be sealed not more than 30 days after they are abandoned in accordance with the sealing requirements in the Water Well Construction Code.

1. Ownership (Name of Controlling Party) EQUILON ENTERPRISES LLC DBA SHELL OIL PRODUCTS

2. Well Location: 900 SOUTH CENTRAL AVE ROXANA MADISON
Address - Lot Number City County

General Description: Township 5N (N)(S) Range 9W (E)(W) Section 35

NW Quarter of the SE Quarter of the NW Quarter

| | |
|------|----------------|
| LAT: | 38° 50' 37.26" |
|------|----------------|

| | |
|-------|---------------|
| LONG: | 90° 4' 11.38" |
|-------|---------------|

3. Year Drilled MARCH 1991

4. Drilling Permit Number (and date, if known) (unknown)

5. Type of Well: Bored Drilled Other (Monitoring Well: P-92C)

6. Total Depth 96' Diameter(inches) 2"

7. Formation clear of obstruction X Yes No

8. DETAILS OF PLUGGING

Filled with H.S. Bentonite Grout from 96 to 1 ft.
(cement or other materials)

Kind of plug Bentonite Chips from 1 to 0 ft.

Filled with from to ft.

Kind of plug from to ft.

Filled with from to ft.

Kind of plug from to ft.

9. CASING RECORD: Upper 2 feet of casing removed X Yes No

10. Date well was sealed: Month JAN. Day 12 Year 2015

11. Licensed water well driller or other person approved by the Department performing well sealing.

CHARLEY ROBERTS / ROBERTS ENV. DRILLING 092-006865

Name

Complete License Number

1107 S. MULBERRY STREET

MILLSTADT

IL / 62260

Address

City

State/Zip

This State Agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act 85-6863. Disclosure of this information is mandatory. This form has been approved by the Forms Management Center.

P.O. #PK13030244 5M 6/98

IL 482-0631

(REDI JOB# 142238 -AB)

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 WEST JEFFERSON STREET
SPRINGFIELD, ILLINOIS 62761

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1. Ownership (Name of Controlling Party) EQUILON ENTERPRISES LLC DBA SHELL OIL PRODUCTS

2. Well Location: 900 SOUTH CENTRAL AVE ROXANA MADISON
Address - Lot Number City County

General Description: Township 5N (N)(S) Range 9W (E)(W) Section 35
NW Quarter of the NW Quarter of the NW Quarter

| | |
|-------|---------------|
| LAT: | 38° 50' 32.2" |
| LONG: | 90° 4' 33.5" |

3. Year Drilled MARCH 1991

4. Drilling Permit Number (and date, if known) (unknown)

5. Type of Well: Bored Drilled Other (Monitoring Well: 93 A)

6. Total Depth 61' Diameter(inches) 2"

7. Formation clear of obstruction X Yes No

8. DETAILS OF PLUGGING

Filled with H.S. Bentonite Grout from 61' to 1 ft.
(cement or other materials)

Kind of plug Bentonite Chips from 1 to 0 ft.

Filled with from to ft.

Kind of plug from to ft.

Filled with from to ft.

Kind of plug from to ft.

9. CASING RECORD: Upper 2 feet of casing removed X Yes No

10. Date well was sealed: Month MAR. Day 17 Year 2015

11. Licensed water well driller or other person approved by the Department performing well sealing.
CHARLEY ROBERTS / ROBERTS ENV. DRILLING 092-006865
Name Complete License Number
1107 S. MULBERRY STREET MILLSTADT IL / 62260
Address City State/Zip

This State Agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act 85-4863. Disclosure of this information is mandatory. This form has been approved by the Forms Management Center.

P.O. #PRT3030244 5M 6/98

IL 481-0631

(REDI JOB# 152035 -AB)

ILLINOIS DEPARTMENT OF PUBLIC HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
525 WEST JEFFERSON STREET
SPRINGFIELD, ILLINOIS 62761

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1. Ownership (Name of Controlling Party) EQUILON ENTERPRISES LLC DBA SHELL OIL PRODUCTS

2. Well Location: 900 SOUTH CENTRAL AVE ROXANA MADISON
Address - Lot Number City County

General Description: Township 5N (N)(S) Range 9W (E)(W) Section 35

NW Quarter of the NW Quarter of the NW Quarter

LAT: 38° 50' 31.4"

LONG: 90° 4' 32.8"

3. Year Drilled MARCH 1991

4. Drilling Permit Number (and date, if known) (unknown)

5. Type of Well: Bored Drilled Other (Monitoring Well: 93 C)

6. Total Depth 94' Diameter(inches) 2"

7. Formation clear of obstruction X Yes No

8. DETAILS OF PLUGGING

Filled with H.S. Bentonite Grout from 94' to 1 ft.
(cement or other materials)

Kind of plug Bentonite Chips from 1 to 0 ft.

Filled with from to ft.

Kind of plug from to ft.

Filled with from to ft.

Kind of plug from to ft.

9. CASING RECORD: Upper 2 feet of casing removed X Yes No

10. Date well was sealed: Month MAR. Day 17 Year 2015

11. Licensed water well driller or other person approved by the Department performing well sealing.

CHARLEY ROBERTS / ROBERTS ENV. DRILLING 092-006865

Name Complete License Number

1107 S. MULBERRY STREET MILLSTADT IL / 62260

Address City State/Zip

This State Agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under Public Act 85-6353. Disclosure of this information is mandatory. This form has been approved by the Forms Management Center.

P.O. #PRT3030244 5M 6/98

IL 482-0431

(REDI JOB# 152035 -AB)